

COMMUNITY HEALTH
ASSESSMENT

LAUREL COUNTY

2023



Laurel County
Health in Motion
Coalition

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EXECUTIVE SUMMARY

2022-2023

Introduction

The Laurel County Health in Motion Coalition conducts a community health assessment every 3 years.

Goal

The goal of the assessment is to provide a comprehensive health profile of Laurel Co. utilizing data obtained through discussion with community partners, a community survey, and review of available local, state and national data.

Objectives

1. Identify community health needs
2. Determine priority health needs
3. Develop a community health improvement plan (CHIP)
4. Integrate CHIP priorities into the strategic plan of local agencies

Data Collection

The data collection process encompasses several elements including:

- Demographic Data
- Key Data Indicators
- Community Survey Data
- Forces of Change Brainstorming
- Focus Groups

Data Review and Priority Determination

The data was collected between May – December 2022. After collection of the data the coalition participated in a review session and determined priority areas for 2023 CHIP.

ABOUT THE COALITION

WHO WE ARE

The Laurel County Health in Motion Coalition was organized in October of 2011, and officially named in April of 2015. The coalition was established through a partnership between Laurel County Health Department and Saint Joseph London.



Laurel County
Health in Motion
Coalition

MISSION

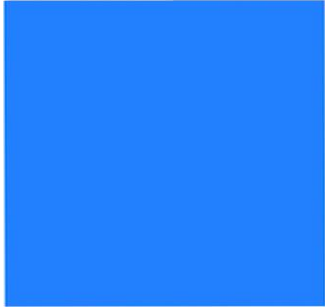
To engage community members in community health assessment to identify health problems and prioritize strategies to impact and improve health, develop and implement health programs, & evaluate progress toward health improvement.

VISION

A healthier community that promotes participation of community partners and its residents who engage in willful cooperation aimed at improving the safety, access to resources, health, well-being, and knowledge of the community.

Visit: <https://www.laurelcohealthdept.org/himc> for more information about the coalition.

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LOCATION

Laurel Co. is located in Southeastern, Kentucky and the county seat is the City of London.

HISTORY

Laurel County was the 80th county to be organized in Kentucky in 1825 with the county government being established in March 1826. The city of London was established as the county seat when father and son John and Jarvis Jackson gifted 25 acres of land to start the town with stipulations. The northern part of Laurel County was the location of the Battle of Camp Wildcat, a battle fought during the American Civil War in 1861. In the late 1800's Laurel County was home to the largest foreign colonization in Kentucky when approximately 120 Swiss families settled in the county. The county is also home to the first Kentucky Fried Chicken which originated when Colonel Harland Sanders began selling fried chicken from his roadside restaurant in Corbin, KY during the Great Depression. Due to its history, Laurel Co. holds the World Chicken Festival annually, drawing crowds of more than 100k people over the span of 4 days. For more details on the history of Laurel County, please visit <https://laurelcokyhistorymuseum.org/>.

About

LAUREL CO.

Using a MAPP Framework

The coalition uses the MAPP Framework to conduct our community health assessment and community improvement plan. MAPP is a community-driven planning process for improving community health.

METHODS

- 01** **Community Status Assessment**
Answers the question, "how healthy are our residents" using secondary data from reliable sources.
- 02** **Community Themes and Strength Assessment**
Assesses current needs using residents' perspectives through community surveys and/or focus groups.
- 03** **Local Public Health System Assessment**
Assesses how well the local public health system is performing the 10 Essential Public Health Services within the community.
- 04** **Forces of Change Assessment**
Focuses on forces of influence such as legislation that impact the way in which the community operates.

Social Determinants of Health

SDOH are the conditions in which people live, learn, play, work, worship, and age. These conditions directly impact health risks, quality of life, and health outcomes.



Economic Stability

- Employment
- Food Insecurity
- Housing Instability
- Poverty



Education

- Early Childhood Education/Development
- Enrollment in Higher Education
- High School Graduation
- Language and Literacy



Health and Health Care

- Access to Health Care
- Access to Primary Care
- Health Literacy
- Health Equity



Neighborhood and Built Environment

- Access to Foods that Support Healthy Eating Patterns
- Crime and Violence
- Environmental Conditions
- Quality of Housing



Social and Community Context

- Civic Participation
- Discrimination
- Incarceration
- Social Cohesion
- Out-of-home child placement



