

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



Lake Cumberland District Health Department

2017-2018 annual report

ADAIR COUNTY • CASEY COUNTY • CLINTON COUNTY • CUMBERLAND COUNTY • GREEN COUNTY
McCREARY COUNTY • PULASKI COUNTY • RUSSELL COUNTY • TAYLOR COUNTY • WAYNE COUNTY



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

From the District Board of Health Chair

It has once again been a pleasure and honor to serve as the Chairman of the Lake Cumberland District Health Department in 2018. The year of 2018 completes 4 consecutive years of me serving as your Chairman and I greatly appreciate the Faith that the Lake Cumberland Board Members have had in me to serve as the Board Chair since January 2015. This past year has been no different than the past 3 years as we have once again faced many challenges. Some Challenges have been new and different, but I confidently feel that we have matched or exceeded our goals in all that has been set forth before us as a District Health Department this year.

I cannot say enough positive comments about all of our hardworking and dedicated employees and staff that are always up for the New Challenges that we continually face as a District Health Department. There have been lots of changes within the structure of our District Health Department. There have been several changes in staff and often times many duties have been consolidated among employees, and I appreciate their willingness to take on more work load as we go through these changes. It is the staff that is at the core of the much-needed services provided by Lake Cumberland District Health

Department. Our employees are always there to ensure that those services are delivered.

I want to again commend our Board Members and Executive Leadership, for the Very Disciplined yet Understanding Leadership that they help provide. The Leadership that has been provided has been necessary to keep Lake Cumberland District Health Department on track and moving forward.

Our Healthcare System is much like my former profession of Banking and also Local County Government as these are ever changing industries and the functions of Our Health Care System changes around us daily. All who are involved, whether they are Employees, Staff or Executive Leadership are to be commended for the hard work that has been done. Everyone has adapted well to the necessary changes that have had to take place to keep our Lake Cumberland District Health Department successful in providing Healthcare to the Citizens of the Lake Cumberland. There is no doubt that Lake Cumberland District Health Department is the Best District in The Commonwealth and I am Very Graciously Thankful for all who are part of this organization. Thank You to All for your Service and Thank You All for allowing me to serve alongside all of you.

VISION STATEMENT

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

MISSION STATEMENT

The Lake Cumberland District Health Department prevents illness and injury, promotes good health practices, and assures a safe environment to protect and improve the health of our communities.

A Healthy Today for a Brighter Tomorrow.

www.LCDHD.org



Shawn Crabtree
MSSW, MPA
 Director
 Lake Cumberland District
 Health Department

From the Director

This year, 2018, has been dominated by Hepatitis A and concerns about how changes in the state retirement system will impact us.

The state is experiencing the worst Hepatitis A outbreak in the nation. While we have activated our Departmental Operations Center on a limited basis, and have been actively and aggressively responding, the outbreak stays one step ahead of us, it seems. The fact the outbreak is following the homeless and drug using populations complicates things since the homeless “are off the grid” and many drug users don’t want to be found.

As described by Dr. Weyman, we have responded to the Hepatitis A crisis in the following ways:

- A timely investigation of each case and provision of post exposure vaccination.
- Regular communications via newspapers, radio and social media as to the symptoms, modes of transmission of Hepatitis A, prevention strategies such as pre-exposure vaccination, and proper hand hygiene
- Provision of Hepatitis A vaccine to high risk populations. LCDHD has provided free vaccine and helped immunize those incarcerated in five county detention centers which were geographically most at risk for the spread of Hepatitis A.

- LCDHD has communicated with and recommended that all clients of residential drug treatment centers be vaccinated
- Hepatitis A vaccine is available at all syringe exchange programs in the Lake Cumberland Region.

As far as the “pension crisis” the largest concern for the agency is the contribution amount – the amount expected to be put in by the agency on behalf of the employee as the employer’s share. It is set to go up from around 50% of every salary dollar to over 80%. If this goes through, it will have major impacts on our health department’s financial situation.

We have continued our focus on continuous improvement having completed Electronic Accounts Payable and Salmonella & Campylobacter Quality Improvement Projects. Our Data Analysis Committee continues its work, and we have adopted a new Strategic Plan. Our Performance Management tracker documents that we stay on top of all of our various plans.

Our audit reports and programmatic reviews continue to be positive, and our patient, board and employee satisfaction remains high.

As of January of 2019, I will have 18 years in as your Director. I remain honored and considered myself blessed to work with such an excellent staff and board.



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Adair County



Hon.
Michael Stephens



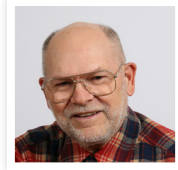
Matt Jackson,
RPh



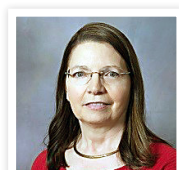
Shantila
Rexroat, DVM



Hon.
Randy Dial



Adlie F. Brown,
Jr., DMD

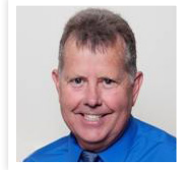


Linda Hamilton

Clinton County



Hon.
Richard
Armstrong



Jake Staton



Hon.
John Phelps, Jr.
Chair



Kristen Branham



Hon.
John Frank



Pam Bills

Cumberland County

Green County

McCreary County



Hon.
Doug E.
Stephens



Stephen
McKinley, OD



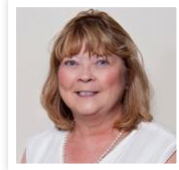
Rosalie Wright



Hon.
Steven Kelley



Hossein
Fallahzadeh, MD
Vice Chair



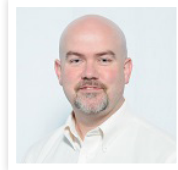
Patty Guinn,
RPh

Pulaski County

Pulaski County



L. Bruce Jasper,
DVM



Tommy Shelton,
MD



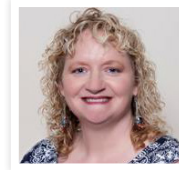
James Wesley



Hon.
Gary D.
Robertson



Richard Miles,
MD



Susanne
Watkins, OD

Russell County

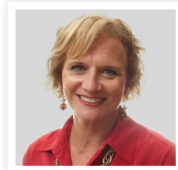
Taylor County



Hon.
Eddie Rogers



Gayle Phillips,
DNP

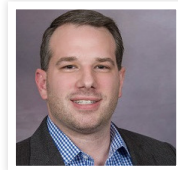


Marlene
Richardson,
DMD

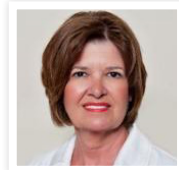
Wayne County



Hon.
Mike Anderson



Joseph Brown,
MD



Lora Elam, RN

2018

LOCAL BOARDS OF HEALTH

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

Adair County

James Bergin
Janella Brown
Jacob Burton
Billy Coffey
Catherine Feese
Ronnie Grant
Matt Jackson
Lee Ann Jessee
Gary Partin
Shantila Rexroat
Michael Stephens
Cynthia Waggener

Cumberland County

Kristen Branham
Janet Clark
Brian Dyer
Robert Flowers
Allison Kerr
Gina Lee-Watson
Joseph Michael Morgan
John Phelps, Jr.
John G. Stephenson
Gary White
Douglas Williams
Vacant

Pulaski County

Reginald Chaney
Rodney Dick
Hossein Fallahzadeh
Patty Guinn
Bruce Jasper
Steven Kelley
Jim Muse
Harvey Schleiter
Tommy Shelton
Gerard Weigel
James Wesley
Rebecca Whitis

Taylor County

Jerome Dixon
Dan Durham
Jay Eastridge
Arthur Haley
Loretta Hash
Phil Hayes
David Hesson
Gayle Phillips
Marlene Richardson
Eddie Rogers
Thomas Rogers
Vacant

Casey County

Adlie Brown
Darin Cundiff
andy Dial
Gina Goode
Housam Haddad
Linda Hamilton
Homer Hecht
Kay King
Linda Lee,
John Price
Tony Price
Don Wilkey

Green County

Charlie Allen
Glenda Bagby
Pam Bills
Garth Bobrowski
Devi Bradshaw
Teresa Collison
Shane DeSimone
Mary DeSpain
John Frank
Paul Patterson
Mark Risen
R. Michael Shuffett

Russell County

Robert Bertram
Connie Blankenship
Don Cooper
Karen Dalton
Charles L. Gore
Stephanie Jones
Richard Miles
H. James Popplewell
Gary D. Robertson
Terry Waddell
C. Leslie Wade
Susanne Watkins

Wayne County

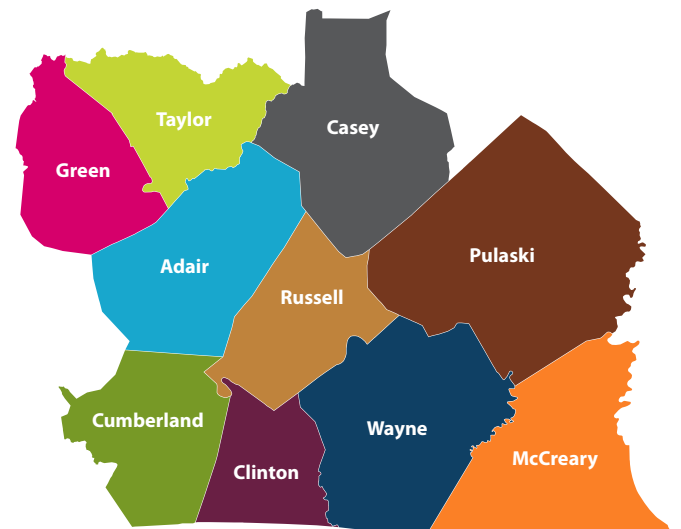
Mike Anderson
William Breeding
Joseph Brown
Sarah Debord Weddle
Jeffery Dishman
Vesta Edwards
Lora Elam
Ronald McFarland
Kenneth Ramsey
James Sawyer
Joe Silvers
Greg West

Clinton County

Richard Armstrong
Judith Brown
Heather Brown-Conner
Susan Cash
Charles Dailey
Carol Denney
Lala Haddix
Christy Nuetzman Guffey
William Powell
Laura Ann Roberts
Jake Staton
Michael Wilson

McCreary County

Jerald Burgess
Allan Chapman
Azalie Egnew
Martha Johnson
Terry Allan Lawson
Stephen McKinley
John Sandidge
Sue Singleton
Doug E. Stephens
Grady Wilson
Rita Wright
Rosalie Wright





PREVENT DISEASE

Syringe Exchanges/Harm Reduction Programs



117,814

clean syringes
provided to
participants in
4 counties

118,941

syringes
collected
a 101%
re-collection rate

4,342

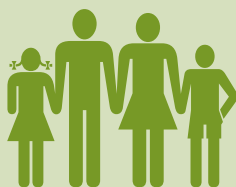
visits by

1,041

unduplicated patients



PROMOTE WELLNESS



667

car seat
safety education

6,313

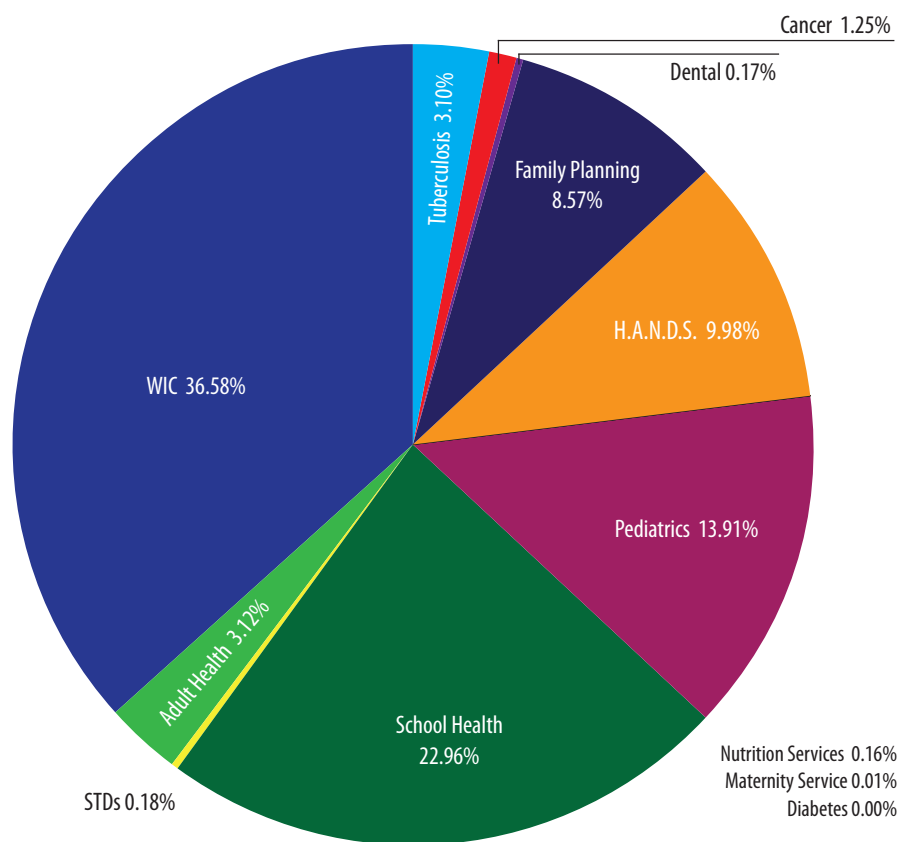
clients received WIC
(Women, Infant, Children)
services

123

cribs provided with
community partnership
to promote safe sleep
environments



Total Clinical Services by Program



Unduplicated Individuals Receiving Clinical Services:

27,385

- Adult Health: **6,676**, 3.12%
- Cancer: **2,680**, 1.25%
- Diabetes: **0**, 0.00%
- Dental: **362**, 0.17%
- Family Planning: **18,350**, 8.57%
- H.A.N.D.S.: **21,351**, 9.98%
- Maternity Services: **21**, 0.01%
- Nutrition Services: **343**, 0.16%
- Pediatrics: **29,766**, 13.91%
- School Health: **49,140**, 22.96%
- STDs: **387**, 0.18%
- Tuberculosis: **6,632**, 3.10%
- WIC: **78,288**, 36.58%

HEALTHY LIVING



41

Tobacco Free Policies at Childcare/Daycare Facilities



4,200

go365 Biometric Screening for (KEHP) members in our district



4

of our 10 counties are Certified Trail Towns



**Leah Jasper,
BBA**
Director of Administrative
Services

Administration Department

Again for 2018, Lake Cumberland District Health Department's (LCDHD) clinic funding continued to decrease, and as a result, clinic patients and services also decreased. Our school program also decreased this fiscal year as 8 fewer schools chose not to contract with our agency for our school health services model. For the 2018 fiscal year, the agency budgeted at a \$619,675 deficit. Management successfully made adjustments that resulted in decreased expenses and increased revenues and as a result, the agency closed with a \$285,952 surplus.

