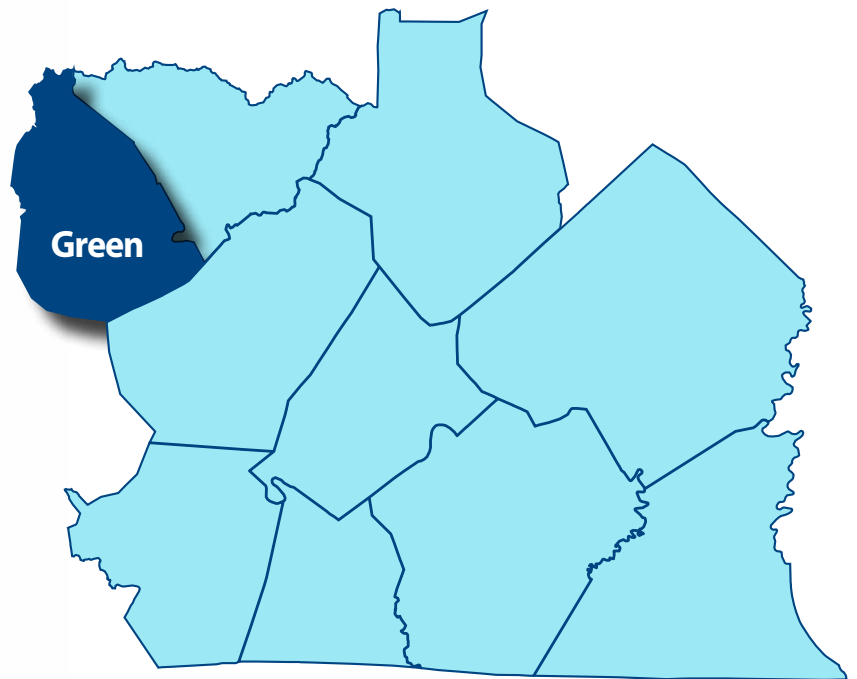


## 2014 Community Health Assessment



A Healthy **Today** for  
a Brighter **Tomorrow.**



**Shawn Crabtree**  
**MSSW, MPA**  
*Director*  
Lake Cumberland District  
Health Department

## An important message from the Director

Judging by quality and longevity of life, compared to other developed countries, the United States is one of the unhealthiest countries in the world. By almost any health indicator one cares to consider, Kentucky is one of the most unhealthy states in America. And, when reviewing our region's Health Report Card, Lake Cumberland scores a "D" in almost every health category. Basically, Lake Cumberland is one of the unhealthiest places in the developed world.

This is something for which we should all be appalled. Furthermore, we should all be motivated to work together to achieve something better. Bringing together our community partners to consider our health status and to develop plans for area-wide improvements is vital in changing our dismal statistics. Hopefully we can all work together to achieve "a healthy today, for a brighter tomorrow".

A Healthy **Today** for a Brighter **Tomorrow**.

[www.LCDHD.org](http://www.LCDHD.org)



[www.facebook.com/LCDHD](http://www.facebook.com/LCDHD)



[www.twitter.com/LCDHD](http://www.twitter.com/LCDHD)



[www.instagram.com/lcdhd\\_org](http://www.instagram.com/lcdhd_org)

# Green County Health and Wellness Coalition

*“Coming together is the beginning. Keeping together is progress. Working together is success.”*  
– Henry Ford

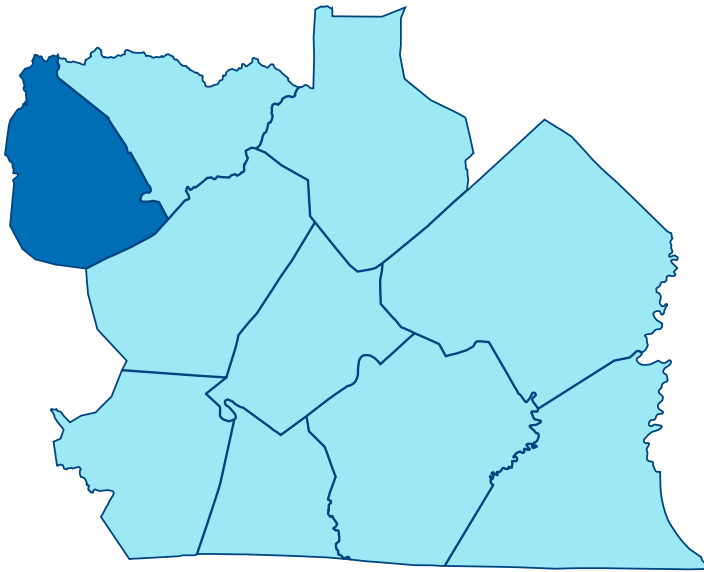
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# Health Policy and Promotion Community Health Assessment

The Lake Cumberland District Health Department (LCDHD) is located in rural south central Kentucky. The LCDHD is comprised of ten counties: Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor and Wayne. The District covers around 3,613 square miles with a population of approximately 204,000 (US Census 2013 estimates). As one travels through our District they will notice an abundance of beautiful scenic opportunities along with a National and several State Parks. Nonetheless, the natural beauty of our rural communities and open countryside comes with many health challenges.



## The Lake Cumberland District Health Department Vision:

To be a leader in preventive health care, health education, and environmental monitoring in collaboration with the public and private sectors. We will show compassion and respect as we strive to improve the health of our communities.

Green County is located in south central Kentucky. Greensburg, is the County Seat. The county is named for Revolutionary War hero General Nathanael Greene, but the reason why the final E is missing is unknown. Green County has a population of 11,180.

Three courthouses have served Green County. In 1804, a brick building replaced an earlier structure, and while no longer operational, it stands in the Downtown Greensburg Historic District as the oldest courthouse building in the commonwealth. The present courthouse dates from 1931.



## Green County Vision Statement:

All citizens united to provide a healthier tomorrow by focusing on one another to promote better lifestyle choices, education, resources and a safe environment for all who live, work and play in Green County.

County Health Rankings data ranks Green County's Health Outcome:

# 32 out of 120 counties

# Mobilizing for Action through Planning and Partnerships (MAPP)

Mobilizing Action through Partnership and Planning (MAPP) is a shift in how we think about strategic public planning. It shifts from operational strategic planning to focus on the community and the entire public health system. Mobilizing for Action through Planning and Partnership (MAPP) is a strategic tool that helps communities improve health and quality of life through community-wide strategic planning. The MAPP tool was developed by the National Association of County and City Health Officials (NACCHO) in cooperation with the U.S. Centers for Disease Control and Prevention's (CDC) Public Health Practice Program Office. Through MAPP, communities seek to achieve optimal health by identifying and using their resources wisely, accounting for their unique circumstances and needs, and forming effective partnerships for strategic action. MAPP focuses on the creation and strengthening of the local public health system. Local public health systems are defined as all entities that contribute to the delivery of public health services within a community. This system includes all public, private, and voluntary entities.

MAPP utilizes the Ten Essential Public Health Services to define public health activities. The Ten Essential Public Health Services provide a useful framework for determining who is responsible for the community's health and well-being. The services reflect core processes used in public health to promote health and prevent disease.



## Ten Essential Public Health Services

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

figure 1:  
Ten Essential Public Health Services

# LCDHD's Road MAPP to Health Improvement

The Lake Cumberland District Health Department, Health Policy and Promotion Department has been facilitating Mobilizing Action through Partnerships and Planning (MAPP), over the past two years. MAPP is a framework to help communities apply strategic thinking to prioritize public health issues and identify resources to address them. This interactive process will improve the efficiency, effectiveness, and ultimately the performance of local public health systems. Our goal is to bring the local public health systems together, through community wide-strategic planning, to create a healthier community.

The Green County Community Health Assessment Booklet, provides statistical information, community input and environmental forces that are essential in determining the health status, behaviors and needs of the residents of Green County.



figure 2: Community Roadmap

The process is shown moving along a road that leads to a healthier community. The MAPP process is initiated when the local public health systems organize themselves, recruit participants, and prepare to implement MAPP. The second phase, Visioning, provides a framework for pursuing long range community goals.