Assessment Findings

1. Community Status Assessment

- a. **Demographic data (pg. 9-10)** for Laurel County indicates economic stability as an inequity. Median household income about \$9,000 less than that of the state of Kentucky and 16.5% of the total population, including 32% of children are living in poverty. Additionally, about 16% of the population do not have a high school diploma or equivalent.
- b. **Health Outcomes (pg. 11-13)** data for Laurel County residents reflect a high number of physically unhealthy days, as well as mentally unhealthy days. Heart disease and cancer are the top two causes of death for Laurel County residents. In relation, when compared to state rates, Laurel County's rates of obesity and diabetes are 6% and 4% higher than Kentucky rates, respectively. Also concerning is the high number of infant deaths within Laurel County. Infant deaths have been trending upward over the past 5-6 years.
- c. **Health Factors (pg. 14)** data for Laurel County show higher rates of obesity and physical inactivity, which correlate with the top two causes of death, previously noted. In addition, Laurel County's high rates of teen pregnancy may affect the higher number of infant deaths occurring over the past several years.
- d. **Access to care and resources (pg. 15-16)** are of concern, with the availability of primary care, mental health providers, and dentists much lower than that of the state. In addition, rates of screenings and vaccinations are lower. A higher number of Laurel Countians report lacking the ability to access food, especially healthy food options. There are two major hospitals that serve Laurel County, one within city limits and the other just across the county border in neighboring Whitley County. Laurel Countians also have access to twelve different behavioral/mental health centers. However, these hospitals and centers serve not only Laurel County, but also surrounding counties including Whitley, Knox, Clay, Jackson, and Rockcastle.

A. DEMOGRAPHIC DATA

Population Data

4.5M

Kentuckians

62,562

Residents of Laurel County

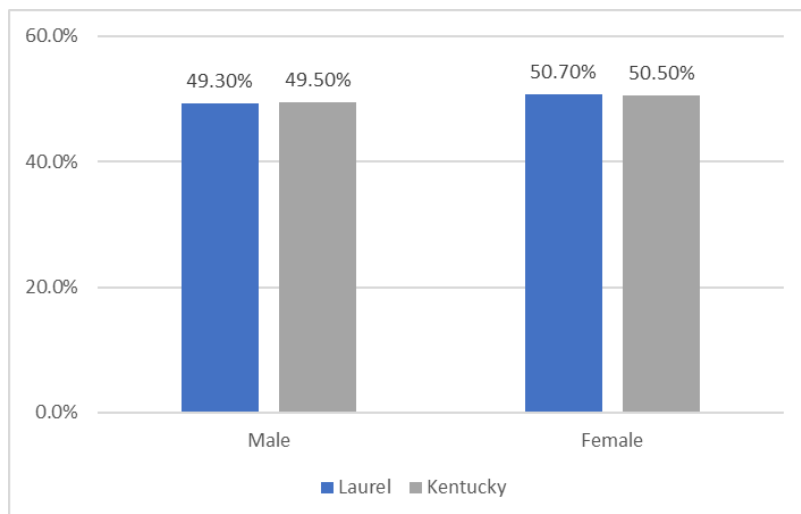
96.8%

**of Laurel
Co. residents
are White,
alone.**

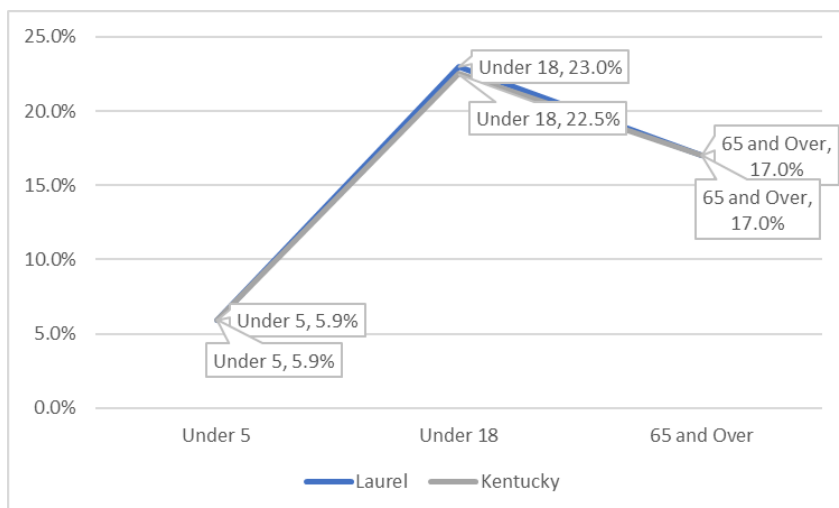
1.6% of the population speak a language other than English at home

Spanish	0.7%
Indo-European Languages	0.5%
Asian and Pacific Island Languages	0.5%

GENDER

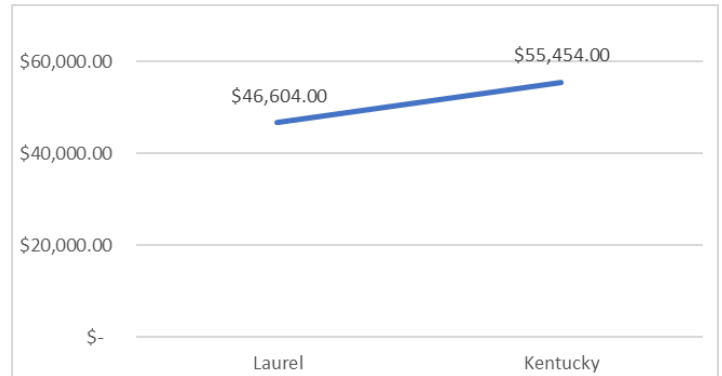


AGE



INCOME

The median household income for Laurel Co. (\$46,604) was lower than that of the state average (\$55,454).