Expenses were less than budgeted primarily as a result of attrition. As employees left the agency, where possible, services were decreased and employees were not replaced. However, the agency also realized less than budgeted expenses because the Kentucky Department of Public Health did not bill LCDHD for any of the required quarterly Medicaid Match payments for FY 2018, which is approximately 27% of all Medicaid revenue collected and is estimated to be a total liability of \$450,000 incurred in 2018, but not expended. As DPH did not bill for any of the four quarters of 2018 during 2018, DPH will likely bill for all four payments for fiscal year 2018 in addition to the quarterly Medicaid Match payments due for the 2019 fiscal year, resulting in higher than budgeted expenses for FY 2019.

Revenues for FY 2018 were \$972,844 higher than budgeted, primarily due to several additional allocation amendments from KYDPH and an additional federal Rural Health Opioid Grant.

At the end of the fiscal year, after adding in the surplus, our restricted reserve funds on hand are \$1,468,040 and our unrestricted

funds total \$5,785,499 for a total of \$7,253,690 in reserves. As the Department for Public Health calculates maximum unrestricted reserves for Health Departments as 30% of non-fee-for-service expenses and 40% of fee-for-service expenses, LCDHD's current unrestricted reserve balance is \$591,169 (11%) more than allowable. As Public Health Departments have been informed that they can expect employee pension costs to from 49.57% of employee salary to 83.43% of employee salary, we're in conversation with KYDPH, discussing ways we can utilize these funds to offset this expected staggering increase in expenses.

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

Although the administrative tasks required in processing third party clinic claims for patient services continues to be complex requiring more staff to collect less funds, clinic services have decreased and in addition, the Administrative Services team has found ways to improve efficiencies and have decreased the number of full time equivalent employees in our department by 4.5 staff since FY 16.

As health departments continue to experience clinic service defunding, the LCDHD Administrative Services Department is committed to remain true to the mission and vision of public health and to a transparent working environment that's constantly improving our processes and finding new efficiencies while maintaining high standards.

Allowable Unrestricted Reserve Calculation 2017 - 2018

Cost Center	CC#	Expense	Service Fees	Service Fee % of Total Expense	Non-Fee Program Expense	Fee for Service Program Expense
Food Service	500	326,513	50,263	15.39%	326,513	0
Public Facilities	520	82,913	12,783	15.42%	82,913	0
General Sanitation	540	193,091	0	0.00%	193,091	0
Onsite Sewage	560	480,136	289,681	60.33%	0	480,136
Retail Food Standards Grant	592	5,492	0	0.00%	5,492	0
Dental Services	712	3,494	5,384	154.07%	0	3,494
KWSCP Pink County Outreach	725	25,127	0	0.00%	25,127	0
ZIKA Preparedness and Response	726	55	0	0.00%	55	0
Harm Reduction/Needle Exchange	727	86,206	0	0.00%	86,206	0
Diabetes Prevention Program	732	14,006	7,615	54.37%	14,006	0
Community Health Action Team	736	105,568	0	0.00%	105,568	0
Passport Referrals	741	4,640	0	0.00%	4,640	0
Environmental Strike Team	746	7,216	0	0.00%	7,216	0
KHREF	747	672	0	0.00%	672	0
Regional EPI HAI Activities	749	11,328	0	0.00%	11,328	0
Accreditation	750	7,328	0	0.00%	7,328	0
HANDS GF Services	752	1,090,859	1,090,859	100.00%	0	1,090,859
ZIKA Vector Control Activities	755	76	0	0.0%	76	0
Personal Responsibility Education Program	756	63,737	0	0.00%	63,737	0
GO365 Humana Vitality	758	322,576	451,330	139.91%	0	322,576
HANDS Federal Home Visiting	760	162,300	162,300	100.00%	0	162,300
MCH Coordinator	766	184,520	0	0.00%	184,520	0
Competitive Home Visiting	767	2,015	2,015	99.98%	2,015	0
KCCSP-HB 265	770	382	0	0.00%	382	0
HBE Assistance	772	175	0	0.00%	175	0
Child Fatality Prevention	774	10,442	0	0.00%	10,442	0
ECD School Projects	775	113,573	0	0.00%	113,573	0
Pediatric/Adolescent	800	995,133	305,032	30.65%	995,133	0
Family Planning	802	814,034	282,887	34.75%	0	814,034
Maternity Services & Activity	803	1,744	1,767	101.35%	0	1,744
WIC Services	804	1,809,080	0	0.00%	1,809,080	0
MCH Nutrition & Group Activity	805	50,655	8,252	16.29%	79,868	0
Tuberculosis	806	331,506	96,753	29.19%	331,506	0
Sexually Transmitted Disease	807	32,508	7,078	21.77%	32,508	0
Diabetes	809	258,734	0	0.00%	258,734	0
Adult Visits & Follow-Up	810	430,615	47,432	11.02%	430,615	0
Breast & Cervical Cancer	813	151,956	37,297	24.54%	151,956	0
Healthy Communities	817	2,000	0	0.00%	2,000	0
Preparedness Coordinating & Training	821	112,370	0	0.00%	112,370	0
Preparedness Epidemic & Surveillance	822	76,009	0	0.00%	76,009	0
Preparedness Medical Reserve Corp	823	10,686	0	0.00%	10,686	0
Local Community Public Health Projects	826	32,005	0	0.00%	32,005	0
Adair County Smoke-Free Program	827	878	0	0.00%	878	0
Diabetes Outreach and Education	828	111	0	0.00%	111	0
Heart4Change	829	19,077	0	0.00%	19,077	0

Allowable Unrestricted Reserve Calculation 2017 - 2018 (cont.)

Cost Center	CC#	Expense	Service Fees	Service Fee % of Total Expense	Non-Fee Program Expense	Fee for Service Program Expense
Sexual Risk Avoidance Edu Grant	830	428,554	0	0.00%	428,554	0
Worksite Wellness Project	831	46,459	0	0.00%	46,459	0
Worksite Wellness	832	15,576	0	0.00%	15,576	0
Breastfeeding Promotion	833	49,923	0	0.00%	49,923	0
HPP Activity Support	835	14	0	0.00%	14	0
Tobacco	836	238,155	375	0.16%	238,155	0
Marshall University Diabetes Grant	839	7,446	0	0.00%	7,446	0
Breastfeeding Peer Counselor	840	59,258	0	0.00%	59,258	0
Diabetes Today Program	841	20,888	0	0.00%	20,888	0
HIV Counseling & Testing	842	5,007	0	0.00%	5,007	0
Ryan White Pharm Rebate Funds	844	403,417	0	0.00%	403,417	0
Ryan White Program	845	161,869	0	0.00%	161,869	0
Rural Health Opioid Grant	846	128,349	0	0.00%	128,349	0
Healthy Start Day Care	848	49,595	0	0.00%	49,595	0
HANDS Prima Gravida Program	853	1,740,402	1,740,402	100.00%	0	1,740,402
Arthritis	856	1,503	0	0.00%	1,503	0
Supplemental School Health	858	1,466,690	1,466,690	100.00%	0	1,466,690
HPP Coordinator	875	30,747	0	0.00%	30,747	0
WIC Operational Adjust Funding	886	80,956	0	0.00%	80,956	0
Core Public Health	890	12,338	4,202	34.06%	12,338	0
Medicaid Match	891	304,594	0	0.00%	304,594	0
Allocable Leave & Fringes	895	1,596,789	3,285	0.21%	1,596,789	0
TOTAL		15,287,022	6,073,684	39.73%	9,204,786	6,082,236

Multiplier for Allowed Unrestricted Reserve	30%	40%
Allowed Non-Fee for Service Unrestricted Reserve & Fee for Service Unrestricted Reserve	\$2,761,435.67	\$2,432,894.50
Allowed Non-Service Fee Restricted Reserves (30% of Total Non-Service Fee Expenses)		2,761,436
Allowed Service Fee Restricted Reserves (40% of Total Service Fee Expenses)		2,432,895
Total Allowed Unrestricted Reserve		5,194,330
Fiscal Year End Actual Unrestricted Reserve		5,785,499
Remaining Allowable Unrestricted Reserve		(591,169)

Description	FY2017		FY2018	
Current Allowed Unrestricted Reserve	\$5,201,912.15	100%	\$5,194,330.17	100%
Fiscal Year End Actual Unrestricted Reserve	\$5,347,847.00	103%	\$5,785,499.14	111%
Remaining Allowable Unrestricted Reserve	\$(145,934.85)	-3%	\$(591,168.97)	-11%
Total Program Restricted Reserves	\$1,619,890.79		\$1,468,190.56	
Total Reserves	\$6,967,737.79		\$7,253,689.70	

Lake Cumberland District Health Department

Statement of Revenues, Expenditures & Change in Fund Balance

For the Fiscal Year ending June 30, 2018

(Published in accordance with KRS 424.220 and 65.070. The following information may be inspected by the general public at 500 Bourne Ave., Somerset, KY from September 1, 2018 between the hours of 8:00 am to 4:30 pm.)

Fund Balance as of July 1, 2017

\$6,967,737.57

Revenues:	
State	4,218,540.04
Federal	3,499,934.02
Local	3,104,789.36
Service Fees	3,866,110.18
Interest	883,600.58
State Restricted Previous Years' Carryover/ Reserve Funds Used	5,389.75
Federal Restricted Previous Years' Carryover/ Reserve Funds Used	27,253.89
Fee Restricted Income Previous Years' Carryover Funds	238,321.75
Unrestricted Previous Years' Carryover/ Reserve Funds Used	320,626.44
Total Revenues:	\$16,164,566.01

Expenditures:	
Salary & Leave	6,407,672.83
Fringe Benefits	4,983,205.76
Independent Contractors	1,276,398.71
Travel	373,481.58
Space Occupancy	491,053.99
Office Administration	398,113.49
Medical Supplies	313,791.08
Automotive	9,082.48
Other	1,034,222.13
Capital Expenditures	0.00
Total Expenditures:	\$15,287,022.05

Excess Revenue over Expenditures (including Carryover/Reserve Funds)	877,543.96
Less State Restricted Previous Years' Carryover Funds Used	(5,389.75)
Less Federal Restricted Previous Years' Carryover Funds Used	(27,253.89)
Less Fee Restricted Income Previous Years' Carryover Funds	(238,321.75)
Less Unrestricted Previous Years' Carryover Funds Used	(320,626.44)
Total Previous Year Carryover Funds Used	(591,591.83)

Total Excess Revenue Over Expenditures (Less Carryover Funds)

\$285,952.13

Fund Balance as of June 30, 2018

\$7,253,689.70

Lake Cumberland District Health Department Revenue and Expense Summary Comparison to Prior Year

As of Period Ending June 30, 2018

	Current YTD Actual	Prior YTD Actual	Change	% Change
Revenue				
State	4,218,540.04	4,035,957	182,584	5%
Federal	3,499,934.02	3,262,135	237,799	7%
Local	3,104,789.36	3,010,313	94,476	3%
Service Fees	4,749,710.76	6,070,990	(1,321,279)	-22%
Unrestricted Carryover	591,591.83	217,911	373,681	171%
Total Revenue	16,164,566.01	16,597,306.41	(432,740)	-3%
Expense				
Salary & Leave	6,407,672.83	6,506,577	(98,904)	-2%
Fringe Benefits	4,983,205.76	5,008,042	(24,836)	-0%
Independent Contractors	1,276,398.71	1,365,833	(89,434)	-7%
Travel	373,481.58	364,666	8,816	2%
Space Occupancy	491,053.99	511,491	(20,437)	-4%
Office Administration	398,113.49	424,863	(26,750)	-6%
Medical Supplies	313,791.08	295,954	17,837	6%
Automotive	9,082.48	8,213	870	11%
Other	1,034,222.13	917,921	116,301	13%
Capital Expenditures	-	0	0	N/A
Total Expense	15,287,022.13	15,403,559.63	(116,538)	-1%
Excess/(Deficit) of Revenue over Expense	877,543.96	1,193,746.78	(316,203)	-26%





Jamie Lee, RN, CDE
Diabetes/Worksite
Wellness Programs

Wellness Outreach & Education

The Wellness Outreach and Education Program started the year with transitions. Destiny Greer, long-time diabetes educator who covered 3 counties resigned; then we had a large budget cut in diabetes funding. So even though we had to revise our plan and shift staff to cover the district, we still ended up having a good year. We continued providing our AADE accredited diabetes self-management classes, but we chose to go under the state umbrella of accreditation to be more cost effective. We provided additional diabetes education and awareness activities throughout the district. Our team continued to actively participate in local health coalitions and the Kentucky Diabetes Network on the state level. The Diabetes Team presented a poster at the national meeting of the American Association of Diabetes Educators for the Diabetes Prevention Program and provided a break-out session at the Marshall University

Regional conference in Tennessee in the Spring.