## OUR GOAL:

To bring the local public health systems together to create a healthier community through community-wide strategic planning

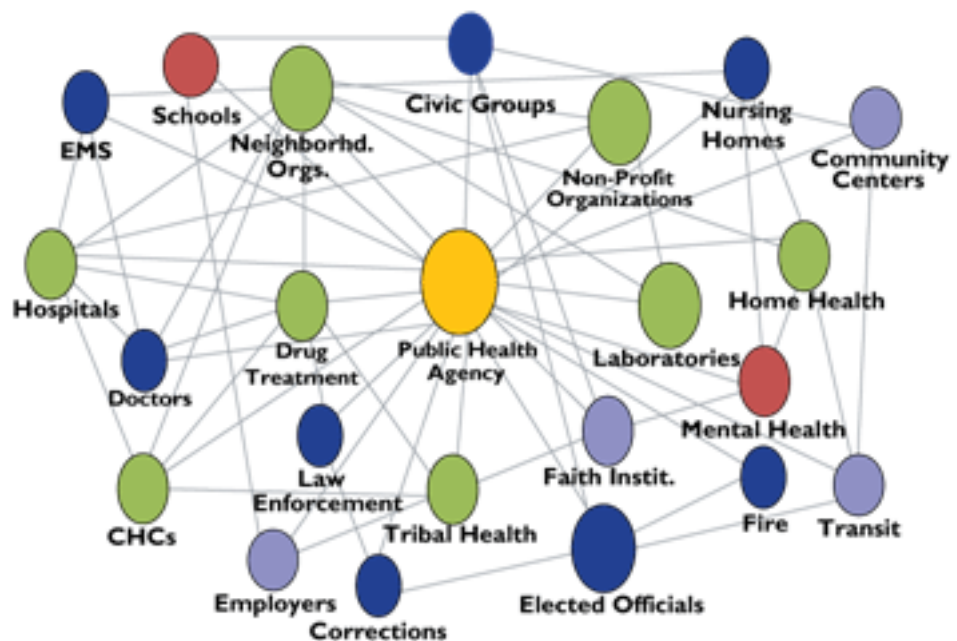


figure 3: Local Public Health System

# Green County Community Health Assessment Information

Green County Health and Wellness Coalition has compiled four assessments which make up the Green County Community Health Assessment Booklet. These four assessments assist in creating a picture of residents of the county with health strengths and opportunities. These assessments provided insight on the gaps between current circumstances, provided information to use to identify the strategic issues, and served as the source of information from which our strategic issues, strategies and goals are built.

The four assessments conducted were:

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



In the MAPP model, the phases of the MAPP process are shown in the center of the model, while the four MAPP Assessments - the key content areas that drive the process - are shown in four outer arrows.

figure 4: MAPP Model

11th Judicial Circuit Court - Drug Court  
Adanta

Adanta Regional Prevention Center

Alliance for a Healthier Generation

Amedisys Home Health

Bobrowski Family Dentistry

Campbellsville University School of  
Nursing

Central Kentucky Primary Care

City of Greensburg

Commonwealth Broadcasting

Elizabethtown Community and Technical  
College

Forcht Bank

Golden Living Nursing Home

Green County - County Attorney

Green County Adult Learning Center

Green County Area Technology Center

Green County Board of Education

Green County Cooperative Extension  
Service

Green County Division of Child Based  
Services

Green County Health Department

Green County High School Student Body

Green County Judge Executive

Green County KY-ASAP

Green County Middle School Student Body

Green County Ministerial Association

Green County Park Board

Green County Public Library

Green County School System

Green County Sheriff's Department

Green County Ambulance Service

Green River Ministries

Greensburg City Police

Greensburg Record-Herald

Greensburg United Methodist Church

Greensburg/Green County Chamber of  
Commerce

Jane Todd Crawford Hospital

Lifeline Home Health

Lindsey Wilson College

## Strategic Plan for Community Improvement

Supported by the Lake Cumberland District Health Department, the MAPP process for the Green County Health and Wellness Coalition began on September 26, 2012. The coalition has completed the four MAPP assessments: Community Themes and Strengths, Local Public Health System Assessment, Community Health Status Assessment and Forces of Change Assessment. These assessments provided insight on the gaps between current circumstances, provided information to use to identify the strategic issues, and served as the source of information from which our strategic issues, strategies and goals were built.

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Green County Health and Wellness Coalition strives to organize for success through partnership development and began by conducting several visioning sessions. This document presents the findings of the four MAPP assessments collected between August 2010 and April 2013.

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*All public, private and voluntary organizations, agencies, groups and individuals that have interests in population health improvements are invited to join Green County Health and Wellness Coalition.*

### ***Interested in Joining?***

Contact Jaclyn Hodges at 270-932-4341 ext: 4849 or email: [jaclyne.hodges@lcdhd.org](mailto:jaclyne.hodges@lcdhd.org) for meeting information.



# Green County Health and Wellness Coalition in Action



# Community Health Status Assessment

Green County covers 286.03 square miles including the city of Greensburg. Green County population is 11,180 with a population density of 39 people per square mile. 21.4 % of the population is under the age of 18 and 18.5% of the population is over age 65.



## Demographic Characteristics

	Green County	District	Kentucky	USA
Population, 2013 estimate <sup>1</sup>	11,180	203,949	4,395,295	316,128,839
Persons under 18, percent <sup>1</sup>	21.4%	22.2%	23.1%	23.3%
Person 65 and over, percent <sup>1</sup>	18.5%	17.7%	14.4%	14.1%
Female, percent <sup>1</sup>	50.4%	50.5%	50.8%	50.8%
Male, percent <sup>1</sup>	49.6%	49.5%	49.2%	49.2%
White alone, percent <sup>1</sup>	96.0%	95.6%	88.5%	77.7%
Black or African American, percent <sup>1</sup>	2.2%	2.4%	8.2%	13.2%
American Indian/Alaska Native, percent <sup>1</sup>	0.4%	0.3%	0.3%	1.2%
Hispanic or Latino, percent <sup>1</sup>	1.6%	2.3%	3.3%	17.1%
Reporting two or more races, percent <sup>1</sup>	1.4%	1.2%	1.7%	2.4%
School District Enrollment <sup>2</sup>	1,691	31,607	675,530	495,000,000

SOURCES: <sup>1</sup>US Census Bureau: State and County Quick Facts, Data derived from Population Estimates, American Community Survey, Census of Populations. July 8, 2014. <sup>2</sup>Kentucky Department for Education, Schools and District Attendance; August, 5, 2014; <http://education.ky.gov/comm/Pages/2013-2014-Kentucky-Schools->

# Community Health Status Assessment

Socioeconomic characteristics play an important role in determining the health status of a county. The unemployment rate is 7.9% of our population. The median household income is \$33,573 with 31% of our children living in poverty. Homeownership rates are 75.8%. 21% of the population is without adequate social support. The rate of children living in single parent homes is 34%.

## Socioeconomic Characteristics

	Green County	District	Kentucky	USA
1. Unemployment <sup>1</sup>	7.9%	9.5%	8.2%	NDA*
2. Median household income <sup>2</sup>	\$33,573	\$29,685	\$42,610	\$53,046
3. Homeownership <sup>2</sup>	75.8%	73.9%	68.7%	65.5%
4. Children in poverty <sup>1</sup>	31%	38%	27%	NDA*
5. Inadequate social support <sup>1</sup>	21%	23%	20%	NDA*
6. Children in single parent households <sup>1</sup>	34%	34%	34%	NDA*

NDA\* - No Data Available.

NOTE: 1, 3, 4, 5, 6 - Represent a percentage of the total population.

SOURCES: <sup>1</sup>CHR - County Health Ranking, 2014. <sup>2</sup>US Census Bureau: State and County Quick Facts. Data derived from Population Estimates, America Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, Economic Census, and Building Permits, July 8, 2014

Behavior risk factors directly impact the individual and community's overall health status. There is a strong correlation between behavior risk factors and mortality rates. Adult obesity in Green County is 30% and 38% of the population are physically inactive. The CDC estimated in 2012 more than one third of adolescents and teens were overweight or obese. According to Kentucky Health Facts, data indicates that 31% of adults in Green County smoke.

## Behavior Risk Factors

	Green County	District	Kentucky
1. Adult Obesity (adults ≥ 18)*	30%	33%	33%
2. Physical Inactivity (adults ≥ 18)**	38%	36%	31%
3. Adult Smoking (adults ≥ 18)***	31%	29%	26%
4. Excessive Drinking (adults ≥ 18)****	NDA*	NDA*	12%

NDA\* - No Data Available.

NOTE: 1, 2, 3, 4 - Represent the total percentage of the population of adults ≥ 18.

SOURCES: CHR, County Health Ranking, 2014. \* Percent of adults with BMI over 30. \*\* Percent of population 20 or above with no leisure time activity. \*\*\* Percent of adults that smoke more than 100 cigarettes. \*\*\*\* Percent of binge drinking or heavy drinking

# Community Health Status Assessment

Humans interact with the environment constantly. These interactions affect quality of life, years of healthy life lived, and health disparities. The World Health Organization (WHO) defines environment, as it relates to health, as “all the physical, chemical, and biological factors external to a person, and all the related behaviors.” Environmental health consists of preventing or controlling disease, injury, and disability related to the interactions between people and their environment. (Healthy People, 2020)

## Physical Environment

	Green County	District	Kentucky
Air pollution-particulate matter <sup>1</sup>	13.5	13.4	13.5
Drinking water violations <sup>1</sup>	0%	2%	7%
Severe housing problems <sup>1</sup>	12%	15%	14%
Driving alone to work <sup>1</sup>	79%	81%	82%
Long commute - driving alone <sup>1</sup>	44%	28%	28%

SOURCE: <sup>1</sup> CHR - County Health Ranking, 2014

Access to community preventive services and evidence-based clinical practices reduce death, disability and health inequities and improve quality of life. (National Prevention Council, 2011; U.S. Department of Health and Human Services, 2011).