EDUCATION



High school or Higher

84%

Bachelor's or Higher

15.4%

Educational attainment rates are lower in Laurel County compared to the rest of the state. Statistics for Kentucky are 87.7% and 25.7%, respectively.

POVERTY

As of June 2021, it is estimated that approximately 16.5% of Kentuckians are living in poverty compared to 19.5% of Laurel County residents.

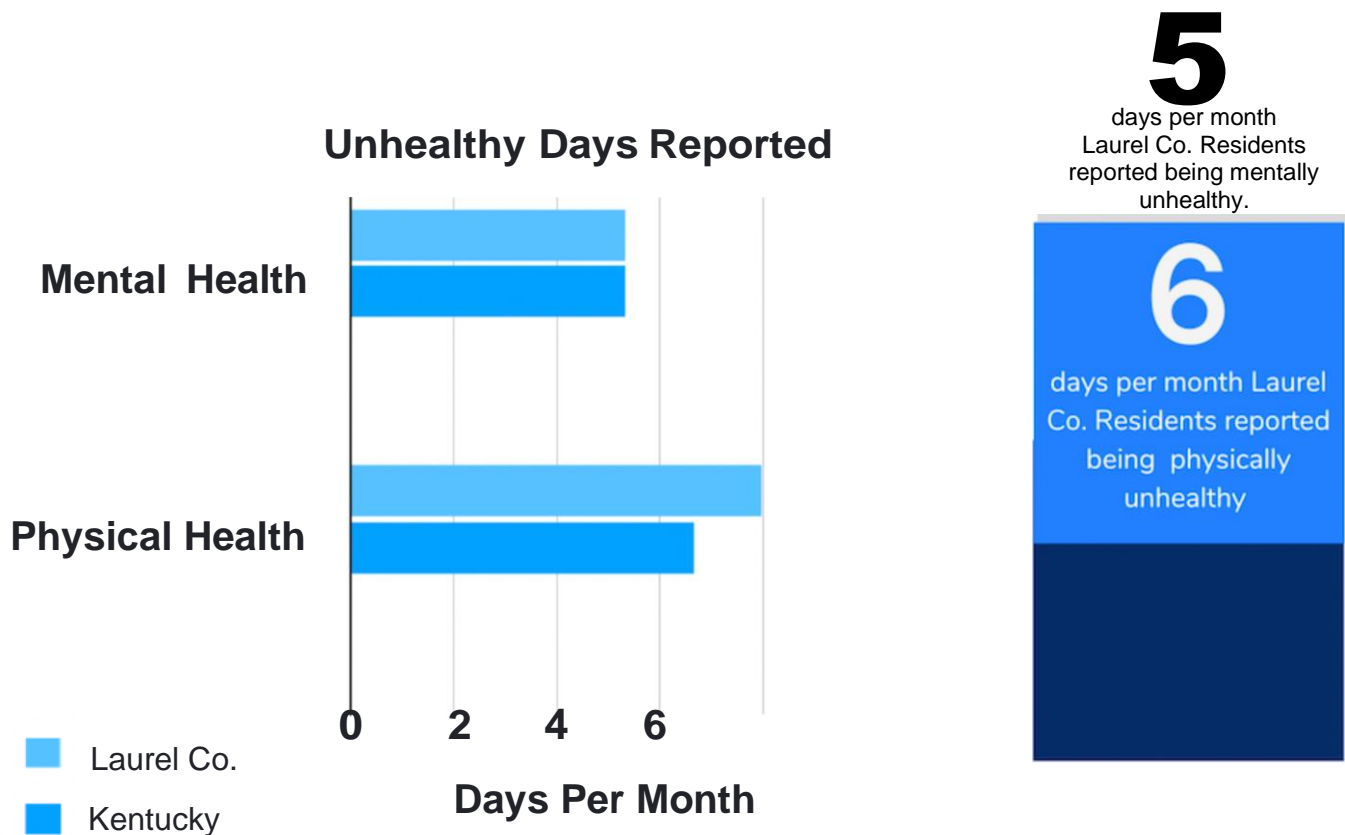
16.5%

19.5%



B. Health Outcomes

Health outcomes inform us how healthy our county is. These outcomes can help in determining morbidity and mortality. Morbidity rates provide us with the prevalence or amount of disease in our community. Mortality rates provide us with the number of deaths from a disease in our community.



The 2022 County Health Rankings rank Laurel County at 61 out of 120 counties overall in Kentucky health. Laurel Co is ranked in the lower middle range of counties in Kentucky (Lower 25%-50%) for both Health Outcomes and Health Factors.

Mortality Rates in Laurel County

Mortality rates provide the frequency of the cause of death.

The **Leading Causes of Death** in those under age 75 in Laurel County are in the chart below.