We completed nearly 4,200 go365 Biometric Screenings for Kentucky Employees Health Plan (KEHP) members in our district and our Jefferson County contract staff completed over 2,800 screenings. Despite the challenges of working off-site, we have had a productive year.

Early spring, we were notified that we had received a 3-year HRSA grant to work with two churches, Centerpoint Church of the Nazarene in Cumberland County and Dunnville Christian Church in Casey County, to reduce cardiovascular risk factors in individuals over 18 years old. We have hit the ground running with completing baseline biometric screenings, establishing health committees, and starting community gardens at each church. We anticipate seeing great things happening at the two churches over the next 3 years.



Becky Baker, RN, BSN
School Nurse Program
Manager

School Health Program

The LCDHD School Health Program provides essential public health prevention and promotion services to the students, parents and school staff throughout our communities. Our public health school nurses are committed to providing the most comprehensive and efficient nursing care as possible to help decrease barriers to learning while improving community health. Our program, for the 2017-2018 school year, consisted of twenty-two satellite health department clinics which are located within five of our service area's school districts. LCDHD provided these clinics at a contractual amount to the school board. The satellites were staffed with registered nurses employed through the school districts.

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

2017 - 2018 School Health Services Summary:

- 43,767 Sick/acute visits
- 25,271 Daily Medication
- 5,615 Diabetes
- 677 Asthma
- 81 Seizure
- 27 Allergies
- 20 Emergency-type visits
- 25 Well child exams
- 2,160 KDE Required Screenings
- 1,695 Lice Screenings
- 180 MD Referrals



**Laura Woodrum,
RN, BSN**
Clinic Director

Clinical Services

The Lake Cumberland District Health Department (LCDHD) clinic nursing division continues to provide quality health services to citizens in the Lake Cumberland area. This year has presented exciting opportunities and the staff have continued to excel in their evolving duties.

Our WIC program services approximately 8,000 participants in the Lake Cumberland area. Each participant receives vouchers for healthy foods, nutritional education, and referrals to other programs. The LCDHD coordinator works with 50 different vendors who participate in the WIC program. The WIC program makes up over 70% of the clinic services which the health department clinic provides. The breastfeeding and peer counselor program provides breastfeeding support throughout the district by support groups, phone calls, home visits, health fairs, and onsite visits.

LCDHD provides the Ryan White Part B HIV/AIDS services to those living with HIV in the Lake Cumberland area as well as 21 additional counties in eastern Kentucky. This program was designed to address the health care needs of HIV persons. The program helps them find and utilize resources which improve their overall health and quality of life. The program also helps to control the spread of HIV infection.

The Adair and Russell county clinics both have operational syringe exchange programs. McCreary and Pulaski County will begin in November and December 2017. Syringe exchange

is an evidence proven strategy for the prevention of HIV and Hepatitis C virus. Recent data shows that Kentucky leads the nation in Hepatitis C infection among IV drug users.

LCDHD was recently awarded a 3-year rural health opioid grant by the Department of Health and Human Services (HRSA) to provide education to the community, healthcare providers, and substance users. The grant will also provide case management to those at risk for opioid use disorder.

We know that every 5 days one baby dies in their sleep - we also know many of these deaths could potentially be prevented by following safe sleep practices. Our maternal child health program is working with community providers and members to provide safe sleep education. We are also able to provide safe sleep conditions by providing cribs to those in need.

We continue to provide family planning and cancer screening services. Women receive a full physical exam, education, counseling, and referral as needed. Women who meet income guidelines also receive assistance with additional testing and procedures such as mammogram, biopsy, follow up, etc.

The clinic staff provides immunizations for both children and adults. We offer STD/HIV testing, TB screening and treatment, well child exams, lead screening, and medical nutritional therapy.

The LCDHD clinic nursing staff continue to strive to provide the best possible care to those in our communities.





Sylvia Ferrell, RN
H.A.N.D.S Director

HANDS Program

Fiscal year 2018 was a challenging, yet fascinating year for Lake Cumberland District’s HANDS program. Our HANDS EFR (Electronic Family Record) system had its first anniversary in Dec. 2017. The creation of this system brought about much change to HANDS, as we learned the potential for this system was so much more than just for home visits. We found we could use it for most all aspects of home visits, supervision, monitoring, training, shifting and sharing workloads, saving time and miles and preparing for state required QA Site visits. Everything done in our electronic charting and filing system is “real time”, which provides our state technical assistant and quality assurance evaluator accurate and up to date information for all enrolled families in all counties across Lake Cumberland District. We also learned that the majority of our QA site visits could be done remotely from Frankfort, Kentucky, allowing our site visits to be more efficient. After several counties have been evaluated, we’ve learned that our QA scores are higher than we’ve ever achieved; with some site scores the highest in the state. Throughout the year, we shared our system knowledge with other HANDS providers, including the HANDS central office staff and folks from several other counties and district HANDS

sites. At this time, there are 4 other state HANDS providers using our EFR system and several others who have expressed interest.

HANDS was met with staff turnover and difficulties hiring staff, yet we managed to end the year in a good place financially. In May, we traveled to the bi-yearly HANDS Retreat in Lexington, Kentucky providing all our staff with up to date education related to abuse, neglect, violence and home visiting safety. Continuing education is a priority for our HANDS home visitors.

As FY 2018 ended, HANDS was excited as 5 registered nurses joined our staff. They are trained now and working on caseloads. We’ve also had turnovers of clerical staff, however, to date, all vacant positions have been filled.

The most exciting achievement during 2017, is that Kentucky’s HANDS achieved its goal of becoming a Federally approved home visitation program; with Lake Cumberland District HANDS remaining the largest provider of HANDS services in the state of Kentucky.

As we begin FY 2019, our team remains strong and focused on providing encouragement, education and support to our HANDS families and our communities; still striving towards the goal; to help all new parents be the BEST parent they can be.



Angie Simpson
Administrative Services
Manager

Support Services

2018 has been a productive year for the clinic support staff. We continue to take pride in offering the best customer service to patients while making the patient’s confidentiality a priority and maintaining efficiency with the registration and checkout process. Our Patient Satisfaction remains high due to the Clinic Support staff’s hard work and commitment, to provide excellent services to patients.

Hepatitis A was a challenge this year with vaccinations recently becoming a requirement for school aged children. This happening while we had several Hepatitis A cases in our counties causing the clinics to be extremely busy.

We have a great Clinic Support Staff who will ensure quality services are provided to our community. We look forward to the opportunities of the coming year.



**Christine Weyman,
MD, PhD, FAAP**
Medical Director

Medical Director

Fiscal year 2017/18 was a very busy time, especially for epidemiology and environmental staff as they tackled the investigation and mitigation of the Hepatitis A outbreak.

By August 2018, Kentucky case numbers reached 1495, including 846 hospitalizations and 12 deaths. There were a total of 34 cases in the Lake Cumberland region; 25 in Taylor, 4 in Pulaski, 2 in Adair, 1 in Casey, Green and Russell Counties. At the time of writing, the reported cases rose to 2050 for Kentucky and 52 for Lake Cumberland.

The majority of cases were reported among those who used illicit drugs and/or were homeless. A contaminated food source was not identified and transmission occurred through person to person contact. Transmission of the virus occurs via oral contact with contaminated hands or objects.

Symptoms include nausea, vomiting, diarrhea, jaundice, fatigue and fever. Individuals are contagious 2 weeks before and 1-2 weeks after symptom onset. The average incubation period of Hepatitis A is 4 weeks.

Hepatitis A infection is a vaccine preventable disease and the best way of slowing the outbreak is by vaccinating at risk individuals. A decision was made to provide vaccine and help jails vaccinate the inmates, most of whom were illicit substance users.

From May through August 553 inmates were vaccinated in Adair, Casey, Pulaski, Taylor and Wayne- the counties where hepatitis cases were reported. At the time of writing, 890 immunizations had been administered.

Another 529 vaccines had been given at the county clinics, often as part of a post exposure prevention protocol.

The Lake Cumberland District Health Department (LCDHD) response included:

- A timely investigation of each case and provision of post exposure vaccination. If vaccine is given within 2 weeks of exposure it can prevent illness.
- Regular communications via newspapers, radio and social media as to the symptoms, modes of transmission of Hepatitis A, prevention strategies such as pre-exposure vaccination, and proper hand hygiene.
- Provision of Hepatitis A vaccine to high risk populations. LCDHD has provided free vaccine and helped immunize those incarcerated in five county detention centers which were geographically most at risk for the spread of Hepatitis A.
- LCDHD has communicated with and recommended that all clients of residential drug treatment centers be vaccinated.
- Hepatitis A vaccine is available at all syringe exchange programs in the Lake Cumberland Region.





Tracy Aaron, CHES
Health Policy and
Promotion Director

Health Promotion and Policy

Over this past year, the Health Education Team continues their hard work to improving community’s health. Our school and community programs on tobacco prevention and cessation, teen pregnancy prevention, sexually transmitted disease prevention, nutrition and physical activity, and community health coalitions. In the fall, we started revising the Community Health Assessments (CHA) and Community Health Improvement Plans (CHIP) for the ten counties.

Health Promotion and Policy Accomplishments in 2018:

- 10 Community Health Coalitions
- 10 Community Needs Assessment Completed
- 4 Certified Trail Towns (Taylor 2018, Adair 2015, McCreary 2015, Russell 2015)
- 10 Tobacco Free Childcare Centers
- 24,678 Classroom Presentations

The Health Educators work diligently to make Lake Cumberland District a healthier place to live, work and play. The health educators’ days are busy, schedules are tight, jobs are challenging, rewards take time, behavior and policy changes are slow, nonetheless, health improvements are a must! Our persistence and dedication are immense as we are committed to “Promoting Excellent Health That Last A Lifetime”.

4 Certified Trail Towns in Lake Cumberland District



- Taylor in 2018
- Adair in 2015
- McCreary in 2015
- Russell in 2015

Tobacco-Free Childcare Centers





Amy Tomlinson, MPH
Public Health
Preparedness Program
Manager

Preparedness

Lake Cumberland District Health Department's Preparedness Program has once again had a very busy year! We are pleased to report that we recently received 100% on the Readiness Review for the fifth consecutive year from the Kentucky Department for Public Health, indicating that the Program met all of its required deliverables for the year.

This year we have exercised our Department Operations Center (DOC) plans by standing up the DOC in a limited capacity in response to the ongoing Hepatitis A outbreak. We will have an after-action report and be suggesting some revisions to the plan at the conclusion of the DOC activation. Preparedness is also reviewing and revising ALL the LCDHD response plans this year.

The Preparedness Program continues to work very hard to build and strengthen relationships within the local communities, including those with emergency management, first responders, hospitals, long term care

agencies, community organizations and other partners. In the face of decreased funding for many programs and agencies, these partnerships are becoming even more valuable. They provide an opportunity to share knowledge, training and exercise opportunities and resources and assets. One example of these partnerships is the Region 14 Healthcare Preparedness Coalition. This is a group of partners from across the 10-county area who are involved with healthcare and come together for monthly meetings, to share resources and to train and exercise as a group. The membership of this coalition has grown significantly this year. It is exciting and very helpful to have so many partners engaged and involved!

The Preparedness Program consists of 2 full-time staff - the preparedness manager and the regional epidemiologist.

For more information on Disaster Preparedness and Epidemiology, visit our website at www.lcdhd.org.





Stuart Spillman, RS, REHS
Environmental Health Director

Environmental

This has been an interesting year for environmental health services. We have seen many cases of Hepatitis A in our district and some of those cases have been food service employees. Hepatitis A is a foodborne illness that can be transmitted by an infected person handling food after restroom use. This disease can make a person very sick and result in hospitalization so it was imperative that we investigate each case and alert the public that had eaten at the establishment while the infected person was working. Of course, this brings up the issue of releasing this information to the public and doing harm to the restaurants business, which we do not do lightly, but the safety of the public is paramount. Along this same vein, we have been working to put together an on-line food training course for food handlers. This will allow employers to train their employees without them having to take time out of their schedule to actually attend a training. The training will focus on proper food handling and hand washing techniques and will ensure that we have a competent food service worker. The training will also address foodborne diseases and what to do if you have an employee with a foodborne illness. We expect this training to go live either over the winter or early spring 2019.