Jane Todd Crawford Hospital (JTCH) is the only hospital in Green County. According to County Health Ranking the physician to patient ratio is 11,200 to 1. Kentucky Health Facts state that 20% of Green County adults have no insurance.



## Health Resources Availability

	Green County	District	Kentucky
1. Uninsured <sup>1</sup>	20%	20%	17%
2. Primary care physician ratio <sup>1</sup>	11,200:1	NDA*	1,560:1
3. Dentist ratio <sup>1</sup>	2,829:1	NDA*	1,731:1
4. Mental health provider ratio <sup>1</sup>	2,829:1	NDA*	852:1
5. Preventable hospital stays <sup>1</sup>	103	143	103

NDA\* - No Data Available.

NOTE: 1. Represent percentage of the total population. 5. Hospitalization rate for ambulatory care sensitive conditions per 1,000 Medicare enrollees.

SOURCE: <sup>1</sup> CHR - County Health Ranking, 2014

# Community Health Status Assessment

Communicable diseases occur only when the agent comes into contact with a host in a suitable environment. Prevention and control efforts for communicable diseases may be directed to any of these three elements. Communicable diseases affect both individuals and communities, so control efforts may be directed at both. Antibiotics effectively treats most communicable diseases. A simple way to prevent the occurrence of communicable diseases is to eliminate the infectious agent through, for example, cooking food, washing hands, and sterilizing surgical instruments between each use. Assuring the safety of drinking water through filtration and chlorination. Treating sewage appropriately are other important means of preventing the spread of communicable diseases.

## Communicable Disease

	Green County	District	Kentucky
1. Syphilis <sup>1</sup>	0	5	335
2. Gonorrhea <sup>1</sup>	1	32	4,521
3. Chlamydia <sup>1</sup>	39	446	16,631
4. AIDS (number of people living with) <sup>2</sup>	6	110	7,750

NOTE: 1, 2, 3 - numbers reported.

SOURCES: <sup>1</sup> KY Vital Statistics, 2011 (Preliminary Data). <sup>2</sup> HIV Surveillance Report, 2011

Improving the well-being of mothers, infants, and children is an important public health goal for the Lake Cumberland District. Their well-being determines the health of the next generation and can help predict future public health challenges for families, communities, and the health care system. The objectives of the Maternal, Infant, and Child Health topic area address a wide range of conditions, health behaviors, and health systems indicators that affect the health, wellness, and quality of life of women, children, and families. (Healthy People, 2020)

## Maternal and Child Health

	Green County	District	Kentucky	USA
1. Total births	124	2,582	56,900	4,247,694
2. Infant mortality (rate)	8.1	7.0	6.9	6.5
3. Teen births (rate)	64.8	61.5	38.7	NDA*
4. No prenatal care first trimester (percentage)	25.0%	26.3%	27.8%	29.0%

NDA\* - No Data Available.

NOTE: 1. Total number of births. 2. Crude rate per 1,000 live births. 3. Teen births = rate per 1000 of total births born to females ages 15-19.

SOURCES: 1, 2, 4 - KY Annual Vital Statistics Report, 2008 (<http://chfs.ky.gov/dph/vital/>) and National Vital Statistics Reports for Births and Deaths ([http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59\\_07\\_tables.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_07_tables.pdf)) ([http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59\\_01.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_01.pdf)) 3. KY Annual Vital Statistic Report, 2013 (Preliminary Data) - Teen Births by County, Rates per 1,000



## Community Health Status Assessment

Social and Mental factors can indirectly and directly influence the overall health status of a person and the community. Abuse, substance abuse, neglect and violence impact the mental and physical status of individuals and communities.

Mental health is a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with challenges. Mental health is essential to personal well-being, family and interpersonal relationships, and the ability to contribute to community or society.

### Social and Mental Health

	Green County	District	Kentucky	USA
1. Mean travel time to work (minutes), workers age 16+ <sup>1</sup>	29	23.5	22.7	25.4
2. Poor or fair health (adults ≥18) <sup>2</sup>	24%	28%	21%	NDA*
3. Poor physical health days (adults ≥18) <sup>2</sup>	5.3	6.0	4.8	NDA*
4. Poor mental health days (adults ≥18) <sup>2</sup>	5.1	4.8	4.3	NDA*
5. Child abuse neglect - # of reports <sup>3</sup>	187	2,979	63,438	676,569
6. Suicide death rate per 100,000 (all ages) <sup>4</sup>	33.9	13.1	13.5	11.6

NDA\* - No Data Available.

NOTE: 2 - Represent a percentage of the total population. 3, 4 - Average number of days in the past 30 days. 5 - Number of Child Abuse Neglect Reported. 6 - Age adjusted death rates per 100,000 population  
 SOURCES: <sup>1</sup> US Census Bureau: State and County Quick Facts. Data driven from Population Estimates, America Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, Economic Census, and Building Permits, July 8, 2014. <sup>2</sup> CHR - County Health Ranking, 2014. <sup>3</sup> Child Abuse Neglect Report by County - Prevent Child Abuse Kentucky. Statistics Provided by the Cabinet for Health and Family Services, Jan. 1, 2013 - Dec. 31, 2013 [http://www.pcaiky.org/stats\\_research.html](http://www.pcaiky.org/stats_research.html) Child Maltreatment - Administration for Children and Families - Department for Health And Human Services: <http://www.acf.hhs.gov/sites/default/files/cb/cm2012.pdf>. <sup>4</sup> KY Annual Vital Statistics Report 2008 (<http://chfs.ky.gov/dph/vital/>) and National Vital Statistics Reports Vol. 59, No. 10, December 7, 2011 (2008 data) ([http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59\\_10.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_10.pdf))

## Forces of Change Assessment

The Forces of Change Assessment (FOC) is one of four assessments conducted as part of the Mobilizing for Action through Planning and Partnerships (MAPP) community health strategic planning initiative. This assessment focuses on identifying the trends, factors, and events that are likely to influence community health and quality of life, or impact the work of the local public health system.

The FOC Assessment was performed by community health stakeholders and volunteers. A brainstorming session was conducted on December 12th, 2012. Participants were charged with answering the following questions: “What is occurring or might occur that affects the health of our community or the local public health system?” and “What specific threats or opportunities are generated by these occurrences?” To address those questions, participants determined the economic, environmental, legal/ethical, political, social, technological, and medical forces that impact how Green County’s public health system functions. Members then developed a list of potential opportunities and threats for each identified force.

Participant findings were compiled into the attached comprehensive matrix of key forces and their associated impacts upon the health of Green County. A selection of the results is included below:

- **Healthy Food Choices**
- **Weather/Climate Influences**
- **Social Dependency**
- **Teen Activities**
- **Law Enforcement Education**
- **Geographic Isolation**
- **Parent Education**
- **Social Media**

The information gathered through the FOC Assessment is an important component of the MAPP comprehensive community assessment process. These findings will be used in conjunction with the results of the other three MAPP assessments to identify key strategic issues and priorities for action by our community.



## Forces of Change Assessment

FORCE	THREATS POSED	OPPORTUNITIES CREATED
<b>Economic</b>		
Fast Food Restaurants	High obesity rates, more convenient and less expensive	New and healthy restaurants
Industry		Increased health, increased morale, need to be selective
Lack of Insurance Coverage (auto, medical, and home)	No proper medical care	
<b>Environmental</b>		
Drought – Summer 2012	Reduced corn crop, increased cost of food supply, less tobacco to be striped, economic effect	
Future Natural Disasters	Excess water and debris, lack of drinking water	Community growth and camaraderie, Emergency Preparedness development
Cancer Prevalence in Gabe	Poor health, high economic impact	Education for citizens
Domestic Violence Shelter	Highly publicized location	
Flood – 2010		Funding for Fire Department and Safe House
Changing Temperatures	Allergies, makes outdoor exercise and recreation challenging	
Housing/Shelter	Currently no local homeless shelter	Homeless and safe shelters
Geographic Isolation	Lack of new business and industry	Better roadways and travel systems
Hurricane Sandy	Less demand at Amazon for overtime and temporary help	
<b>Legal/Ethical</b>		
Crimes	No rehabilitation possibilities, repeat offenders	Need more severe punishment (local and state), legislation advocacy
Law Enforcement		Training on current issues
<b>Political</b>		
ObamaCare		Helps with uninsured
Congressional Decision Makers	Disconnected from citizens	Senator Givens chairperson of Health and Welfare Committee
Marijuana Legalization	Decreased perception of risk, increased perception of acceptability, and increased usage	
Smoking Free Legislation		Fewer local restaurants allow smoking
Government Benefits	Enables the unmotivated members of society and promotes social dependency	



# Forces of Change Assessment

FORCE	THREATS POSED	OPPORTUNITIES CREATED
<b>Social</b>		
Bullying		Parent education
Few Teen Activities	Lack of exercise	Needs to be more often, offer more variety aside from sport-related events, provide financial assistance
Tobacco Use	Increased allergies	Less accepted, current prevention efforts and working
Teen Pregnancy	Portrayed as glamorous, encouraged by society and media, increased government assistance	
High School Graduation Rates		One of the highest in the State
High Unemployment Rates		
Few Recreational Activities and Facilities	Lack of exercise	
Time Management	No time to exercise, work, family obligations	Seminar at Extension Office
<b>Technological/Education</b>		
Internet	Increases locally in child pornography, bullying, lack of exercise	
Cell Phones	Lack of exercise	
Social Media (Facebook, Twitter)	Lack of exercise	Very popular, use to raise awareness, use positive messages
<b>Medical</b>		
Screenings		Jane Todd Crawford Hospital Health Fair, more frequent health fairs with additional screenings
Drug Rehabilitation		Need more available at a free or reduced cost
Financial Assistance		
High Obesity Rates	Lethargy	
Allergies	Temperature, climate, location	Education, smoke-free laws



## Community Themes and Strengths Assessment

A Quality of Life survey was distributed across Green County during the months of December 2012 through April 2013. The survey was distributed in two formats electronically and paper. There were 717 individuals that participated in the survey. The community health status assessment assists the communities in identifying priority community health and quality of life issues.