Cause of Death	Laurel County
Diseases of the heart	286
Malignant Neoplasms	277
Accidents	105
Chronic lower respiratory diseases	98
Chronic liver disease and cirrhosis	38

Other mortality rates

Cause of Death	Laurel County	Kentucky
Infant Mortality (per 1,000 live births)	8	6
Child Mortality (per 100,000)	50	50

22%



Of mortalities in Laurel County occur from Impaired driving

18 (per 100,000 population)

mortalities in Laurel County occur from firearm fatalities every year.

21 (per 100,000 population)

mortalities in Laurel County each year are a result of drug poisoning.

10,200

Years of life were lost to deaths of Laurel Countians under the age of 75, per 100,000 people

Disease Prevalence

How does Laurel County compare to the rest of the state?

Disease prevalence as described below, is often higher in Laurel County compared to that of the state average. Therefore, efforts must be made to improve the disproportional rate of disease impacting our community.

01. Obesity

40% of Laurel County's residents are considered obese compared to **34%** in Kentucky.

02. Hypertension

37% of Laurel County residents have hypertension, this number is lower than the prevalence for Kentucky which is **40%**.

03. Diabetes

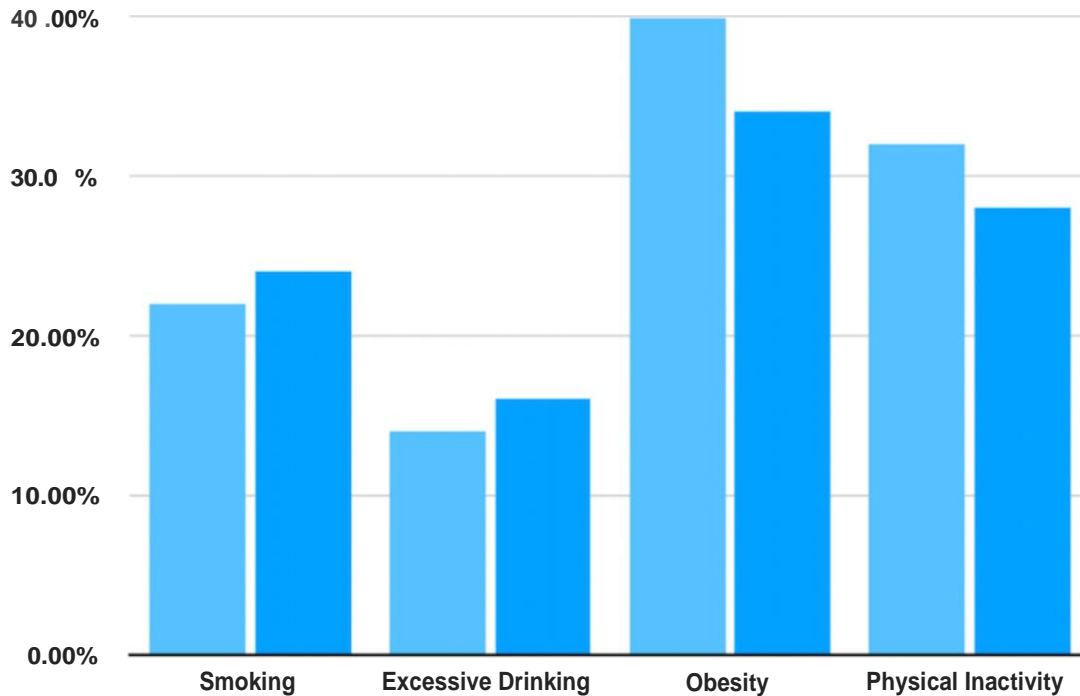
17% of Laurel County residents have diabetes compared to **13%** of Kentuckians.

04. Asthma

Statistics for asthma for both Laurel County and Kentucky are the same, at **16%**.

C. Health Factors

Health factors tell us what influences health across our community and include things such as: health behaviors, access to care, social and economic factors, and environmental factors.



Health Behavior Indicators

- Laurel Co.
- Kentucky

Teen Births

In Laurel County, Kentucky, there were **41** teen births per 1,000 females ages 15-19, significantly higher than the Kentucky rate at **29**.

D. Access to Care



1 Access to Care

Primary care physician ratio was significantly lower in Laurel Co. compared to the rest of the state. Ratios were **2,530:1** and **1,540:1**.¹ Mammography screening rates for Laurel County were **35%** compared to **41%** for Kentucky. Flu vaccine rates were also lower for Laurel County **36%** compared to Kentucky at **46%**.