The environmental staff has again

been involved in the trapping and testing of mosquito pools in our communities in conjunction with the state to monitor the types of mosquitos we have and the diseases they carry. This year we did find that West Nile Virus is present in our mosquito pools, therefore it is important to limit harborage for the development of mosquitos and to protect yourself against bites. The health department continues to larvicide and to spray pesticide when we receive complaints.

This year we received a grant to start the process of meeting the FDA Retail Food Standards. We were able to review our current food code against the newest version and note the major differences. In the upcoming year we expect Kentucky will adopt the latest FDA food code and we have prepared ourselves for the changeover.

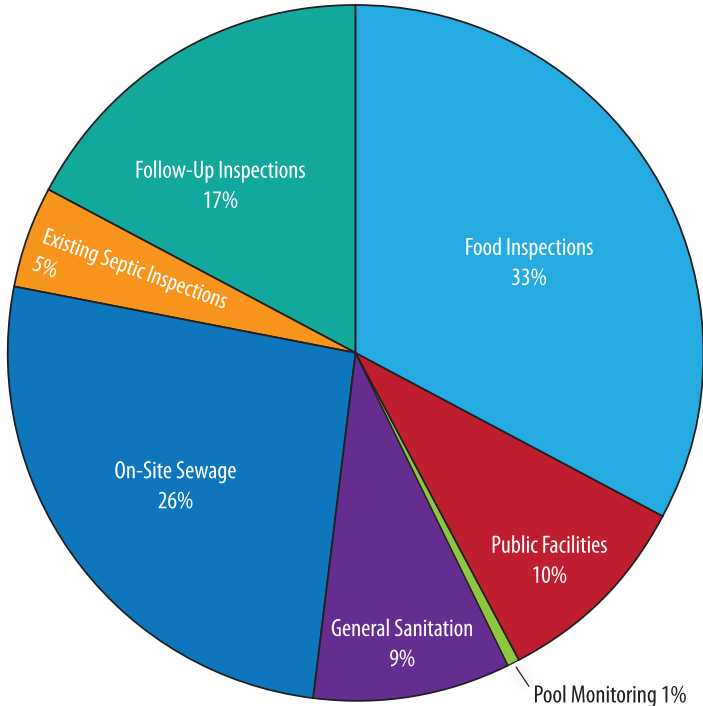
Environmentalist have been involved in many other small projects and along with this have inspected over 4,900 facilities ranging from schools, restaurants and stores, mobile home parks, and on-site sewage systems. The staff have also investigated 604 environmental complaints including animal bites. We continue to serve as the clearing house for all environmental complaints.

We are proud to be able to serve our community and know that the work we do affects everyone who lives here.

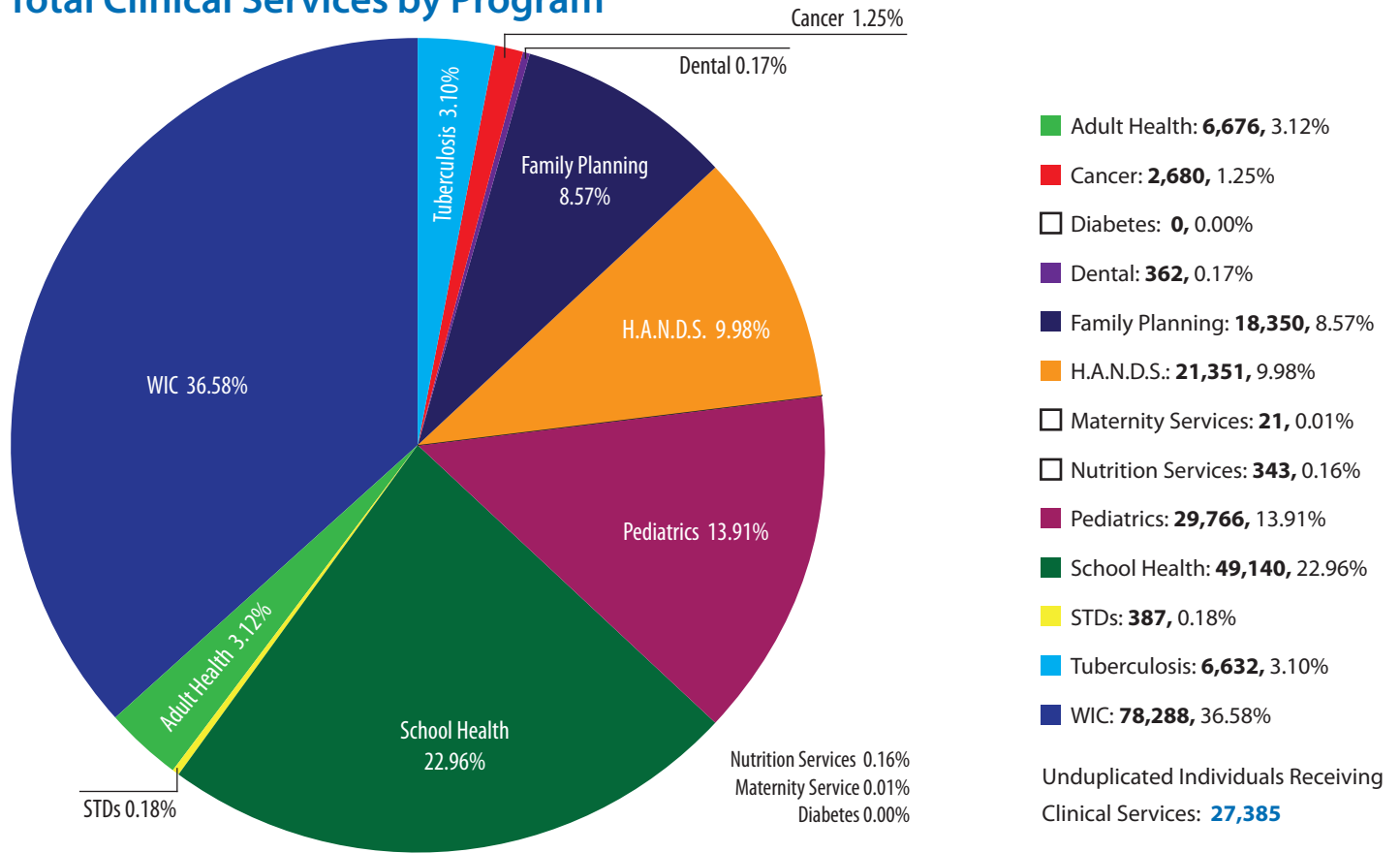
Environmental Inspections by Program 2017 - 2018

- Food Inspections: **2,023**
- Public Facilities: **590**
- Pool Monitoring: **33**
- General Sanitation*: **533**
- On-Site Sewage: **1,610**
- Existing Septic Inspections: **288**
- Follow-up Inspections of all types: **1,055**