### What do you think are the three most important “health problems” in Green County?

Answer Options	%	Respondents
Cancers	53.8%	380
Alcohol/Drugs	55.2%	390
Obesity (children/adults)	33.9%	239

### What do you think are the three most important “risky behaviors” in Green County?

Answer Options	%	Respondents
Alcohol/Drug Use	77.3%	544
Tobacco Use	42.9%	302
Poor Eating Habits	38.1%	268

### What do you think are the three most important factors for a “healthy community”?

Answer Options	%	Respondents
Low Crime/Safe Neighborhood	44.8%	316
Good School Systems	47.2%	333
Good Jobs/Healthy Economy	46.6%	329

*See Green County Community Health Surveys on pages 26 - 27 of this booklet.*

## Local Public Health System Assessment

Green County performed the LPHSA in August 2010. There were approximately 20 people that participated in the assessment. The majority of the organizations that make up the Local Public Health System were present.

The Local Public Health System Assessment Instrument focuses on the local public health system or all entities that contribute to public health services within a community. The local instrument was developed by NACCHO and CDC. The standards are designed around the ten Essential Public Health Services to assure that the standards fully cover the gamut of public health action needed at state and community levels. The standards focus on the overall public health system (all public, private, and voluntary entities that contribute to public health activities within a given area), rather than a single organization. This assures that the contributions of all entities are recognized in assessing the provision of essential public health services. The standards describe an optimal level of performance rather than provide minimum expectations. This assures that the standards can be used for continuous quality improvement. The standards can stimulate greater accomplishment and provide a level to which all public health systems can aspire to achieve. The standards are intended to support a process of quality improvement. System partners should use the assessment process and the performance standards results as a guide for learning about public health activities throughout the system and determining how to make improvements.

The Local Public Health System Assessment is a valuable tool in identifying areas for system improvement, strengthening local partnerships, and assuring that a strong system is in place for effective response to day-to-day public health issues as well as public health emergencies. Local Public Health System Assessment instrument users at all levels report numerous such benefits, including:

1. Improves organizational and community communication and collaboration, by bringing partners to the same table.
2. Educates participants about public health and the interconnectedness of activities, which can lead to a higher appreciation and awareness of the many activities related to improving the public's health.
3. Strengthens the diverse network of partners within state and local public health systems, which can lead to more cohesion among partners, better coordination of activities and resources, and less duplication of services.
4. Identifies strengths and weaknesses to address in quality improvement efforts. Responses to the assessment can be tracked over time to identify system improvements or changes. Provides a benchmark for public health practice improvements, by providing a gold standard to which public health systems can aspire.

### Summary of Green County performance scores by Essential Public Health Service (EPHS)

EPHS	SCORE
1 Monitor Health Status To Identify Community Health Problems	57
2 Diagnose And Investigate Health Problems and Health Hazards	87
3 Inform, Educate, And Empower People about Health Issues	83
4 Mobilize Community Partnerships to Identify and Solve Health Problems	75
5 Develop Policies and Plans that Support Individual and Community Health Efforts	67
6 Enforce Laws and Regulations that Protect Health and Ensure Safety	92
7 Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	66
8 Assure a Competent Public and Personal Health Care Workforce	67
9 Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services	58
10 Research for New Insights and Innovative Solutions to Health Problems	71
<b>OVERALL SCORE</b>	<b>72</b>

*The summary above provides a quick overview of the system's performance in each of the 10 Essential Public Health Services (EPHS). Each EPHS score is a composite value determined by the scores given to those activities that contribute to each Essential Service. These scores range from a minimum value of 0% (no activity is performed pursuant to the standards) to a maximum of 100% (all activities associated with the standards are performed at optimal levels).*

# APPENDIX - Community Health Data Collection

## Lake Cumberland District Total Population

	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY	USA
Population, 2013 estimate	18,732	16,067	10,146	6,789	11,180	17,989	63,903	17,752	24,649	20,678	203,949	4,395,295	316,128,839
Person under 5, percent	5.3%	6.2%	5.6%	6.0%	5.2%	5.9%	5.9%	6.5%	6.2%	5.6%	5.9%	6.3%	6.3%
Person under 18, percent	21.2%	23.0%	22.6%	22.1%	21.4%	21.8%	22.9%	22.3%	22.3%	21.9%	22.2%	23.1%	23.3%
Person 65 and over, percent	16.3%	18.2%	17.8%	20.3%	18.5%	13.7%	17.2%	18.7%	17.2%	17.6%	17.7%	14.4%	14.1%
Female, percent	50.7%	51.3%	50.4%	50.9%	50.4%	45.6%	51.1%	51.2%	51.9%	50.6%	50.5%	50.8%	50.8%
Male, percent	49.3%	48.7%	49.6%	49.1%	49.6%	54.4%	48.9%	48.8%	48.1%	49.4%	49.5%	49.2%	49.2%
White alone, percent	95.2%	97.7%	97.2%	95.5%	96.0%	91.7%	96.7%	97.6%	92.5%	96.3%	95.6%	88.5%	77.7%
Black or African American, percent	2.9%	0.7%	0.5%	2.9%	2.2%	5.8%	1.3%	0.6%	5.0%	1.8%	2.4%	8.2%	13.2%
American Indian/Alaska Native alone, percent	0.3%	0.3%	0.2%	0.1%	0.4%	0.8%	0.3%	0.4%	0.2%	0.3%	0.3%	0.3%	1.2%
Asian alone, percent	0.3%	0.2%	0.2%	0.2%	0.2%	0.2%	0.6%	0.4%	0.7%	0.4%	0.3%	1.3%	5.3%
Native Hawaiian/other Pacific Islander alone, percent	0.1%	0.1%	0.5%	0.0%	z	0.1%	z	z	0.1%	0.1%	0.1%	0.1%	0.2%
Reporting two or more races, percent	1.2%	1.0%	1.3%	1.3%	1.3%	1.4%	1.1%	1.0%	1.6%	1.2%	1.2%	1.7%	2.4%
Hispanic or Latino, percent	1.8%	2.9%	2.8%	1.0%	1.6%	2.4%	2.3%	3.7%	2.0%	2.9%	2.3%	3.3%	17.1%
White alone, not Hispanic or Latino, percent	93.7%	95.1%	95.2%	94.6%	94.6%	89.9%	94.7%	94.2%	90.7%	93.9%	93.7%	85.6%	62.6%

SOURCE: US Census Bureau: State and County Quick Facts, Data derived from Population Estimates, American Community Survey, Census of Populations. July 8, 2014.  
z: value greater than zero but less than half unit of measure shown

## Lake Cumberland School District School Population

	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY	USA
Total Enrollment	2,370	2,216	1,875	915	1,691	2,238	9,947	2,670	4,155	3,530	31,607	675,530	

### Adair County School District

Adair County Primary (p-02)	629
Adair Elementary (3-5)	572
Adair Middle (6-8)	597
Adair High (9-12)	572

### Casey County School District

Jones Park Elemntary (K-06)	386
Liberty Elementary (K-6)	360
Walnut Hill Elementary (K-06)	421
Casey Middle School (7-8)	378
Casey High School (9-12)	671

### Clinton County School District

Early Childhood Center (PS-K)	250
Albany Elementary School (1-4)	600
Albany Middle School (5-8)	575
Albany High School	450

### Cumberland County School District

Cumberland Elementary School (K-5)	455
Cumberland Middle School (6-8)	230
Cumberland High School (9-12)	230

### Green County School District

Green County Primary School (K-2)	392
Green County Intermediate (3-5)	380
Green County Middle School (6-8)	386
Green County High School (9-12)	533

### McCreary County School District

Pine Knot Preschool (P)	83
Pine Knot Primary School (K-03)	528
Pine Knot Intermediate School (4-6)	385
McCreary County Middle School (7-8)	445
McCreary County High School (9-12)	797