2 Access to Resources

17% of residents reported lacking adequate access to foods which was slightly higher than **14%** reported among Kentuckians. When looking at access to healthy foods, **11%** lacked access compared to **6%** among Kentuckians.¹



3 Social and Environmental Factors

The unemployment rate for Laurel Co. was **6.1%** compared to **5.0%** statewide. Children living in poverty was **32%** and **24%** respectively

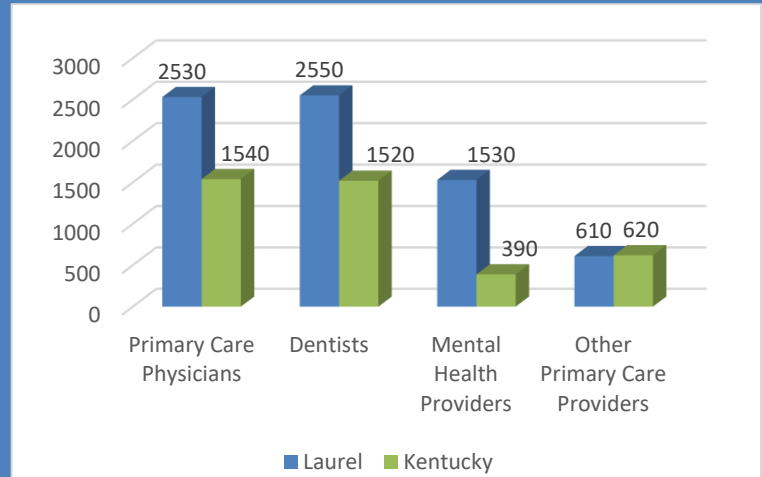
Healthcare Availability

Hospitals

	Capacity	Inpatient Days	Emergency Dept Encounters
Saint Joseph London	150 beds	31,716	27,555
Baptist Health Corbin	273 beds	46,426	33,036

**Baptist Health Corbin is not located in Laurel Co.; however, it is less than 5 miles away from the southern border of the county and is the largest hospital in the region that serves Laurel Co. residents.*

Population for Every 1 Provider



Other Agencies

Home Health Agencies	VNA Health at Home
	Professional Home Health
Federally Qualified Health Care Centers	Grace Health (2 locations in Laurel Co)
Community Mental Health Center	Cumberland River Behavioral Health
Other Behavioral Health Centers	Recovery Works
	New Hope Counseling & Recovery
	Spero Health
	Groups Recover Together
	Horizon Health
	BrightView London
	Crossroads
	Behavioral Health Group - Corbin
	Baptist Health - Trillium Center
	Independence House
Step Works Recovery Center	

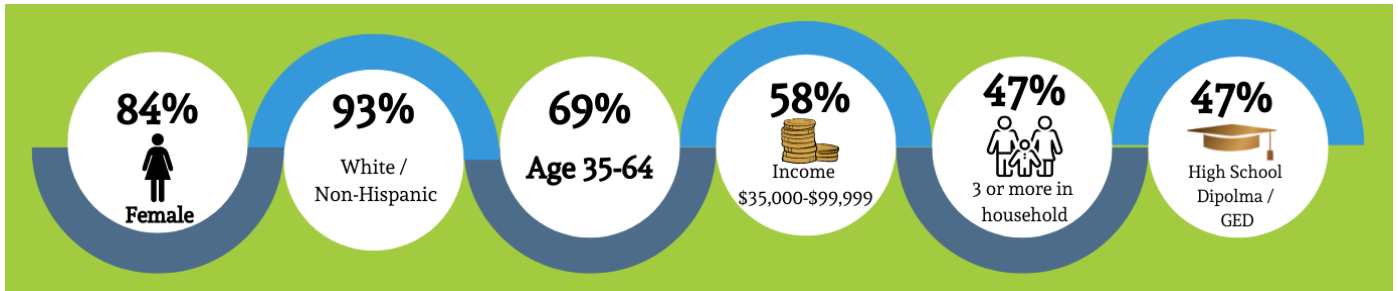
2. Community Themes and Strengths Assessment

A community survey was conducted that resulted in approximately 300 responses. In addition, Saint Joseph London conducted key informant interviews and a focus group.

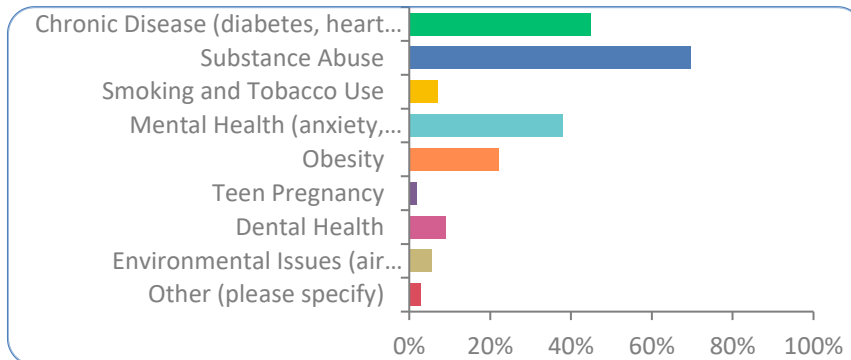
Community Survey responses indicate the following inequities may be present within the population: access to medical care, access to healthy food and activity choices, poverty, food insecurity, and discrimination. Notably, these inequities result in the health concerns perceived by respondents that include chronic disease, substance abuse, mental health, and obesity. Focus group results echo the same top concerns as the survey responses, Mental Health, Alcohol and Drug Abuse, Diabetes and Obesity.