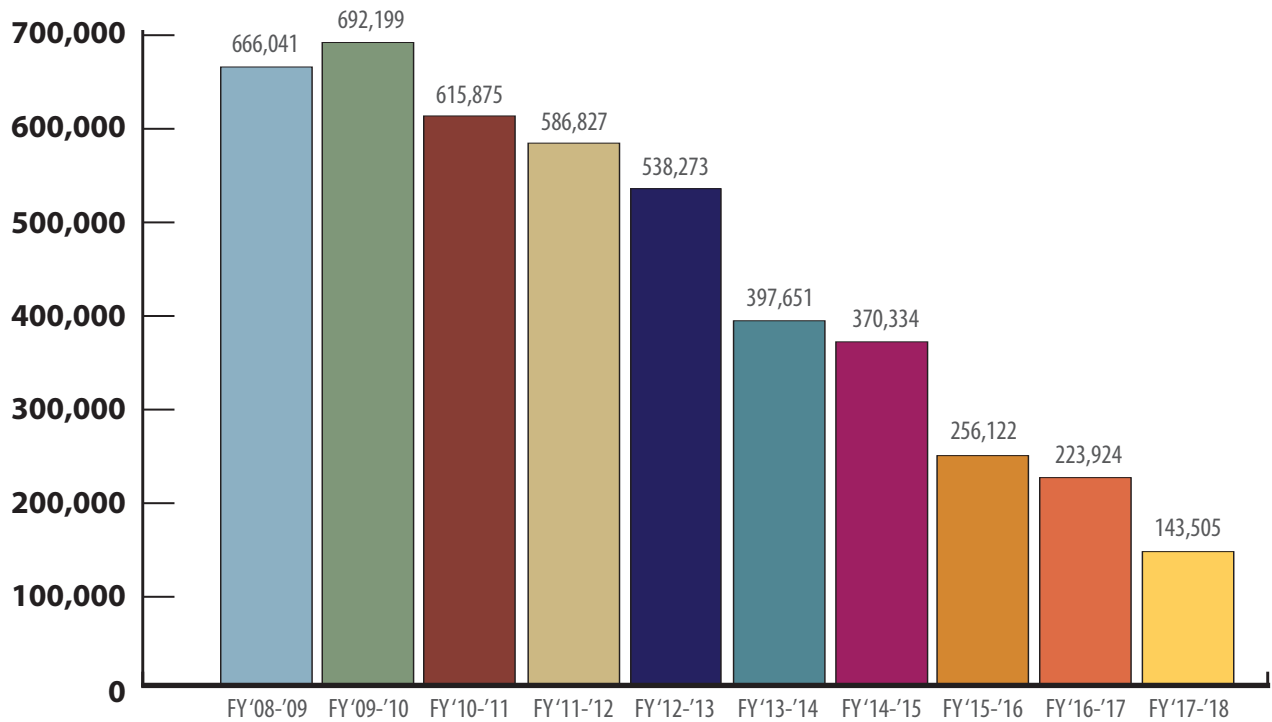
*including rabies and sewage complaints



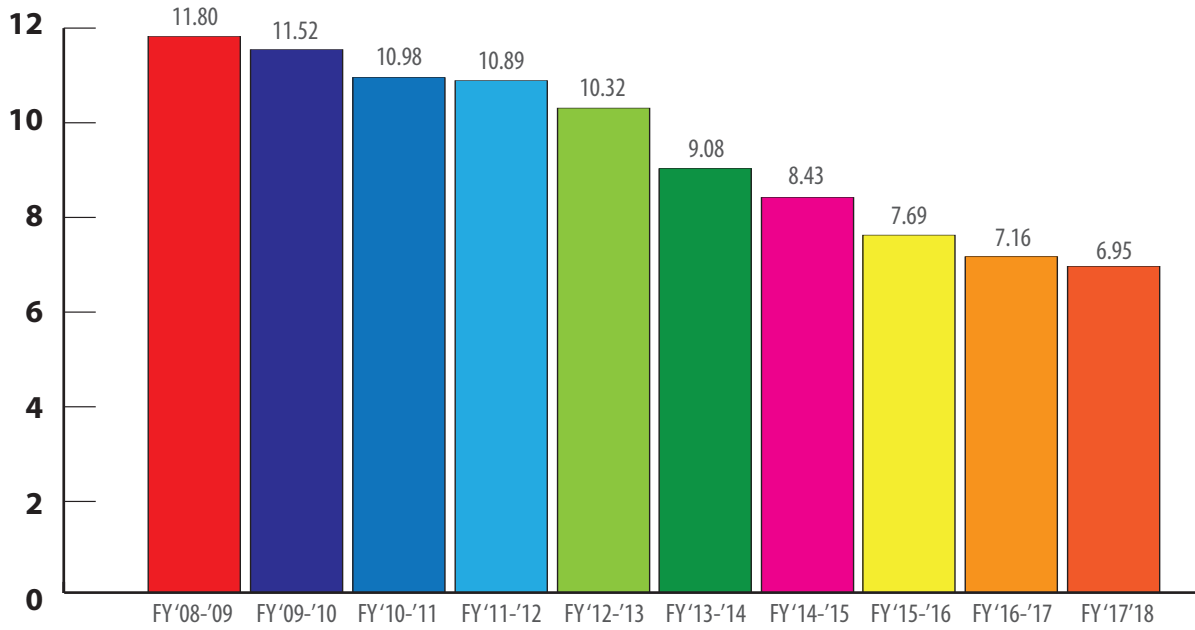
Total Clinical Services by Program



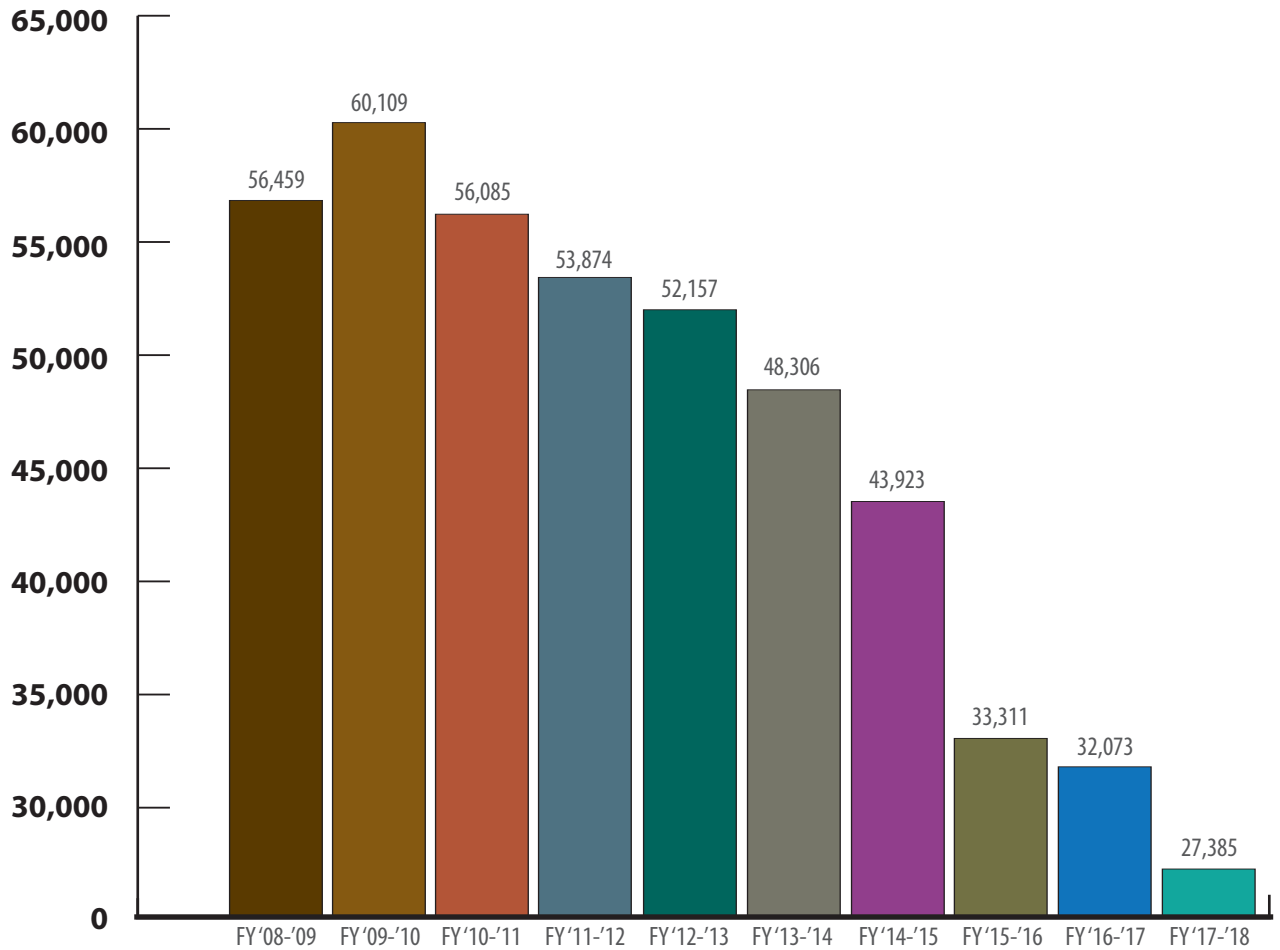
District Total Services by Fiscal Year



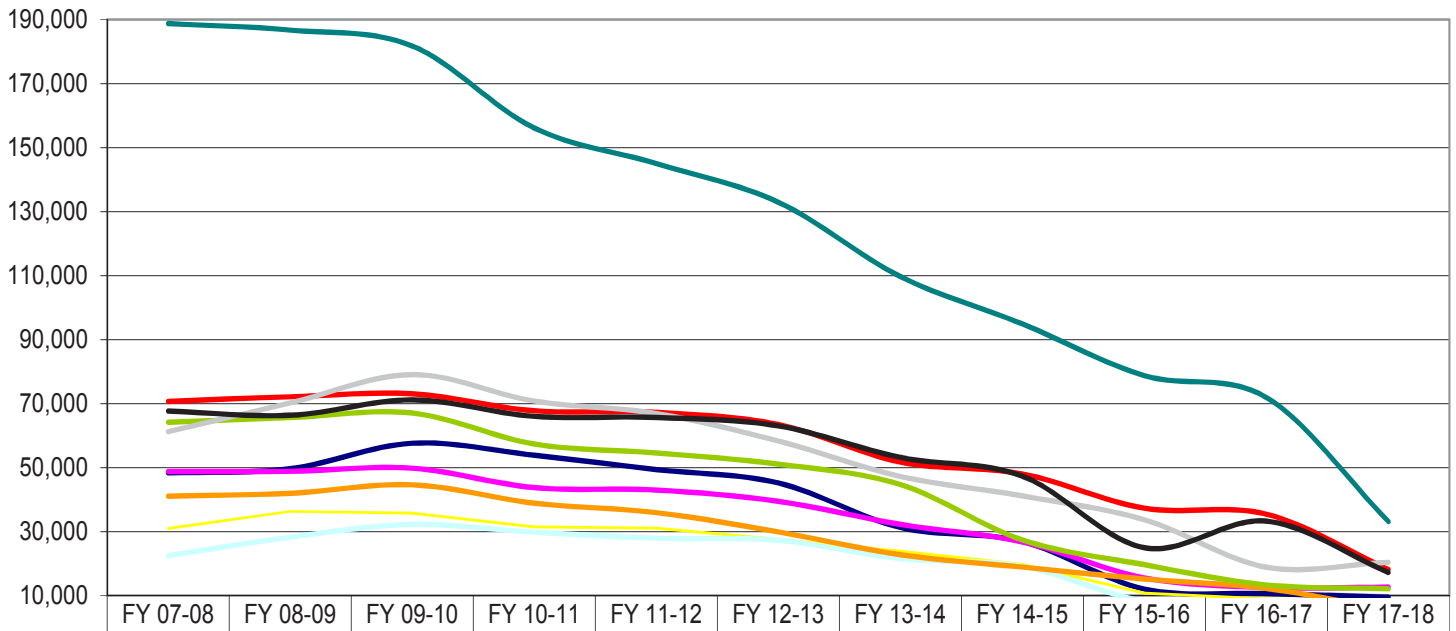
District Services per Patient by Fiscal Year



District Total Unduplicated Patients by Fiscal Year

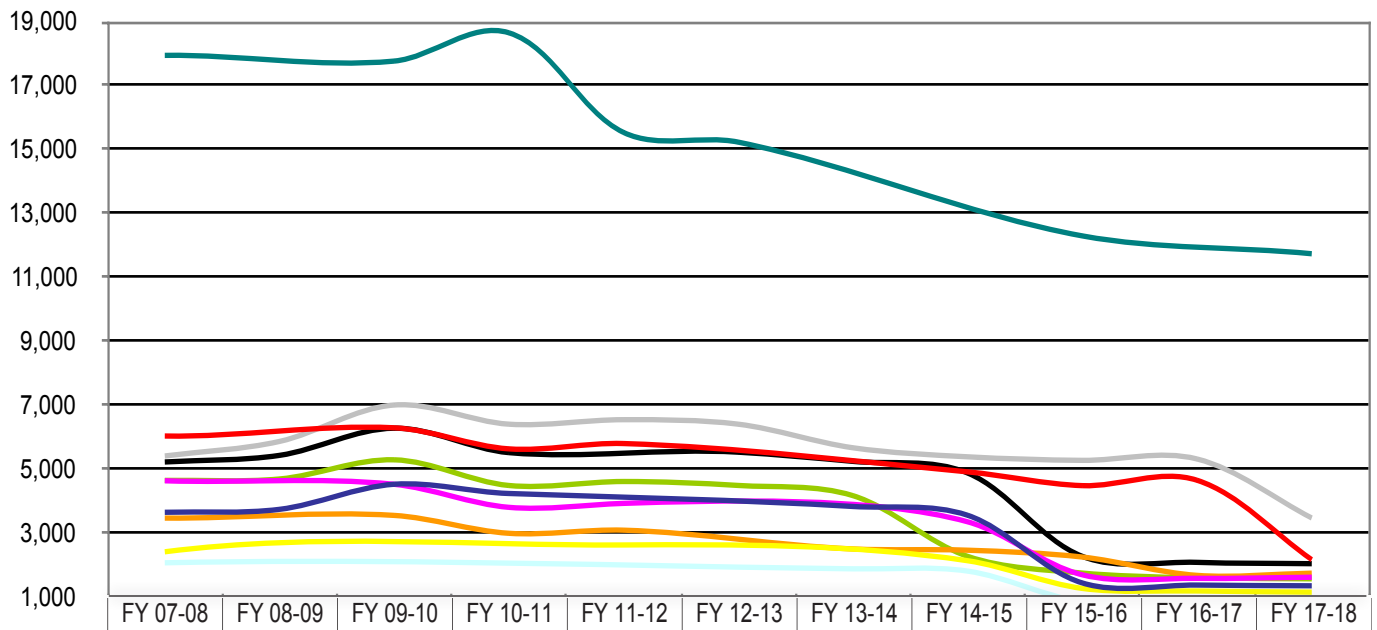


Total Services per County by Fiscal Year



	FY 07-08	FY 08-09	FY 09-10	FY 10-11	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18
Adair	48,316	49,673	57,616	53,870	49,388	45,204	31,300	26,913	12,055	10,660	9,454
Casey	48,797	48,841	49,826	43,747	43,002	39,475	32,252	26,763	15,526	12,537	12,658
Clinton	30,968	36,286	35,785	31,443	31,092	27,555	23,879	19,764	10,748	8,991	8,421
Cumberland	22,468	28,235	32,258	29,815	27,915	27,298	21,556	19,144	8,210	6,662	6,308
Green	41,069	41,974	44,621	38,900	35,938	29,909	22,788	18,920	15,201	12,228	5,547
McCreary	70,701	72,133	73,060	67,766	67,273	63,474	51,734	48,021	37,321	35,456	18,183
Pulaski	188,757	186,738	181,768	156,144	145,035	132,943	109,721	94,916	78,745	71,914	33,138
Russell	64,194	65,611	67,057	57,378	54,584	51,086	44,718	27,406	19,649	13,340	12,128
Taylor	61,247	70,207	79,060	70,805	66,921	58,294	47,248	41,156	33,713	18,869	20,430
Wayne	67,682	66,343	71,148	66,007	65,679	63,035	53,193	47,331	24,954	33,267	17,238

Unduplicated Patients per County by Fiscal Year



	FY 07-08	FY 08-09	FY 09-10	FY 10-11	FY 11-12	FY 12-13	FY 13-14	FY 14-15	FY 15-16	FY 16-17	FY 17-18
Adair	3,625	3,717	4,504	4,214	4,256	3,961	3,807	3,531	1,409	1,343	1,320
Casey	4,613	4,495	4,502	3,780	3,904	4,009	3,650	3,326	1,664	1,554	1,588
Clinton	2,386	2,841	2,751	2,508	2,600	2,552	2,307	2,106	1,238	1,158	1,121
Cumberland	2,041	2,115	2,261	1,999	1,980	1,905	1,852	1,781	813	742	772
Green	3,443	3,414	3,527	2,966	3,064	2,751	2,475	2,436	2,222	1,647	1,716
McCreary	6,016	5,955	6,274	5,613	5,780	5,387	5,131	4,892	4,460	4,629	2,140
Pulaski	17,950	17,998	17,771	18,658	15,534	15,230	14,070	13,389	12,290	12,079	11,730
Russell	4,625	4,669	5,270	4,465	4,590	4,466	4,146	2,243	1,719	1,570	1,539
Taylor	5,390	5,846	6,988	6,387	6,528	6,387	5,647	5,364	5,253	5,296	3,446
Wayne	5,202	5,409	6,261	5,495	5,638	5,509	5,221	4,855	2,243	2,055	2,013



Janae Tucker, RN, CCS-P
Local Health Nurse Specialist

Quality Improvement & Accreditation

The Lake Cumberland District Health Department achieved voluntary national accreditation through the Public Health Accreditation Board (PHAB) March 2017. Quality and performance improvement activities were stimulated by this process and since then have continued to evolve and become everyday practice, helping improve efforts throughout our organization and in our communities.

Customer and employee satisfaction results remain high. This is an indication that both our customers and our staff are pleased with the services we provide and the environment in which they work and receive care, in spite of the financial

struggles we have dealt with throughout the last several years.

Quality assurance activities also continue in all programs, revisions to program QA tools, including the clinic and school utilization review tools, are made as needed to reflect the annual state updates to the Core Clinical Service Guide, Administrative Reference, etc. These tools help assure compliance with all district and state requirements, as well as all federal guidelines. Overall, the internal and external audit scores continue to be very good for all of our programs. We are very proud of these scores but still continue to strive for excellence in all areas.