### Pulaski County School District

Pulaski County Memorial Schoo, (PS)	225
Burnside Elementary School (PS-05)	525
Eubank Elementary School (PS-05)	375
Nancy Elementary School (PS-05)	400
Oakhill Elementary School (PS-05)	495
Pulaski Elementary School (PS-05)	645
Shopeville Elementary School (PS-05)	400
Southern Elementary School (PS-05)	730
Northern Middle School (6-8)	645
Southern Middle School (6-8)	1,000
Pulaski High School (9-12)	1,100
Southwestern High School (9-12)	1,200

### Science Hill Independent School District

Science Hill Elementary (PS-08)	520
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### Russell County School District

Jamestown Elementary (PS-05)	490
Russell Springs Elementary (PS-05)	710
Salem Elementary School (PS-05)	310
Russell County Middle School (6-8)	670
Russell County High Schol (9-12)	490

### Taylor County School District

Taylor County Elementary (PS-05)	1,214
Taylor County Middle School (6-8)	740
Taylor County High School (9-12)	896

### Somerset Independent School District

Hopkins Elementary School (PS-05)	695
Meece Middle School (5-8)	489
Somerset High School (9-12)	503

### Campbellsville Independent School District

Campbellsville Elementary (PS-03)	400
Campbellsville Middle School (4-8)	475
Campbellsville High School (9-12)	430

### Wayne County School District

Walker Early Learning Center (PS-K)	430
Bell Elementary School (1-2)	490
Monticello Elementary School (3-5)	760
Wayne County Middle School (6-8)	825
Wayne County High School (9-12)	1,000

SOURCE: Kentucky Department for Education, Schools and District Attendance; August, 5, 2014 ; <http://education.ky.gov/comm/Pages/2013-2014-Kentucky-Schools-Directory.aspx>

# APPENDIX - Community Health Data Collection

## Lake Cumberland District Health Characteristics

	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
<b>HEALTH OUTCOMES*</b>	<b>48</b>	<b>78</b>	<b>84</b>	<b>107</b>	<b>32</b>	<b>91</b>	<b>54</b>	<b>38</b>	<b>42</b>	<b>46</b>	NDA*	NDA*
<b>Length of Life*</b>	27	83	19	110	32	68	48	59	49	34	NDA*	NDA*
1. Premature death*	7,968	10,495	9,670	13,257	8,097	9,612	9,194	9,453	9,198	9,198	8,228	8,758
<b>Quality of Life</b>	<b>78</b>	<b>77</b>	<b>99</b>	<b>103</b>	<b>51</b>	<b>109</b>	<b>53</b>	<b>18</b>	<b>34</b>	<b>68</b>	NDA*	NDA*
2. Poor or fair health	32%	25%	28%	29%	24%	41%	27%	21%	22%	31%	28%	21%
3. Poor physical health days	5.7	6.4	7.0	6.4	5.3	8.9	5.2	4.2	4.6	6.4	6.0	4.8
4. Poor mental health days	5.0	5.1	4.4	5.0	5.1	6.2	4.0	4.0	4.2	5.7	4.9	4.3
5. Low birthweight	8.8%	8.9%	11.1%	11.6%	8.2%	9.2%	8.8%	8.0%	8.4%	7.4%	9%	9.1%
<b>HEALTH FACTORS*</b>	<b>87</b>	<b>85</b>	<b>89</b>	<b>101</b>	<b>52</b>	<b>110</b>	<b>48</b>	<b>79</b>	<b>28</b>	<b>88</b>	NDA*	NDA*
<b>Health Behaviors*</b>	<b>84</b>	<b>86</b>	<b>15</b>	<b>62</b>	<b>36</b>	<b>112</b>	<b>30</b>	<b>68</b>	<b>14</b>	<b>88</b>	NDA*	NDA*
6. Adult smoking	34%	30%	21%	27%	31%	40%	27%	31%	23%	29%	29%	26%
7. Adult obesity	34%	35%	32%	34%	30%	32%	32%	32%	32%	32%	33%	33%
8. Food environment index	7.5	7.6	7.7	7.6	7.8	6.5	7.1	7.8	7.6	6.3	7.4	7.4
9. Physical inactivity	35%	38%	36%	37%	38%	35%	33%	38%	28%	40%	36%	31%
10. Access to exercise opportunities	62%	NDA*	74%	11%	39%	100%	62%	79%	26%	42%	NDA*	62%
11. Excessive drinking	NDA*	14%	NDA*	NDA*	NDA*	10%	7%	8%	12%	NDA*	NDA*	12%
12. Alcohol-impaired driving deaths	26%	19%	38%	25%	9%	30%	22%	20%	23%	36%	25%	28%
<b>Clinical Care*</b>	<b>114</b>	<b>11</b>	<b>119</b>	<b>117</b>	<b>92</b>	<b>45</b>	<b>84</b>	<b>65</b>	<b>84</b>	<b>49</b>	NDA*	NDA*
13. Uninsured	21%	22%	20%	20%	20%	21%	18%	20%	19%	19%	20%	17%
14. Primary Care Physicians	2,669:1	7,955:1	2,550:1	1,708:1	11,200:1	3,657:1	1,415:1	1,601:1	1,237:1	1,613:1	NDA*	1,560:1
15. Dentists	6,225:1	16,082:1	3,428:1	6,819:1	2,829:1	18,069:1	1,590:1	2,916:1	3,527:1	3,471:1	NDA*	1,731:1
16. Mental health providers	1,245:1	1,787:1	1,286:1	852:1	2,829:1	1,390:1	757:1	1,094:1	1,122:1	2,603:1	NDA*	852:1
17. Preventable hospital stays, rate	182	185	206	213	103	117	92	109	92	129	143	103
<b>Social &amp; Economic Factors*</b>	<b>80</b>	<b>73</b>	<b>90</b>	<b>106</b>	<b>44</b>	<b>107</b>	<b>79</b>	<b>85</b>	<b>65</b>	<b>95</b>	NDA*	NDA*
18. High school graduation	78%	89%	88%	78%	95%	88%	76%	84%	90%	89%	86%	79%
19. Some college	48%	41%	36%	39%	39%	42%	50%	46%	44%	38%	42%	57%
20. Unemployment	7.7%	7.9%	9.5%	10.8%	7.9%	13.3%	9.4%	8.6%	7.8%	12.4%	9.5%	8.2%
21. Children in poverty	39%	40%	40%	42%	31%	51%	31%	40%	32%	38%	38%	27%
22. Inadequate social support	28%	21%	16%	20%	21%	30%	20%	27%	20%	24%	23%	20%
23. Children in single-parent households	27%	28%	41%	45%	34%	27%	34%	36%	40%	31%	34%	34%
24. Violent crimes, rate	52	62	0	50	44	59	112	72	159	91	76	247
25. Injury deaths, rate	78	99	124	156	79	72	78	101	87	68	NDA*	79

NDA\* - No Data Available.

SOURCE: County Health Ranking, 2014 (all of the above), Percentage of total population

\*Each county ranking is compared among the 120 counties in Kentucky.

HEALTH OUTCOMES in the County Health Rankings represent how healthy a county is. We measure two types of health outcomes: how long people live (length of life) and how healthy people feel while alive (quality of life).

LENGTH OF LIFE (Mortality) examine mortality (or death) data to find out how long people live. More specifically, we measure what are known as premature deaths (deaths before age 75).

QUALITY OF LIFE (Morbidity) refers to how healthy people feel while alive. Specifically, we report on the measures of their health-related quality of life (their overall health, physical health, and mental health) and we also look at birth outcomes (in this case, babies born with a low birthweight).

HEALTH FACTORS in the County Health Rankings represent what influences the health of a county. We measure four types of health factors: health behaviors, clinical care, social and economic, and physical environment factors. In turn, each of these factors is based on several measures. A fifth set of factors that influence health (genetics and biology) is not included in the Rankings.

- Premature death - Years of potential life lost before age 75 per 100,000 population (age-adjusted)
- Poor or fair health - Percent of adults reporting fair or poor health (age-adjusted)
- Poor physical health day - Average number of physically unhealthy days reported in past 30 days (age-adjusted)
- Poor mental health day - Average number of mentally unhealthy days reported in past 30 days (age-adjusted)
- Low birth rate - Low birth weight is the percent of live births for which the infant weighed less than 2,500 grams (approximately 5 lbs., 8 oz.).
- Adult smoking - Percentage of adults that report smoking more than 100 cigarettes
- Adult obesity - Percent of adults that report a BMI  $\geq$  30
- Food environment index - Index of factors that contribute to a healthy food environment
- Physical inactivity - percent of adults aged 20 and over reporting no leisure time physical activity
- Access to exercise opportunities - percent of the population with adequate access to locations for physical activity
- Excessive drinking - Binge drinking or heavy drinking; binge drinking is consuming more than 4 (women) or 5 (men) alcoholic beverages on a single occasion. Heavy drinking is defined as drinking more than 1 (women) or 2 (men) per day over average
- Alcohol-impaired driving - Proportion of driving deaths with alcohol involvement
- Uninsured - Percentage of adults under age 65 without health insurance
- Primary care physicians - Ratio of population to primary care physicians
- Dentist - Ratio of population to dentists
- Mental health providers - Ration of population to mental health providers
- Preventable hospital stays - Hospitalization rate for ambulatory-care sensitive conditions per 1,000 Medicare enrollees
- High school graduation - Percent of ninth grade cohort that graduates in 4 years
- Some college - Percent of adults aged 25-44 years with some post-secondary education
- Unemployment - Percent of population age 16+ unemployed but seeking work
- Children in poverty - Percent of children under age 18 in poverty
- Inadequate social support - Percent of adults without social/emotional support
- Children in single-parent households - Percent of children that live in household headed by single parent
- Violent crimes - Violent crime rate per 100,000 population
- Injury Deaths - Injury deaths is the death rate from intentional and unintentional injuries per 100,000 population. Deaths included are those with an underlying cause of injury (ICD-10 codes \*U01-\*U03, V01-Y36, Y85-Y87, Y89)