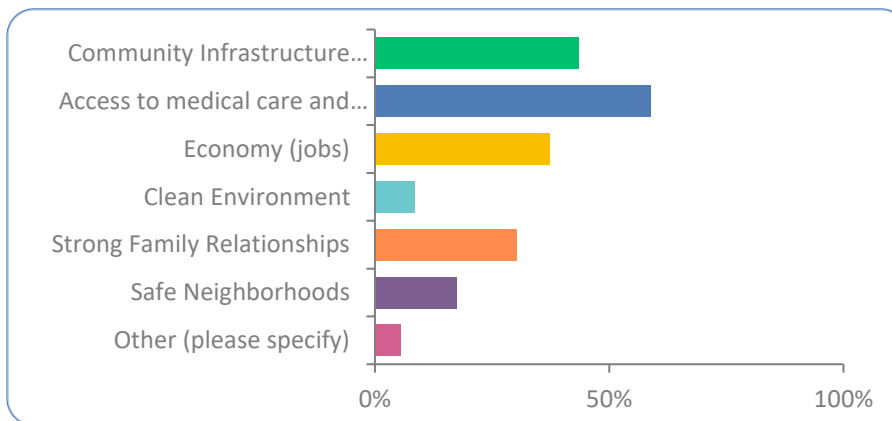
Respondent Data



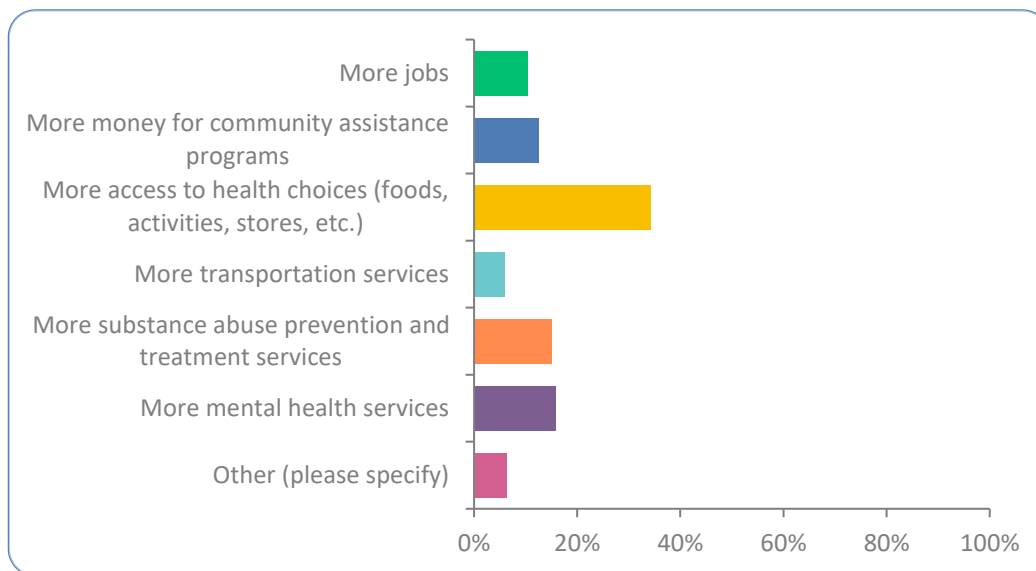
Top Health Concerns



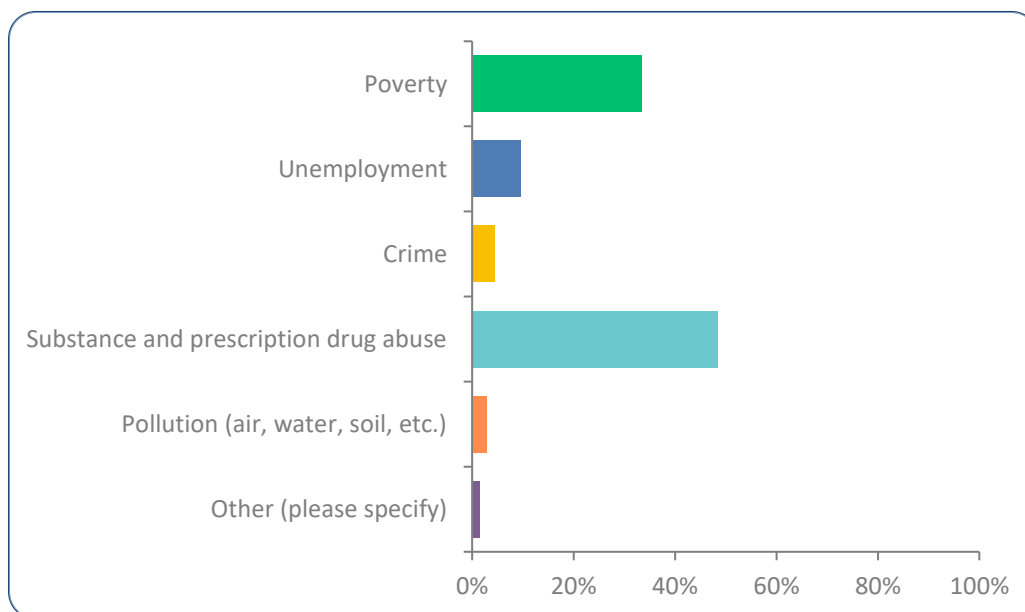
Top Things in the Community that Affect Health



Most Important Thing Our Community Can Do to Positively Impact Health



Most Important Thing in The Community That Can Negatively Impact Health



Top Risky Behaviors

1. Drug Misuse
2. Being Overweight
3. Meth Labs
4. Alcohol Abuse

Access To Care

23% of respondents reported they were unable to pay for health care services.