Lake Cumberland District Health Department Strategic Plan 2018 - 2023

Priority Area: 1. Improve Quality of Life	Measure Baseline	Measure Target	Start Date	Target Date	Progress thru 09/30
Goal: 1.1. Provide more evidence based programs in the community					
Objective: 1.1.1. Within the Lake Cumberland District, community health coalition partners, including the Lake Cumberland District Health Department (LCDHD), will adopt and implement at least three evidence-based strategies to address priority areas as identified in the Community Health Assessments/Community Health Improvement Plans (CHAs/CHIPs) by June 30, 2023.					
Strategy: 1.1.1.1. Provide community health coalition partners with information regarding research-based initiatives that they might choose from to address community identified priorities	No	Yes	07/01/18	06/30/19	Yes
Strategy: 1.1.1.2. Document which programs were adopted and when by community health coalition partners in CHIPs and performance management tracking tool	No	Yes	07/01/18	06/30/19	No
Measure: 1.1.1.1 At least three evidence based programs adopted/implemented by community health coalition partners as documented in the CHIPs	0.00	3.00	07/01/18	06/30/19	0
Goal: 1.2. Promote healthy lifestyles					
Objective: 1.2.1. Decrease tobacco related death and disease rates 2% by June 30, 2023.					
Strategy: 1.2.1.1. Educate and advocate for the adoption of smoke-free ordinances within the LCDHD district, currently 2 jurisdictions	2.00	5.00	07/01/18	06/30/23	2
Strategy: 1.2.1.2. Educate and advocate for the adoption of tobacco-free schools, currently 9 schools are tobacco-free	9.00	12.00	07/01/18	06/30/23	9
Measure: 1.2.1.1 Decrease lung cancer incidence as listed in the health report card from 102 (2015 data) to 101 (1% decrease)	102.00	101.00	07/01/18	06/30/23	102.00
Measure: 1.2.1.2 Decrease death rates as listed in the health report card from 73.8 (2015 data) to 72.8 (1% decrease)	73.80	72.80	07/01/18	06/30/23	73.80
Measure: 1.2.1.3 Decrease adult smoking rates from 24% to 23%, source County Health Rankings, 2018	24.00%	23.00%	07/01/18	06/30/23	24%
Measure: 1.2.1.4 Decrease youth smoking rates (in the past 30-day use) from 14.3 to 13.3%, source: Kentucky Incentives for Prevention (KIP) data	14.30%	13.30%	07/01/18	06/30/23	14.30%

Lake Cumberland District Health Department

Strategic Plan 2018 - 2023 (continued)

Priority Area: 1. Improve Quality of Life (continued)	Measure Baseline	Measure Target	Start Date	Target Date	Progress thru 09/30
Goal: 1.3. Prevent/respond to existing and emerging public health threats					
Objective: 1.3.1. Provide education and information related to emerging or existing public health threats to community partners and LCDHD staff a minimum of two times per year, or as needed when events warrant.					
Strategy: 1.3.1.1. Provide education through traditional and social media	Yes	Yes	07/01/18	06/30/23	Yes
Strategy: 1.3.1.2. Disseminate information provided by Kentucky Department for Public Health (KDPH) to community partners	Yes	Yes	07/01/18	06/30/23	Yes
Strategy: 1.3.1.3. Analyze community health data to identify emerging public health threats	Yes	Yes	07/01/18	06/30/23	Yes
Measure: 1.3.1.1 Number of communications related to public health threats LCDHD has initiated with staff and partners, at least 2 times a year	0	2	07/01/18	06/30/23	0
Objective: 1.3.2. Improve LCDHD's response to public health threats by participating in a minimum of one tabletop or functional exercise per year, beginning in FY 2019					
Strategy: 1.3.2.1. Develop multiyear training and exercise plan (MYTEP) to reflect exercise/drill opportunities.	No	Yes	07/01/18	06/30/23	No
Strategy: 1.3.2.2. Partner with regional healthcare preparedness to schedule/provide public health exercise opportunities	Yes	Yes	07/01/18	06/30/23	Yes
Strategy: 1.3.2.3. Train Epi Rapid Response Team (ERRT) staff in public health response	Yes	Yes	07/01/18	06/30/23	No
Measure: 1.3.2.1 LCDHD will participate in at least one tabletop or functional exercise per year	0.00	1.00	07/01/18	06/30/23	1.00
Objective: 1.3.3. Reduce morbidity and mortality rates related to substance use disorder by 2% across the Lake Cumberland District by January 1, 2023					
Strategy: 1.3.3.1. Implement Syringe Exchange Programs (SEPs) in 2 additional counties, currently have SEPs in 4 counties	4.00	6.00	07/01/18	06/30/23	4.00
Strategy: 1.3.3.2. Provide community education and awareness (presentation/mass media campaign) on opiate use disorder quarterly	Yes	Yes	07/01/18	06/30/23	Yes
Strategy: 1.3.3.3. Provide naloxone to community and first responders at community events	Yes	Yes	07/01/18	06/30/23	Yes
Measure: 1.3.3.1 Decrease substance use disorder hospital admissions (as an indicator of morbidity) as listed in the Kentucky Injury Prevention and Research Center profiles from 3.64 to 3.5 per 1,000	3.64	3.50	07/01/18	06/30/23	3.64
Measure: 1.3.3.2 Decrease substance use related overdose deaths as listed in the Kentucky Injury Prevention and Research Center profiles from 29.45 to 29 per 100,000	29.45	29.00	07/01/18	06/30/23	29.45

Priority Area: 2. Enhance Community Access, Engagement & Collaboration	Measure Baseline	Measure Target	Start Date	Target Date	Progress thru 09/30
Goal: 2.1. Increase awareness of public health services					
Objective: 2.1.1. Increase the public's engagement via media campaigns /communications as measured by the annual increase of social media and website utilization					
Strategy: 2.1.1.1. Update our Health Report Card webpages' information as statistics become available and notify the public through social media posts.	Yes	Yes	07/01/18	06/30/19	Yes
Strategy: 2.1.1.2. Update Data Analysis Committee webpage after each meeting and notify the public of our activities through social media posts	Yes	Yes	07/01/18	06/30/19	Yes
Strategy: 2.1.1.3. Promote on social media various other public health features such as: staff photos on "blue jean and colored shirt" health awareness days, various public health news related events, "52 Weeks of Health" health promotion, staff engaging in various program related activities within their communities, various other health promotion activities, etc.	Yes	Yes	07/01/18	06/30/23	Yes
Measure: 2.1.1.1 Number of Facebook followers	8,899	10,000	07/01/18	06/30/23	9,223
Measure: 2.1.1.2 Number of YouTube followers	44.00	100.00	07/01/18	06/30/23	46.00
Measure: 2.1.1.3 Number of Twitter followers	566.00	600.00	07/01/18	06/30/23	563.00
Measure: 2.1.1.4 Number of Instagram followers	179.00	200.00	07/01/18	06/30/23	191.00
Measure: 2.1.1.5 Monthly traffic to website	9,348	10,000	07/01/18	06/30/23	14,402

Lake Cumberland District Health Department Strategic Plan 2018 - 2023 (continued)

Priority Area: 2. Enhance Community Access, Engagement & Collaboration (continued)	Measure Baseline	Measure Target	Start Date	Target Date	Progress thru 09/30
Goal: 2.2. Strengthen the Local Public Health System through partnership and planning across the Lake Cumberland District					
Objective: 2.2.1. Sustain, rejuvenate and amplify ten health coalitions (local public health system partners) to collect and analyze data in the creation and implementation of ten community health improvement plans by June 30, 2023.					
Strategy: 2.2.1.1. Implement the Mobilizing for Action through Planning and Partnerships (MAPP) tool	No	Yes	07/01/18	06/30/23	Yes
Strategy: 2.2.1.2. Identify and engage partners across Local Public Health System (LPHS) and invite key partners to attend	Yes	Yes	07/01/18	06/30/23	Yes
Measure: 2.2.1.1 75% of coalition members regularly attend meetings as recorded in the coalition attendance tracking tool	50.00%	75.00%	07/01/18	06/30/23	50%
Measure: 2.2.1.2 25% of newly invited key partners will attend the meetings as recorded in the coalition attendance tracking tool	0.00%	25.00%	07/01/18	06/30/23	0%
Objective: 2.2.2. Increase the number of presentations to stakeholders, policy makers and civic groups on up-to-date health information and community health improvement plans by June 30, 2019.					
Strategy: 2.2.2.1. Attending stakeholder, policymaker and civic group meetings to share data/community health improvement plan	Yes	Yes	07/01/18	06/30/23	Yes
Measure: 2.2.2.1 Conduct three presentations per county as documented in the community health plan	0	30	07/01/18	06/30/19	0
Objective: 2.2.3. Provide at least one opportunity for community members to offer feedback regarding our community health improvement plan by June 30, 2019.					
Strategy: 2.2.3.1. Provide a web-based feedback form	No	Yes	07/01/18	06/30/19	No
Strategy: 2.2.3.2. Promote web-based feedback form via social media	No	Yes	07/01/18	06/30/19	No
Measure: 2.2.3.1 Conduct a survey regarding feedback on CHIPs by June 30, 2019.	0	1	07/01/18	06/30/19	0
Goal: 2.3. Increase awareness of public health services and implement new approaches when appropriate based on data analysis.					
Objective: 2.3.1. Increase public awareness of illicit drug related health impacts by June 30, 2023 via the health report card and annual social media promotions					
Strategy: 2.3.1.1. Share morbidity and mortality data with the public via our health report card and social media promotions	No	Yes	07/01/18	06/30/23	Yes
Measure: 2.3.1.1 Add illicit drug related hospital & emergency room (ER) visits to the health report card	No	Yes	07/01/18	06/30/23	Yes
Measure: 2.3.1.2 Add drug overdose mortality data to health report card	No	Yes	07/01/18	06/30/19	No
Measure: 2.3.1.3 Promote health report card annually via social media	No	Yes	07/01/18	06/30/23	Yes
Objective: 2.3.2. Analyze available illicit drug-use hospital and ER visit data via the data analysis committee and recommend educational awareness and interventions annually					
Strategy: 2.3.2.1. Review data at the bi-annual data analysis committee meetings	No	Yes	07/01/18	06/30/23	Yes
Measure: 2.3.2.1 Implement at least one initiative to address illicit drug use health impacts in highest risk counties by June 30, 2023	No	Yes	07/01/18	06/30/23	No
Objective: 2.3.3. Increase number of Harm Reduction Syringe Exchange Programs (SEPs) from 4 to 6 by June 30, 2023.					
Strategy: 2.3.3.1. Educate the public via public forums and media releases	Yes	Yes	07/01/18	06/30/23	Yes
Strategy: 2.3.3.2. Educate law enforcement agencies via face-to-face meetings	Yes	Yes	07/01/18	06/30/23	Yes
Strategy: 2.3.3.3. Educate fiscal courts and city councils	Yes	Yes	07/01/18	06/30/23	Yes
Measure: 2.3.3.1 Increase number of Syringe Exchange Programs from 4 to 6 by June 30, 2023.	4	6	07/01/18	06/30/23	4

Lake Cumberland District Health Department Strategic Plan 2018 - 2023 (continued)

Priority Area: 2. Enhance Community Access, Engagement & Collaboration (continued)	Measure Baseline	Measure Target	Start Date	Target Date	Progress thru 09/30
Goal: 2.4. Increase childhood immunization rates by promoting use of the immunization registry and providing technical assistance for such as needed.					
Objective: 2.4.1. Promote more extensive use of Kentucky Immunization Registry (KYIR) with providers in the LCDHD service area by June 30, 2023.					
Strategy: 2.4.1.1. Educate pharmacies and physician offices on value of immunization registry through correspondence or face-to-face meetings	No	Yes	07/01/18	06/30/23	No
Strategy: 2.4.1.2. Approach Kentucky Health Department Association (KHDA), Kentucky Medical Association (KMA), and Department of Public Health (DPH) on adopting or promoting statewide policy changes regarding increased use of the immunization registry	No	Yes	07/01/18	06/30/23	Yes
Measure: 2.4.1.1 Get information from the Department of Public Health and establish a baseline of entities using the KYIR by June 30, 2019	No	Yes	07/01/18	06/30/19	Yes
Objective: 2.4.2. Assist schools to increase compliance to at least 90% with state immunization requirements by June 30, 2023.					
Strategy: 2.4.2.1. Meet with under performing school health coordinators	No	Yes	07/01/18	06/30/19	Yes
Strategy: 2.4.2.2. Provide immunization information to 6th grade parents to encourage compliance with state immunization requirements	Yes	Yes	07/01/18	06/30/19	Yes
Strategy: 2.4.2.3. Ensure local health departments continue to utilize Vaccines for Children (VFC) and Kentucky Vaccine Program (KVP) to provide childhood vaccinations	Yes	Yes	07/01/18	06/30/23	Yes
Measure: 2.4.2.1 Decrease number of schools with less than 90% compliance with state immunization requirements from 15 to 10.	15.00	10.00	07/01/18	06/30/23	15.00

Priority Area: 3. Foster Employee Engagement, Development and Performance	Measure Baseline	Measure Target	Start Date	Target Date	Progress thru 09/30
Goal: 3.1. Increase staff awareness and collaboration across all programs					
Objective: 3.1.1. Increase general awareness of staff regarding programs by highlighting 12 programs per year beginning Fiscal Year (FY) 2019					
Strategy: 3.1.1.1. Highlight a program monthly via email, website and/or newsletter updates	0.00	12.00	07/01/18	06/30/19	2.00
Strategy: 3.1.1.2. Annually, all county staff are required to attend the Quality Assurance (QA) safety/shut-off training so this will provide an opportunity for any program to review program purpose, activities, and/or share needs with staff	No	Yes	07/01/18	06/30/23	Yes
Strategy: 3.1.1.3. All program directors made aware of annual Quality Assurance (QA) meeting opportunity and allotted time if requested	No	Yes	07/01/18	06/30/19	Yes
Measure: 3.1.1.1 Survey staff via Survey Monkey annually to measure the increase in general program awareness.	1.00%	85.00%	07/01/18	06/30/23	1.00%
Objective: 3.1.2. Improve collaboration across divisions by discussing program needs, as identified at executive staff meeting, with relevant staff					
Strategy: 3.1.2.1. As program needs arise, appropriate groups would meet to discuss strategies / opportunities to educate staff on program needs / requirements	No	Yes	07/01/18	06/30/23	Yes
Strategy: 3.1.2.2. Directors of new programs participate in person or via electronic meeting in annual QA meeting (that all staff are required to attend) and inform staff of program.	No	Yes	07/01/18	06/30/23	No
Measure: 3.1.2.1 Survey Division Directors annually to measure their perceived improvement in cross-program collaboration.	1.00%	85.00%	07/01/18	06/30/19	1.00%