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# APPENDIX - Community Health Data Collection

## Lake Cumberland District Health Characteristics (continued from page 21)

	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
<b>Physical Environment</b>	66	21	78	9	31	85	94	54	14	44	NDA*	NDA*
26. Air pollution-particulate matter	13.5	13.3	13.5	13.6	13.5	13.3	13.2	13.4	13.4	13.4	13.4	13.5
27. Drinking water violations	0%	10%	0%	0%	0%	0%	14%	0%	0%	0%	2%	7%
28. Severe housing problems	16%	14%	14%	12%	12%	18%	17%	17%	14%	13%	15%	14%
29. Driving alone to work	80%	76%	87%	78%	79%	81%	84%	80%	78%	82%	81%	82%
30. Long commute - driving alone	30%	40%	15%	21%	44%	37%	20%	22%	19%	31%	28%	28%
31. Number of housing units	8,472	7,372	5,227	3,644	5,261	7,397	31,070	9,869	10,923	10,792	100,027	19,365,650
32. Home ownership rate	73.5%	81.1%	77.0%	73.7%	75.8%	70.9%	70.3%	75.8%	70.6%	70.6%	73.9%	68.7%
33. Median household income	\$31,169	\$28,416	\$26,885	\$29,885	\$33,573	\$21,758	\$32,788	\$29,465	\$35,000	\$27,646	\$29,685	\$42,610
34. Person below poverty level	20.6%	27.4%	28.0%	23.7%	20.4%	30.8%	23.3%	27.3%	23.0%	26.8%	25.1%	18.6%
35. Mean travel time to work (min), workers age 16+	25	27.6	17.5	23	29	27.6	20.9	20.9	19.2	25.1	23.5	22.7

NDA\* - No Data Available.

SOURCES: 26. - 30. - County Health Ranking, 2014.

31. - 35. - US Census Bureau: State and County Quick Facts. Data derived from Population Estimates, America Community Survey, Census of Population and Housing, State and County Housing Unite Estimates, Economic Census, and Building Permits, July 8, 2014.

26. Air pollution-particulate matter - the average daily measure of fine particulate matter in micrograms per cubic meter (PM2.5) in a county

27. Drinking water violations - Percentage of population potentially exposed to water exceeding a violation limit during the past year

28. Severe housing problems - Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities

29. Driving alone to work - Percent of the workforce that drives alone to work

30. Long commute-driving alone - Among workers who commute in their car alone, the percentage that commute more than 30 minutes

## Kentucky Behavior Risk Factor Surveillance System (KYBRFSS)

	District	KY
Adults who report binge drinking	8.8%	14.9%
Adults who have been diagnosed with arthritis	37%	35%
Adults who have ever had a heart attack	6.8%	6.6%
Adults who have coronary heart disease	6.3%	6.1%
Adults who have ever had a stroke	3.1%	4.2%
Adults aged 50+ who had a blood stool test within two years	9.9%	13.9%
Adults ages 50+ who ever had a sigmoidoscopy or colonoscopy	60.1%	65.9%
Adults who have ever been diagnosed with depressive disorder	24.4%	23.5%
Adults who have diabetes	12.7%	10.7%
Adults who are limited in any activities because of health problems	29.4%	26.2%
Adults with health problems that require use of special equipment	12.5%	11.6%
Adults who participate in any leisure-time physical activity	63.9%	70.3%
Adults who reported good or better health	71.9%	76.1%

	District	KY
Adults who have health care coverage	79.8%	82.9%
Adults aged 18-64 who have health care coverage	74.3%	79.1%
Adults aged 18-64 who have been tested for HIV	31.3%	30.0%
Adults aged 65+ who had a flu shot in past year	53.2%	61.8%
Adults aged 65+ who had pneumococcal vaccination	50.8%	65.6%
Adults aged 65+ who had all their natural teeth extracted	30.9%	24.8%
Adults who visited the dentist or dental clinic within the past year	51.9%	60.3%
Adults who are overweight (BMI = 25.0 -29.9)	39.9%	24.8%
Adults who are obese (BMI >30.0)	34.7%	31.3%
Adults who currently have asthma	13.0%	11.1%
Adults who have COPD, emphysema, or chronic bronchitis	10.8%	11.2%
Adults who are current smokers	27.5%	28.3%
Women aged 18+ who had a pap test within past three years	73.6%	76.6%
Women aged 40+ who had a mammogram within past two years	65.7%	71.3%

SOURCE: KYBRFSS, 2012 percentage of total population

## Kentucky Incentive for Prevention Survey (KIP)

	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Youth smokeless tobacco - 30 day use	19%	24%	28%	16%	16%	24%	18%	12%	14%	19%	19%	13%
Youth cigarette - 30 day use	27%	30%	15%	15%	21%	26%	21%	25%	25%	21%	23%	18%
Youth alcohol - 30 day use	23%	23%	15%	30%	14%	26%	34%	26%	27%	25%	24%	25%
Youth marijuana - 30 day use	11%	14%	6%	8%	6%	9%	17%	11%	21%	14%	12%	14%
Youth inhalant - 30 day use	2%	1%	2%	6%	1%	3%	4%	2%	4%	4%	3%	2%

SOURCE: KIP, 2012 10th grade students

# APPENDIX - Community Health Data Collection

## Infectious Disease Cases and Rates

	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY	USA	HP 2020	Grade
1. Tuberculosis case rate	0.0	0.0	9.7	0.0	0.0	0.0	0.0	0.0	4.1	0.0	1.0	1.8	3.2	1.0	A
2. AIDS cases, number	6	7	7	4	6	8	44	8	13	7	110	7,750	478,862	NDA*	NDA*
3. Cryptosporidiosis	5.4	18.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.9	2.0	2.7	NDA*	NDA*
4. Ehrlichiosis, Anaplasmosis	0.0	0.0	0.0	14.6	0.0	0.0	0.0	0.0	0.0	4.8	1.0	0.4	0.8	NDA*	NDA*
5. Group A Streptococcal Infection, Invasive*	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	4.7	NDA*	NDA*	NDA*
6. Hepatitis A	0.0	0.0	9.8	0.0	0.0	0.0	0.0	0.0	4.0	0.0	1.0	0.6	0.5	NDA*	NDA*
7. Hepatitis B, acute	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	4.0	0.0	0.5	3.1	1.1	NDA*	NDA*
8. Hepatitis C, acute	0.0	12.6	9.8	0.0	0.0	0.0	0.0	0.0	0.0	23.8	3.8	2.5	0.3	NDA*	NDA*
9. Histoplasmosis	0.0	0.0	9.8	0.0	0.0	0.0	0.0	0.0	8.1	0.0	1.4	1.0	NDA*	NDA*	NDA*
10. Legionellosis	0.0	0.0	0.0	14.6	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.7	1.1	NDA*	NDA*
11. Listeriosis	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.3	NDA*	NDA*
12. Pertussis	37.5	6.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.8	7.0	8.8	NDA*	NDA*
13. Rocky Mountain Spotted Fever	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.1	NDA*	NDA*
14. Salmonellosis	0.0	0.0	9.8	0.0	26.7	0.0	7.9	11.4	16.2	28.6	10.1	13.5	17.5	NDA*	NDA*
15. Shiga toxin-producing E. Coli (STEC)	5.4	0.0	0.0	0.0	0.0	0.0	3.1	0.0	8.1	0.0	2.4	1.6	1.8	NDA*	NDA*
16. Streptococcus Pneumoniae, invasive disease	0.0	0.0	0.0	0.0	8.9	0.0	1.6	0.0	0.0	0.0	1.0	4.7	5.3	NDA*	NDA*

\* Group A Streptococcal Infection, Invasive was removed from the 2010 list of Nationally Notifiable Diseases

NDA\* - No Data Available.