Discrimination

63% of respondents felt that discrimination often or sometimes occurs that is based on gender, sexual orientation, or race/ethnicity.

17% of respondents reported that they personally have been discriminated against often or sometimes.

Food Insecurity

27% reported that they have worried about running out of food within the past three months.

Living Situation

- ❖ **76%** own their home.
- ❖ **15%** rent
- ❖ **8%** live with family or friends currently.
- ❖ **<1** reported not having a stable place to live.

CHI Saint Joseph - Saint Joseph London, as part of its community assessment process, completed a qualitative analysis that included 5 key-informant interviews and 1 focus group that included 10 participating organizations. Community members invited to participate were recognized as having expertise in public health, special knowledge of community health needs, representing the broad interests of the community served by the hospital, and/or being able to speak to the needs of medical underserved or vulnerable populations. Findings are summarized below; data extracted during the interviews and focus group were combined with secondary survey data and categorized into key themes.



Top Health Concerns

Alcohol & Drug Abuse
Diabetes Obesity

Mental Health
Mental Disorders
Tobacco Use

Barriers to Care

Awareness
Cost/Lack of Insurance/Underinsured
Fear
Transportation

Hours of Operation
Navigating the Healthcare System

Populations most Negatively Impacted

Low Income
Minorities
Older Adults

More Rural Areas
Non-Traditional Households

PARTICIPATING ORGANIZATIONS

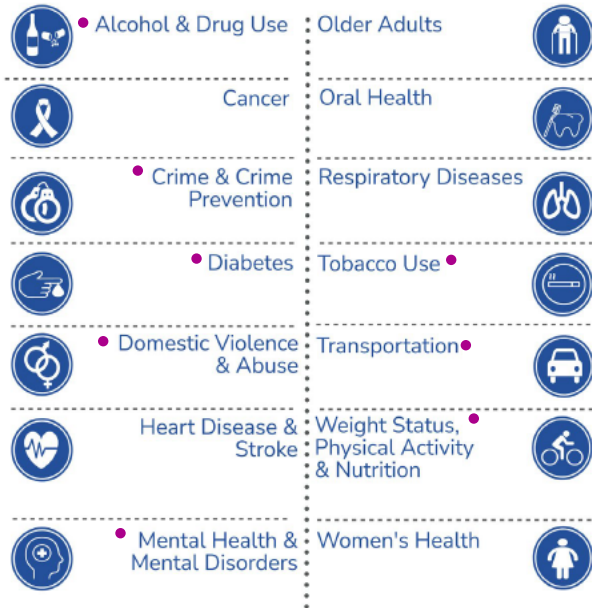
Baptist Health; Campbellsville University; Cumberland Valley Area Development; Kentucky Community and Technical College; Laurel Co. Agency for Substance Abuse Policy; Laurel Co. Health Department; London-Laurel Chamber of Commerce, Operation UNITE; and the University of Kentucky.

Significant Health Needs Identified by CHI Saint Joseph London's Assessment

*Those with a dot were identified from the primary data collected.
Those without a dot were identified from the secondary data collected*

Significant Health Needs

Based on the criteria shown in Figure 30, fourteen needs emerged as significant. Figure 31 illustrates the final 14 significant health needs, listed in alphabetical order, that were included for prioritization based on the findings of all forms of data collected for the Saint Joseph London 2023-2025 CHNA.



All of the above were found as significant health needs, however, CHI Saint Joseph London needed to prioritize areas it could make an impact on. The following areas were prioritized for its implementation plan.

1. Alcohol, Tobacco and Drug Use
2. Mental Health & Mental Disorders
3. Weight Status, Physical Activity & Nutrition

Saint Joseph London's full assessment and implementation plan for the above priorities can be found on CHI Saint Joseph Health's website at:

<https://www.chisaintjosephhealth.org/library/default-tab-bar-back/about-us/healthy-communities>

3. Local Public Health System Assessment

INTRODUCTION

The National Public Health Performance Standards Assessment is designed to help the health department and local public health system partners create a snapshot of where they are relative to the NPHSP and to progressively move toward refining and improving outcomes for performance across the public health system.