Lake Cumberland District Health Department Strategic Plan 2018 - 2023 (continued)

Priority Area: 3. Foster Employee Engagement, Development and Performance (continued)	Measure Baseline	Measure Target	Start Date	Target Date	Progress thru 09/30
Goal: 3.2. Develop and adopt procedures to protect sensitive personnel information and improve departmental efficiencies.					
Objective: 3.2.1. By June 30, 2023, we will develop a modality to electronically send, receive, and store essential personnel records					
Strategy: 3.2.1.1. Follow with DPH personnel branch to ensure electronic performance evaluations are approved	No	Yes	07/01/18	06/30/19	Yes
Strategy: 3.2.1.2. Develop a secure process allowing all employees to electronically sign documents	15.00%	100.00%	07/01/18	06/30/19	15.00%
Strategy: 3.2.1.3. Develop a secure fillable electronic performance evaluation form	No	Yes	07/01/18	06/30/19	No
Strategy: 3.2.1.4. Work with IT to develop a secure process and method to electronically send, receive, and store personnel forms/records.	No	Yes	07/01/18	06/30/23	No
Measure: 3.2.1.1 All performance evaluations will be submitted by due date.	90.00%	100.00%	07/01/18	06/30/23	90.00%
Measure: 3.2.1.2 100% of performance evaluation forms will be sent using new system.	1.00%	100.00%	07/01/18	06/30/23	25.00%
Objective: 3.2.2. By 2023, all job descriptions for applicable employees will be updated at least every three years					
Strategy: 3.2.2.1. Update modality for ensuring job descriptions are updated at least every three years to reflect expectations for current tasks.	No	Yes	07/01/18	06/30/23	No
Measure: 3.2.2.1 95% or more job descriptions will have been reviewed and updated to reflect current tasks expectations within the past three years	50.00%	95.00%	07/01/18	06/30/23	50.00%
Goal: 3.3. Recruit and assure a competent workforce by providing training opportunities that develop core public health competencies					
Objective: 3.3.1. Review and revise the professional development section of the WFDP to include ad-hoc staff development opportunities to ensure staff are appropriately trained to deal with emerging health issues by July 31, 2023.					
Strategy: 3.3.1.1. At divisional staff meetings, program directors will discuss and identify agency/staff professional development needs/wants and make recommendations on agency-wide, program and individual needs.	No	Yes	07/01/18	06/30/23	No
Strategy: 3.3.1.2. Division directors will provide opportunities for necessary trainings as appropriate	No	Yes	07/01/18	06/30/23	No
Measure: 3.3.1.1 Compliance will be measured monthly (with each division discussing at a meeting at least annually) via the Performance Management (PM) tracking tool.	1.00%	100.00%	07/01/18	06/30/19	1.00%
Objective: 3.3.2. By June 30, 2023, revise recruitment process to entice qualified and quality applicants.					
Strategy: 3.3.2.1. Work with new DPH personnel branch manager to implement improved recruitment strategies.	No	Yes	07/01/18	06/30/23	Yes
Strategy: 3.3.2.2. Update recruitment ads wording to entice more qualified applicants	No	Yes	07/01/18	06/30/19	No
Strategy: 3.3.2.3. Analyze current online job recruitment tools to identify best platforms to post jobs to recruit qualified individuals	No	Yes	07/01/18	06/30/23	Yes
Strategy: 3.3.2.4. Update job interview questions to help us better identify quality candidates	No	Yes	07/01/18	06/30/19	No
Measure: 3.3.2.1 Each job vacancy that is advertised outside the agency will have at least three qualified applicants.	1.00	1.00	07/01/18	06/30/23	1.00

Lake Cumberland District Health Department Strategic Plan 2018 - 2023 (continued)

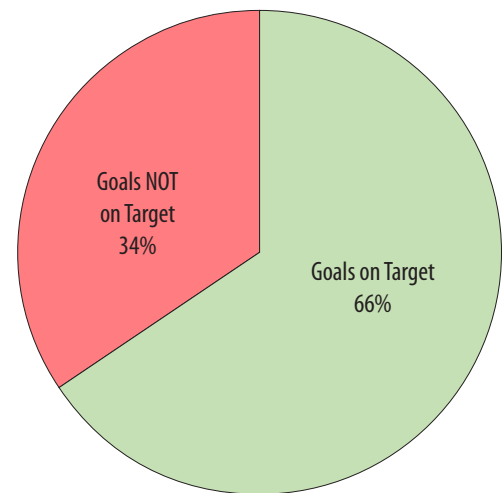
Priority Area: 4. Efficacy of Business Practices through Innovation, Process Improvement and Maximizing Efficiencies	Measure Baseline	Measure Target	Start Date	Target Date	Progress thru 09/30
Goal: 4.1. Adjust the Agency to New Financial Realities					
Objective: 4.1.1. If advantageous, consider relinquishing various underfunded clinic programs to other community partners and adjust staff compliment accordingly by June 30, 2023.					
Strategy: 4.1.1.1. Should it become necessary to pursue this objective (off-loading various under-funded programs), secure Governing Board Approval to pursue this strategy.	No	Yes	07/01/18	06/30/20	Yes
Strategy: 4.1.1.2. Identify other community partners that can provide our clinic services	No	Yes	07/01/18	06/30/20	Yes
Strategy: 4.1.1.3. Continue work with DPH Commissioner's Public Health Redesign workgroup to determine which programs are most feasible to relinquish, should it become necessary to pursue this objective.	Yes	Yes	07/01/18	06/30/20	Yes
Strategy: 4.1.1.4. Utilize attrition and staff re-assignment prior to implementing a Workforce Reduction Plan	No	Yes	07/01/18	06/30/20	Yes
Measure: 4.1.1.1 Clinic programs will improve self-sufficiency from requiring 60% of the agency's total local tax funds to 30%	60.00%	30.00%	07/01/18	06/30/20	60.00%
Objective: 4.1.2. Implement/enhance three technologies to streamline existing practices/processes by June 30, 2023.					
Strategy: 4.1.2.1. Explore options to improve processes and services (for example: utilizing video-conferencing for Medical Nutrition Therapy, Directly Observed Therapy, training, coalition meeting, supervision, etc.)	No	Yes	07/01/18	06/30/23	No
Strategy: 4.1.2.2. Follow Kentucky Health Department Association's (KHDA) Best Practice Committee and the DPH Commissioner's Public Health Redesign Workgroup findings and recommendations and adopt when appropriate.	No	Yes	07/01/18	06/30/23	Yes
Strategy: 4.1.2.3. Enhance communication log utilization to include query abilities, link or upload supporting documenting to include the final product.	No	Yes	07/01/18	06/30/23	No
Measure: 4.1.2.1 Implement/enhance at least three streamlined processes by June 30, 2023 as reported in the executive team meeting	0.00	3.00	07/01/18	06/30/23	0.00
Goal: 4.2. Seek Opportunities to Enhance Capacity					
Objective: 4.2.1. Explore utilizing alternative staffing arrangements other than merit positions by FY 2020.					
Strategy: 4.2.1.1. Secure Governing Board Approval to pursue this strategy (alternative staffing).	No	Yes	07/01/18	06/30/19	Yes
Strategy: 4.2.1.2. Meet with staffing agencies to better understand their services and utilize their services, if appropriate.	No	Yes	07/01/18	06/30/19	Yes
Strategy: 4.2.1.3. Seek KDPH approval of the staffing agency contract model	No	Yes	07/01/18	06/30/19	Yes
Strategy: 4.2.1.4. Discuss with other health departments and the KDPH the strategy of contracting with HANDS employees to be reimbursed a per diem per service and adapt this model, if appropriate.	No	Yes	07/01/18	06/30/19	No
Measure: 4.2.1.1 18% of staff will be transitioned to these alternate models, if it is determined this is advantageous.	No	Yes	07/01/18	06/30/23	No
Objective: 4.2.2. Provide written agreements with community agencies to enhance and provide access to services beginning FY 2019 and ending in FY 2023.					
Strategy: 4.2.2.1. Establish at least 10 closed Point of Dispensing (POD) partnerships by FY 2021 as evidenced by written agreements	0.00	10.00	07/01/18	06/30/21	0.00
Strategy: 4.2.2.2. Make space available for utilization by other members of the public health system when excess facility capacity exists	No	Yes	07/01/18	06/30/23	No
Strategy: 4.2.2.3. Create opportunities to partner with community agencies to provide public health services that may no longer be provided by the local health department	No	Yes	07/01/18	06/30/23	No
Measure: 4.2.2.1 # of written agreements in effect	0.00	75.00	07/01/18	06/30/23	0.00
Objective: 4.2.3. Aggressively seek out and apply for grant opportunities to help finance existing programs and fund work on issues as identified in our CHIP, Strategic Plan and Data Analysis Committee on an ongoing basis.					
Strategy: 4.2.3.1. Review grant opportunities via popular grant promotion websites and apply for such, when appropriate.	Yes	Yes	07/01/18	06/30/23	Yes
Strategy: 4.2.3.2. Work with KHDA to pilot test their being a 501(c)(3) partner with us on grants which require said designation.	No	Yes	07/01/18	06/30/19	No
Measure: 4.2.3.1 The submission of at least seven grant applications annually as recorded in the grant managements database.	0.00	7.00	07/01/18	06/30/23	14

Lake Cumberland District Health Department Strategic Plan 2018 - 2023 (continued)

Priority Area: 4. Efficacy of Business Practices through Innovation, Process Improvement and Maximizing Efficiencies (continued)	Measure Baseline	Measure Target	Start Date	Target Date	Progress thru 09/30
Goal: 4.3. Effectively use QI Plan/Tools to improve processes, programs and interventions.					
Objective: 4.3.1. LCDHD will engage in at least three Quality Improvement (QI) Projects per year, beginning FY 2019. With two focused on programmatic/community improvement; and one focused on internal agency improvement.					
Strategy: 4.3.1.1. Discuss potential QI Projects during the Executive/Quality Improvement Committee Meetings.	Yes	Yes	07/01/18	06/30/23	Yes
Strategy: 4.3.1.2. Evaluate employee suggestions to determine if they would be appropriate for a QI Project.	No	Yes	07/01/18	06/30/23	Yes
Strategy: 4.3.1.3. Encourage Board Members to make suggestions for improvement via the monthly Board Survey included on their meeting agenda.	Yes	Yes	07/01/18	06/30/23	Yes
Strategy: 4.3.1.4. Use results from Community Health Assessments and Data Analysis Committee work to drive potential QI Projects.	Yes	Yes	07/01/18	06/30/23	Yes
Strategy: 4.3.1.5. Review our staff and board SWOT analysis results to evaluate potential QI Project opportunities.	No	Yes	07/01/18	06/30/23	No
Strategy: 4.3.1.6. Review our Public Health Accreditation Board (PHAB) Action Plan and Annual Reports response to evaluate potential QI Project opportunities.	Yes	Yes	07/01/18	06/30/19	Yes
Strategy: 4.3.1.7. Monitor performance management database and other tracking tools to identify trends to continually identify opportunities for improvement/QI project development.	No	Yes	07/01/18	06/30/23	Yes
Measure: 4.3.1.1 Initiate at least three QI projects annually.	0	3	07/01/18	06/30/23	1

Lake Cumberland District Health Department Strategic Plan Progress

Accreditation also led us to develop and maintain a current agency-wide Strategic Plan, which defines what we plan to achieve over the next five years and provides clear direction for accomplishing these goals. The entire plan is reviewed annually and rewritten every five years because our organization must be able to adapt to the ever changing environment and needs of the organization and our communities. The goals set forth in this plan also need to be monitored for progress and outcomes, this can be evidenced by the table above, which is the first quarterly report for the LCDHD Strategic Plan 2018-2023. As quarterly reports are completed over the next five years, the dashboard to the right will help visualize our overall progress toward these goals.



- ON TARGET
to achieve goal within specified time frame
- NOT ON TARGET
to achieve goal within specified time frame



Carol Huckleby, GPC
Human Resources
Manager

Human Resources

This year has been a year of change in the HR office and our agency. Two long-standing fixtures of the HR office, Pamela Godby and Wilma Munsey, retired. In addition to these, we said goodbye to 26 other valued members of our family and welcomed 16 new full-time staff members. LCDHD currently employees 149 full-time staff.

The HR Office is working on our updated Workforce Development Plan and Strategic Plans which includes finding new ways to attract quality applicants, identifying and providing professional development opportunities for our current staff to ensure a well-trained and competent work force, and streamlining our department to improve efficiency.

HR has been very successful in our recruitment efforts since we increased the starting salary for new nurses and began using web-based platforms such as Indeed.com and Facebook to recruit qualified applicants.

Another exciting development is our partnership with Go-Hire Employment and Development. Barring any unforeseen issues, it is our plan to begin hiring all new staff through

GoHire. This partnership allows us to streamline our hiring process and continue to attract quality staff.