NOTES:

1. Case rate per 100,000 population 2. Number of persons living with AIDS 3. - 16. Case rate per 100,000 population

SOURCES:

1. Kentucky Tuberculosis Program 2012 <http://chfs.ky.gov/dph/epi/tb.htm>. CDC Tuberculosis Cases, Case Rates per 100,000 Population, Deaths, and Death Rates per 100,000 Population, and Percent Change: United States, 1953–2012. Atlanta, GA: U.S. Department of Health and Human Services, CDC, 2012. <http://www.cdc.gov/tb/statistics/reports/2012/table1.htm>
2. 2009 Cumulative AIDS Cases by Area Development Districts (ADD) and County at the Time of Diagnosis; HIV Surveillance Report, Volume 22: Table 16a. Persons living with an AIDS diagnosis, by year and selected characteristics, 2007–2009—United States: [http://www.cdc.gov/hiv/surveillance/resources/reports/2010report/pdf/2010\\_HIV\\_Surveillance\\_Report\\_vol\\_22.pdf#Page=54](http://www.cdc.gov/hiv/surveillance/resources/reports/2010report/pdf/2010_HIV_Surveillance_Report_vol_22.pdf#Page=54)
- 3-16. Reportable Diseases in Kentucky 2011 Summary, Cabinet for Health and Family Services, Department for Public Health, Division of Epidemiology and Health Planning, <http://chfs.ky.gov/dph/epi/reportablediseases.htm> MMWR 2011 Reports of Nationally Notifiable Infectious Diseases; Centers for Disease Control and Prevention; <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6053a1.htm>

## Infectious Disease Cases

	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Syphilis*	1	0	0	0	0	1	0	0	3	0	5	335
Gonorrhea*	2	2	1	1	1	0	9	1	14	1	32	4,521
Chlamydia*	43	18	10	10	39	39	112	32	104	39	446	16,631

SOURCE: Kentucky Vital Statistics, 2011 \* Preliminary Data numbers reported

## Injuries and Crime

Indicator	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY	USA	HP 2020	Grade
1. Homicide Death Rate	11.0	5.3	13.6	23.2	0.0	7.2	3.2	7.1	12.9	5.9	7.0	5.5	5.9	5.5	D
2. Suicide Death Rate	19.3	0.0	33.6	36.4	34.0	18.6	9.5	9.9	3.3	8.1	13.1	13.5	11.6	NDA*	C
3. Motor Vehicle Death Rate	19.1	12.3	83.6	14.7	34.4	11.6	23.0	17.3	16.6	19.3	24.2	19.1	13.1	12.4	D
4. Child Abuse Neglect - # of Reports	358	179	183	31	187	297	766	229	427	322	2,979	63,438	676,569	NDA*	NDA*

NDA\* - No Data Available.

NOTES:

1. -2. Age adjusted death rate per 100,000 U.S. standard population. 3 Crude death rate per 100,000 population. 4. Number of Child Abuse Neglect Reports.

SOURCES:

1. - 3. KY Annual Vital Statistics Report 2008 (<http://chfs.ky.gov/dph/vital/>) and National Vital Statistics Reports Vol. 59, No. 10, December 7, 2011 (2008 data) ([http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59\\_10.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_10.pdf))
  4. Child Abuse Neglect Report by County - Prevent Child Abuse Kentucky. Statistics Provided by the Cabinet for Health and Family Services, Jan. 1, 2013 - Dec. 31, 2013 [http://www.pcaaky.org/stats\\_research.html](http://www.pcaaky.org/stats_research.html)
- Child Maltreatment - Administration for Children and Families - Department for Health And Human Services: <http://www.acf.hhs.gov/sites/default/files/cb/cm2012.pdf>

# APPENDIX - Community Health Data Collection

## Chronic Illness Death Rate

Indicator	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY	USA	HP 2020	Grade
1. Heart Disease	270.4	197.6	190.3	273.9	201.2	312.5	238.9	253.9	194.9	210.7	230.9	213.7	186.5	100.8	D
2. Cerebrovascular disease/stroke	63.1	68.2	57.5	83.6	52.2	5.8	35.3	44.7	59.6	21.2	44.9	44.4	40.7	33.8	D
3. Diabetes	13.5	11.8	28.2	0.0	24.5	56.1	36.0	31.4	15.8	12.3	20.1	25.9	21.8	65.8	A
4. All causes	945.7	991.1	976.4	1,114.4	850.4	995.2	904.2	861.7	829.4	856.6	909.0	883.6	758.3	NDA*	D

### NOTES:

1-4. Age adjusted death rates per 100,000 U.S. standard population

### SOURCES:

1-4. KY Annual Vital Statistics Report, 2008 (<http://chfs.ky.gov/dph/vital/>) and National Vital Statistics Reports Vol. 59, No. 10, December 7, 2011 (2008 data) ([http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59\\_10.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_10.pdf))

## Cancer Rates

Indicator	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY	USA	HP 2020	Grade
1. Cancer incidence (all)	460.5	569.3	732.9	550.9	460.3	555.0	548.1	526.7	599.2	571.4	553.1	565.1	445.5	NDA*	C
2. Cancer (all) death rate	177.8	257.7	222.2	173.9	219.0	244.8	227.0	237.4	214.2	177.0	217.2	207.2	171.8	160.6	D
3. Lung cancer incidence	102.3	109.8	99.01***	66.78***	55.22***	154.9	110.7	107.8	102.9	103.0	106.2	100.1	61.7	NDA*	D
4. Lung cancer death rate	50.41***	100.5	50.14***	59.23***	71.52***	99.8	93.7	95.2	87.6	60.4	81.6	73.8	47.4	45.5	D
5. Female breast cancer incidence	87.67***	157.7***	198.09***	~	63.47***	126.87***	109.2	116.78***	122.3	106.2	115.0	145.0	118.7	NDA*	A
6. Female breast cancer death rate	39.90***	46.03***	~	0.0***	~	~	14.79***	0.00***	~	~	20.2	21.8	21.9	20.6	A
7. Colorectal cancer incidence	55.73***	100.5	40.78***	96.61***	34.64***	40.99***	62.0***	38.20***	72.5	54.4	59.7	54.4	40.4	NDA*	D
8. Colorectal cancer death rate	~	~	~	~	~	~	20.2	37.84***	27.15***	~	19.5	17.5	15.5	14.5	D
9. Cervix/uteri cancer incidence	0.0***	~	~	0.0***	0.0***	0.0***	14.67***	0.0***	~	0.0***	8.37***	8.7	7.5	NDA*	C
10. Cervix/uteri cancer death rate	0.0***	0.0***	0.0***	0.0***	0.0***	0.0***	0.0***	~	0.0***	0.0***	0.0***	2.5	2.3	2.2	A
11. Melanoma cancer incidence	~	29.47***	116.54***	~	60.72***	42.65***	43.9	40.61***	67.9	48.95***	48.1	40.5	19.0	NDA*	D
12. Melanoma cancer death rate	~	~	~	0.0***	0.0***	0.0***	~	0.0***	~	0.0***	3.17***	3.3	2.7	2.4	C

\*\*\*Counts < 15 are too few to calculate a stable age-adjusted rate

~Counts/rates are suppressed if fewer than 5 cases were reported in the specified category

### NOTES:

1-12. Age-adjusted Incidence Rates or Crude Death Rates per 100,000 population for the U.S. Standard Population

### SOURCES:

1.-12. Kentucky Cancer Registry University of Kentucky, Markey Cancer Control Program 2010 ([http://cancer-rates.info/ky/index\\_mort.php](http://cancer-rates.info/ky/index_mort.php)) . U.S. Cancer Statistics Working Group. United States Cancer Statistics: 2010 Incidence and Mortality Web-based Report. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute. Available at: (<http://apps.nccd.cdc.gov/uscs/index.aspx>)

## Maternal and Child Health

Indicator	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY	USA	HP 2020	Grade
1. Total births	219	195	141	64	124	206	815	233	332	253	2,582	56,900	4,247,694	NDA*	NDA*
2. Infant mortality (rate)	4.6	10.3	7.1	15.6	8.1	4.9	7.4	0.0	6.0	11.9	7.0	6.9	6.5	6.0	D
3. Low weight birth (percentage)	6.9%	7.2%	9.9%	10.9%	7.3%	11.2%	8.3%	7.7%	9.9%	10.3%	8.8%	9.0%	8.2%	7.8%	C
4. Teen births, rate	28.8	62.6	77.5	65.5	64.8	83.5	49.6	57.5	53.1	72.5	61.5	38.7	NDA*	NDA*	NDA*
5. No prenatal care first trimester (percentage)	34.3%	28.7%	30.0%	41.3%	25.0%	24.9%	20.1%	26.4%	32.2%	22.5%	26.3%	27.8%	29.0%	22.0%	B

NDA\* - No Data Available.

### NOTES:

1. Total number of births 2. Crude rate per 1,000 live births 3. Low Weight Birth = Percentage weighing less than 2500 grams (5lbs. 8 oz.) 4. Teen Births = Rate per 1,000 total births born to females ages 15-19. 5. Prenatal Care = Percentage of mothers not receiving prenatal care in the first trimester. National Data is for only selected states, including KY because the 2003 Revision of the U.S. Certificate of Live Birth after January 1, 2004.

### SOURCES:

1., 2., 3., 5. - KY Annual Vital Statistics Report, 2008 (<http://chfs.ky.gov/dph/vital/>) and National Vital Statistics Reports for Births and Deaths ([http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59\\_07\\_tables.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_07_tables.pdf)) ([http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59\\_01.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_01.pdf)). 4. - KY Annual Vital Status Report, 2013 (Preliminary Data), Teen Births by County, Rates per 1,000



## 2014 Community Health Assessment References

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# Green County Community Health Survey

**Green County Community Health Assessment**

Welcome! Thank you for taking the time to complete the Green County Health Assessment. The purpose of this survey is to get your opinion about our community's health concerns. The Green County Health and Wellness Coalition will use the results to determine the most pressing health problems to address. We ask that you complete the survey one time only. Your opinion is important! If you have any questions, please contact the Health Educator at Green County Health Department.

**1. Age**

25 or less  
 26-39  
 40-54  
 55-64  
 65 or older

**2. Gender**

Male  
 Female

**3. Race**

African American/Black  
 Asian/Pacific Islander  
 Hispanic/Latino  
 Other (please specify) \_\_\_\_\_

Native American  
 White/Caucasian

**4. Marital Status**

Married / Living w/ Partner  
 Not married / Single

**5. Education**

Less than high school  
 High school diploma or GED  
 College degree or higher  
 Other (please specify) \_\_\_\_\_

**Green County Community Health Assessment**

**9. What do you think are the THREE most important "health problems" in Green County?**

Aging problems (e.g. arthritis, hearing/vision loss, etc.)  
 Cancers  
 High blood pressure  
 Alcohol/drugs  
 Rape/sexual assault  
 Child abuse/neglect  
 Dental problems  
 Diabetes  
 Other (please specify) \_\_\_\_\_

HIV/AIDS  
 Infant death  
 Respiratory/lung disease  
 Sexually Transmitted Diseases/Infections (STD's or STI's)  
 Domestic Violence  
 Infectious diseases  
 Suicide  
 Farming injuries

Firearm injuries  
 Mental health problems  
 Teenage pregnancy  
 Heart disease/stroke  
 Motor vehicle crashes  
 Obesity (children and adults)

**10. What are the THREE most "risky behaviors" in Green County?**

Alcohol/drug use  
 Being overweight  
 Unsafe sex  
 No seatbelts/child safety seats  
 Not getting "shots" to prevent disease  
 Dropping out of school  
 Other (please specify) \_\_\_\_\_

Not using birth control  
 Racism  
 Tobacco use  
 Lack of exercise  
 Poor eating habits

**11. How would you rate Green County as a "Healthy Community?"**

Very healthy  
 Healthy  
 Somewhat healthy  
 Unhealthy  
 Very unhealthy

**Green County Community Health Assessment**

**6. Household Income**

Less than \$20,000  
 \$20,000 to \$29,000  
 \$30,000 to \$49,000  
 Over \$50,000

**7. How do you pay for your healthcare? (check all that apply)**

Pay cash (no insurance)  
 Health insurance (e.g. private insurance, Blue Shield, HMO)  
 Medicaid  
 Medicare  
 Veterans' Administration  
 Indian Health Services  
 Other (please specify) \_\_\_\_\_

**8. What do you think are the THREE most important factors for a "Healthy Community?" (Those factors which most improve the quality of life in a community)**

Good place to raise children  
 Low crime/safe neighborhood  
 Good school systems  
 Easy access to healthcare  
 Family/youth activities  
 Affordable housing  
 Excellent race relations  
 Good jobs/healthy economy  
 Other (please specify) \_\_\_\_\_

Religious or spiritual values  
 Clean environment  
 Arts/cultural events  
 Parks and recreation  
 Quality childcare  
 Low disease rate  
 Personal responsibility

**Green County Community Health Assessment**

**12. How would you rate your personal health?**

Very healthy  
 Healthy  
 Somewhat healthy  
 Unhealthy  
 Very unhealthy

**13. In your opinion, what is the best way to address the health needs of people in Green County?**

More exercise options  
 Diabetes education  
 Nutrition education  
 Access to healthier foods  
 More primary care doctors  
 Quit smoking classes  
 More specialists  
 Other (please specify) \_\_\_\_\_

**14. What group needs the most help with access to health services in Green County?**

Low-income families  
 Immigrants/refugees  
 Elderly  
 Physically/mentally disabled  
 Other (please specify) \_\_\_\_\_

Minority groups (e.g. African American, Hispanic)  
 Children/infants  
 Young adults

**15. Please use the space below to write what we missed asking you about health related issues in Green County.**

\_\_\_\_\_

# Green County Community Health Survey (Spanish)

**Encuesta de la Salud de la Comunidad del Condado de Green**

**1. Edad**

25 o menor  
 26-39  
 40-54  
 55-64  
 65 o mayor

**2. Genero**

Masculino  
 Femenino

**3. Raza**

Afroamericano/ Negro  Indio Americano  
 Asiático/Isleño del Pacifico  Blanco/Caucásico  
 Hispano/Latino  
 Otro (por favor especifique) \_\_\_\_\_

**4. Estado civil**

Casado/unión libre  
 No casado/soltero

**5. Educación**

Menos que la escuela secundaria  
 Diploma de la secundaria o escuela de adulta  
 Título universitario o superior  
 Otro (por favor especifique) \_\_\_\_\_

**6. Ingresos Familiares**

Menos de \$20,000  
 \$20,000 - \$29,000  
 \$30,000 - \$49,000  
 Más de \$50,000

**Encuesta de la Salud de la Comunidad del Condado de Green**

**9. ¿Qué cree que son los TRES problemas de salud más importantes en el condado de Green?**

Abuso de menores/ negligencia  Enfermedades Contagiosas  Problemas con salud mental  
 Abuso sexual  Enfermedades Respiratorias  Problemas de envejecimiento (artritis, pérdida de audición/vista, etc.)  
 Accidentes de vehiculo  Heridas de arma de fuego  Problemas dentales  
 Alcohol/drogas  Heridas de la granja  Suicidio  
 Cáncer  Infecciones Transmitidas Sexualmente  VIH/SIDA  
 Diabetes  Muerte infantil  Violencia domestica  
 Embarazo de adolescentes  Obesidad (niños y adultos)  
 Enfermedad de corazón/derrame  Presión de sangre alta  
 Otro (por favor especifique) \_\_\_\_\_

**10. ¿Cuáles son los TRES comportamientos más arriesgados en el condado de Green?**

Dejar los estudios  Racismo  
 Falta de ejercicio  Sexo no seguro  
 Malos hábitos alimenticios  Sobre peso  
 No recibir vacunas para prevenir enfermedades  Uso de alcohol/drogas  
 No usar cinturones de seguridad/asientos de seguridad para niños  Uso de tabaco  
 No usar un método anticonceptivo  
 Otro (por favor especifique) \_\_\_\_\_

**11. ¿Cómo valoraría el condado de Green como una comunidad saludable?**

Muy saludable  
 Saludable  
 Más o menos saludable  
 Poco saludable  
 Muy poco saludable

**Encuesta de la Salud de la Comunidad del Condado de Green**

**7. ¿Cómo paga su cuidado de salud? (escoja todos que aplican)**

Dinero en efectivo (no seguros)  
 Seguros de salud (seguro privado, Blue Shield, HMO)  
 Medicaid  
 Medicare  
 Veterans' Administration  
 Servicios de Salud de los Indios  
 Otro (por favor especifique) \_\_\_\_\_

**8. ¿Qué cree que son los TRES factores más importantes para que sea una comunidad saludable? (Los factores que más mejoran la calidad de vida en una comunidad)**

Un buen lugar para criar a niños  Valores espirituales o religiosos  
 Crimen bajo/barrio seguro  Medio ambiente limpio  
 Buenas escuelas  Artes/eventos culturales  
 Acceso fácil a cuidado de salud  Parques y recreación  
 Actividades para familias y jóvenes  Cuidado de niños de calidad alta  
 Vivienda a precio razonable  Tasa baja de enfermedad  
 Relaciones excelentes entre razas  Responsabilidad personal  
 Trabajos buenos/economía saludable  
 Otro (por favor especifique) \_\_\_\_\_

**Encuesta de la Salud de la Comunidad del Condado de Green**

**12. ¿Cómo valoraría su salud personal?**

Muy saludable  
 Saludable  
 Más o menos saludable  
 Poco saludable  
 Muy poco saludable

**13. En su opinión, ¿Cuál es la mejor manera para abordar las necesidades de salud de la gente del condado de Green?**

\_\_\_\_\_

**14. ¿Cuál grupo necesita la mayoría de ayuda con acceso a cuidado de salud en el condado Green?**

Familias con ingresos bajos  Grupos minoritarios (Afroamericanos, Hispanos)  
 Inmigrantes/asilados  Niños/bebes  
 Viejos  Adultos jóvenes  
 Aquellos con discapacidades físicas/mentales  
 Otro (por favor especifique) \_\_\_\_\_

**15. Favor de usar el espacio de abajo para escribir cualquiera cosa que nos falta sobre los asuntos relacionados con la salubridad en el condado de Green.**

\_\_\_\_\_



# 2014 Community Health Assessment

## GREEN COUNTY

A Healthy **Today** for a Brighter **Tomorrow**.

[www.LCDHD.org](http://www.LCDHD.org)



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