We just compiled the 2018 Exit Interview Survey Results and it is confirmed, LCDHD is a great place to work! 100% of employees going off-duty during 2018, who returned their survey, were satisfied with their employment and 96% strongly agreed / agreed that they received the training necessary to be successful in their job. Of those completing the survey, 47% were retiring and 46% had worked at LCDHD for 21 years or more.

As always, the HR office continues to oversee:

- Recruitment and orientation of new staff
- Employee performance evaluations
- Employee benefits such as insurance and retirement
- FMLA
- Other personnel actions with the Local Health Merit System

There's a lot of exciting things happening in the agency. The HR department looks forward to the opportunity to better serve our staff!

2018 EMPLOYEES

ADAIR COUNTY

Akin, Rhonda G.
Hale, Pamela J.
Harlow, Jelaine T.
Lawhorn, Marsha C.
Matthews, Shannon M.
Melson, Cynthia G.
Patterson, Corey L.
Smith, Melody A.
Walker, Julia B.
York, Nita J.

Nurse Supv 1
FSW 3
H Educator 3
SSSupv 1
SSSA 2
SSSA 2
H Envir 3
LHN 2
LHN 4/Team Ldr
SSSA 2

CASEY COUNTY

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

Nurs Prog Mgr
Nurse Supv 1
PH HANDS Spec
SSSA 2
SSSupv 1
H Envir 2
Nutrition Serv Supv
LHN 2 F
PH HANDS Spec



CLINTON COUNTY

Albertson, Vicky L.
Arterburn, Jessica A.
Brown, Jennifer C.
Crabtree, Samantha G.
Flowers, Wanda P.
Fryman, Etta G.
McGinnis, Danielle N.
Parrish, Donna J.
Thrasher, Christy J.

LHN 2
LHN 4/Team Ldr
PH HANDS Spec
LHN1
SSSA 2
SSSupv 1
PH HANDS Spec
Nurse Supv 1
SSSA 2

CUMBERLAND COUNTY

Capps, Heather R.
Coe, Raykesha N.
England, Amanda J.
Gibson, Sherri L.
Nettles, Cindy J.
Patterson, Chasity N.

LHN 2
SSSA 2
Sr. Epidemiologist
Nurse Supv 1
SSSupv 1
H Envir 3

2018 EMPLOYEES (continued)

DISTRICT

Anderson, Lisa G.	Adm Sec
Baker, John T.	Acct Clerk 3
Baker, Rebecca L.	Nurs Prog Mgr
Cimala, Ronald	Dir Adm Ser
Collins, Christopher R.	Tech Speclst 2
Cook, William L.	Janitor
Crabtree, Shawn D.	PH Dir 4
Cross, DeAnn S.	Adm Sec
Hamm, Priscilla J.	PH Serv Coord
Harris, Lisa A.	Acct Clerk 3
Haynes, Cristy L.	Acct Clerk 3
Huckelby, Carol A.	Human Res Mgr
Jasper, Leah A.	Dir Adm Ser
Kindle, Linda D.	Acct Clerk 3
Ramsey, Brian K.	Net Sys Spec
Silvers, Mary J.	Acct Clerk 3
Simpson, Angela L.	Admin Serv Mgr
Smith, Melinda J.	Tech Speclst I
Sneed, Robyn L.	Acct Clerk 3
Tomlinson, Amy C.	PH Preprdnes Mgr
Wesley, Michelle L.	Adm Sec
Weyman, Christine	Med Dir
Williams, Melonie	PH Prog Specialist
Young, Roger A.	Maintenance Per

GREEN COUNTY

Burriss, Brian H.	Maint Supv
Bush, Kaylene W.	Nurse Supv 1
Davis, Lori R.	LHN 2
Durrett, Stella A.	SSSupv 1
Hodges, Jaclyn E.	H Educator 3
Taylor, Sue A.	SSSA 2

McCREARY COUNTY

Garner, Melissa K.	SSSA 2
Jones, Whitney E.	LHN 4/Team Ldr
King, Tammy J.	FSW 2
Lawson, Melissa G.	FSW 2
Miller, Mary E.	Nurse Supv 1
Phillips, Cynthia A.	LHN 2
Sexton, Samantha J.	H Educator 1
Simpson, Jarrod W.	H Envir 3
Skeens, Jacqueline F.	LHN 2
Tucker, Kimberly A.	SSSupv 1
Long, Betty S.	Janitor
Watson, Vannessa M.	LHN1
Watters, Tara D	LHN1
Whitehead, Terri N.	FSW 1

PULASKI COUNTY

Adams, Susan J.	PH Serv Coord
Barber, Kathy J.	FSW 3
Bender, Brigette E.	SSSupv 2
Burton, Patricia L.	H Educator 3
Catron, Tammy E.	SSSA 2
Denney, Monica D.	SSSA 2
Eaton, Marilyn L.	Sr Clncl Asst

PULASKI COUNTY (continued)

Gregory, Dorthy	SSSA 2
Hall, Hannah N.	LHN1
Hall, Karen S.	LHN 2
Hall, Thomas J.	SSSA 2
Hamilton, Jeremy S.	H Envir 3
Harris, Jennifer Kay	APRN
Hickman, IV Jefferson	Env Hlth Prog Mgr
Jenkins, Tamara L.	Lab Tech
Livesay, Vickie F.	SSSA 1
Mayberry, Deborah E.	PH HANDS Spec
McKnight, Belinda K.	SSSA 3-Env
Merrick, Sabrina L.	LHN Specialist
Morris, Wilda C.	PH HANDS Spec
Osborne, Deana S.	SSSA 2
Poland, Christy M.	FSW 1
Pollitt, Shawnda D.	SSSA 2
Poynter, Ashley M.	FSW 1
Poynter, Peggy L.	Adm Sec
Price Jr., Ferlin S.	H Envir 3
Rice, Regina L.	LHN 4/Team Ldr
Spillman, Michael S.	Env Hlth Dir
Trull, Norma J.	Nurse Supv 1
Tuggle, April D.	FSW 3
Wash, Mary K.	H Educator 1
Wells, Melissa A.	LHN 2
West, Brian D.	Janitor
Riley, Martha J.	Janitor
Ridner, Amanda C.	LHN1

RUSSELL COUNTY

Aaron, Tracy	H. Ed Director
Brockman, Beverly A.	Nurse Supv 1
Collins, Arlena BethAnn	PH HANDS Spec
Cummings, Candi L.	SSSA 2
Dial, Brenda S.	LHN 4/Team Ldr
Dye, Jonathan P.	H Envir 3
McGowan, Michael D.	Maint Technician
Heathman, Judy C.	LHN 2
Jones, Jane C.	SSSupv 1
Kean, Bridgett M.	LHN 2
Keen, Donna E.	LHN 2
Lee, Jamie L.	Nurse Adminis
Mann-Polston, Connie M.	PH HANDS Spec
Roberson-Daulton, Shirley A.	H Educator 3
Tucker, Bonnie L.	SSSA 2
Whitis, Sonya L.	LHN 2
Woodrum, Laura E.	Dir of Nursing

TAYLOR COUNTY

Arnold, Connie M.	LHN 4/Team Ldr
Cowherd, Janet F	LHN 2
Day, Ashley D.	LHN1
Ford, Ricky L.	Janitor
Franklin, Anita L.	LHN 2
Green, Timothy D.	H Envir 3
Griffiths, Allison S.	SSSupv 1
Harrison, Megan R.	Nurse Supv 1
Lewis, Savannah L.	PH HANDS Spec
Pickett, Tammy G.	FSW 3
Whitfill, Dawn P.	LHN 2
Wright, Tracy D.	SSSA 2

2018 EMPLOYEES (continued)

WAYNE COUNTY

Atkinson, Rebecca R.	FSW 3
Beaty, Shannon G.	H Educator 1
Daniels, Shirley D.	SSSA 2
Wesley, Sharon S.	LPN 2 VH
Doss, Freda L.	LHN1
East, Charlotte K.	SSSupv 1

WAYNE COUNTY (continued)

Ferrell, Sylvia E.
 Gregory, Lisa W.
 New, Tishanna M.
 Parmley, Kristy L.
 Prater, Sabrina R
 Ramsey, Mary F.
 Redman, Laura D.
 Rose, Harley J.
 Spears, Lora B.
 Tucker, Anna Janae
 Turner, Lori C.

Nurse Adminis
 LHN 2 VH
 PH Prog Specialist
 Social Worker
 LHN 4/Team Ldr
 PH HANDS Spec
 LHN 2
 FSW 1
 H Envir 3
 Nurs Prog Mgr
 Nurse Supv 1

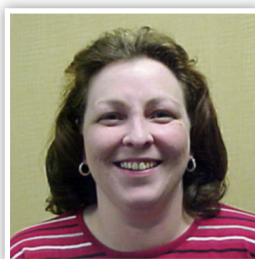
2018 RETIREES



Pamela Acey
 Nutrition Services Supv
District
 12/06/1993 to 07/31/18



Francis Bender
 Nurse Supervisor
Taylor County
 02/08/1988 to 05/31/2018



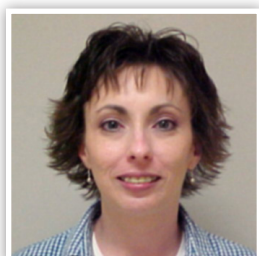
Melinda Copenhaver
 Admin Services Mgr
District
 03/25/1985 to 08/31/2018



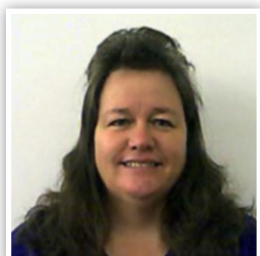
Joan Crist
 Accounting Supervisor
District
 08/30/1993 to 05/31/2018



Peggy Dancy
 Nurse Supervisor 2
Pulaski County
 03/09/1987 to 02/28/2018



Angela Dye
 Support Services Supv
Adair County
 07/22/1991 to 04/30/2018



Donna Farrington
 PH HANDS Specialist
McCreary County
 03/20/2000 to 05/31/2018



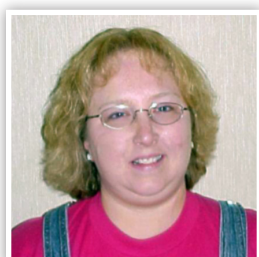
Pamela Godby
 Human Resources Mgr
District
 00/00/0000 to 08/31/2018



Leah Jasper
 Director Admin Services
District
 03/21/1988 to 10/31/2018



Sandra L. Jones
 Sr Support Services Supv
Wayne County
 08/21/1989 to 12/29/2017



Gwendolyn Keith
 Lab Tech
McCreary County
 02/17/1992 to 02/28/2018



Lois Matthews
 Sr Support Services Assoc
McCreary County
 11/11/2002 to 12/29/2017



Janet Milby
 Sr Support Services Assoc
Taylor County
 07/01/1996 to 05/31/2018



Wilma Munsey
 HR Assistant
District
 05/26/2003 to 02/28/2018



Joyce Murphy
 LPN 2
Taylor County
 05/05/2008 to 05/31/2018

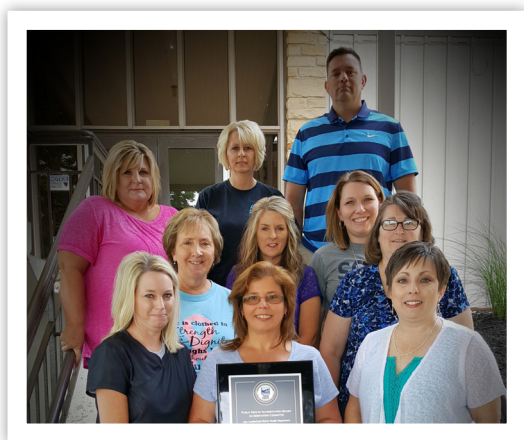


Lake Cumberland District Health Department

500 Bourne Avenue Somerset, KY 42501

(606) 678-4761 • (606) 678-2708 (fax)

1-800-928-4416



Adair County Health Center

801 Westlake Drive, Columbia, KY 42728

(270) 384-2286 • (270) 384-4800 (fax)



Casey County Health Center

199 Adams Street, Liberty, KY 42539

(606) 787-6911 • (606) 787-2507 (fax)



Clinton County Health Center

131 Foothills Avenue, Albany, KY 42602

(606) 387-5711 • (606) 387-7212 (fax)



Cumberland County Health Center

226 Copper Lane, Burkesville, KY 42717

(270) 864-2206 • (270) 864-1232 (fax)



Green County Health Center

220 Industrial Park, Greensburg, KY 42743
(270) 932-4341 • (270) 932-6016 (fax)



McCreary County Health Center

119 Medical Lane, Whitley City, KY 42653
(606) 376-2412 • (606) 376-3815 (fax)



Pulaski County Health Center

45 Roberts Street, Somerset, KY 42501
(606) 679-4416 • (606) 679-4419 (fax)



Russell County Health Center

211 Fruit of the Loom Drive, Jamestown, KY 42629
(270) 343-2181 • (270) 343-2183 (fax)



Taylor County Health Center

1880 N. Bypass Road, Campbellsville, KY 42718
(270) 465-4191 • (270) 789-3873 (fax)



Wayne County Health Center

39 Jim Hill Service Road, Monticello, KY 42633
(606) 348-9349 • (606) 348-7464 (fax)



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