To initiate the local assessment piece of the National Public Health Performance Standards (NPHPS), Laurel County Health Department staff and community partner organizations who partnered with LCHD in the past were contacted and invited to participate in the 2022 Local Public Health Systems Assessment (LPHSA). Invitations were sent directly to partner organizations. The implementation was a two-part process. First an invitation linked to a Survey Monkey, which was designed to ask questions about the participant's daily work based on the sector and specific Essential Public Health Service they work with. Secondly, invitations were sent to 60 individuals from approximately 41 different agencies that serve Laurel County including the local health department.

The responses for part one was analyzed and combined for each EPHS. A second email invitation was sent to the same partners that asked them to rate how well Laurel County carries out the EPHS based on the results of part one and any additional knowledge they have of what is going on in the community in relation to that EPHS.

Part one received a total of 64 responses across all 10 EPHS (including the health department which participated in every EPHS). Part two received a total of 31 responses across all 10 EPHS.

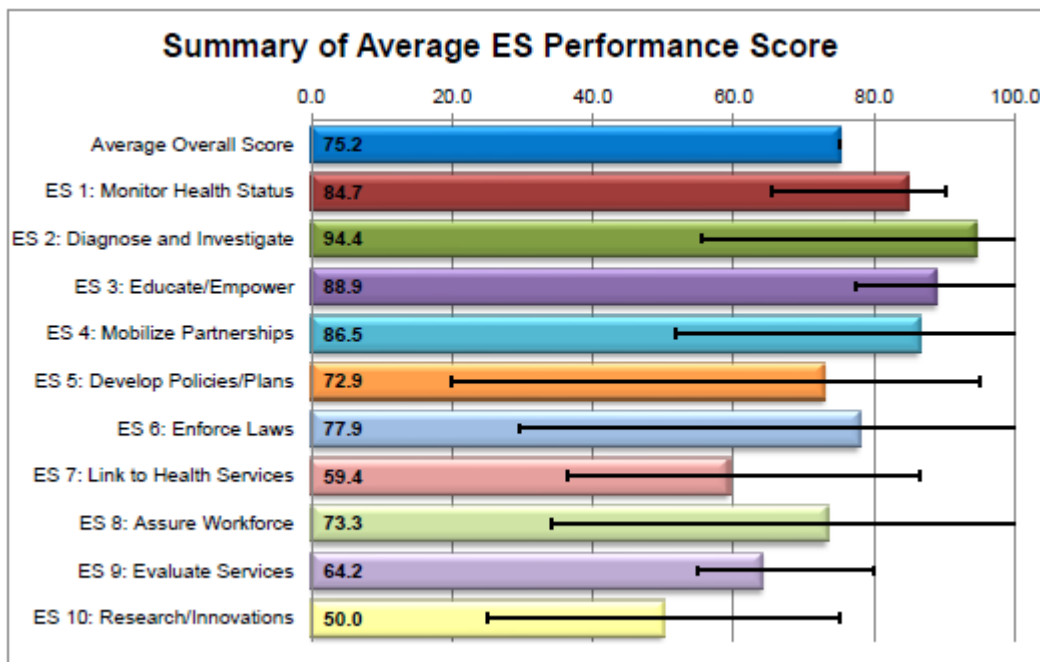
Scores

Scoring is based on the level of activity in which each EPHS is being carried out in the community currently or over past two-three years.

The figure below outlines the summary of scoring options.

Optimal Activity (76 -100%)	Greater than 75% of the activity described within the question is met.
Significant Activity (51-75%)	Greater than 50%, but no more than 75% of the activity described within the question is met.
Moderate Activity (26 -50%)	Greater than 25%, but no more than 50% of the activity described within the question is met.
Minimal Activity (1-25%)	Greater than zero, but no more than 25% of the activity described within the question is met.

The following graphs show the scores for Laurel County for each EPHS based on the scoring criteria above.



Based on the results, Laurel County's opportunities for improvement include the following EPHS (those below optimal activity): 10. Research for innovations, 7. Linking individuals to needed health services, and 9. evaluating services

Strengths and Challenges

Below is a summary of the Strengths, Challenges and Opportunities for Improvement (if any) identified for each EPHS within the Laurel County Public Health System.

EPHS	STRENGTHS	CHALLENGES	OPPORTUNITIES
#1 Monitor Health Status	<p>Hospital conducts community health assessment every 3 years.</p> <p>Health in Motion coalition conducts county-wide community health assessment every 3-5 years. Coalition is made up of many community partners.</p> <p>Regional prevention center conducts a yearly community assessment utilizing the Dept for Behavioral Health toolkit.</p> <p>Organizations outside of health dept utilize health assessment data.</p> <p>Great partnerships!</p> <p>Population health registries used:</p> <ul style="list-style-type: none"> • Kentucky Immunization Registry • NEDSS - Communicable Disease Registry • Contact Tracing Tracking - started using for COVID-19 contact tracing. • Kentucky Cancer Registry • Vital Statistics Registry (Kentucky Online Gateway) 	<p>Focusing on continuously revising CHA data (for example on an annual basis) instead of waiting until the next full CHA cycle before revising any of the data. Better visual representation of the CHA data to better engage the community.</p> <p>I feel the LCHD is often overlooked as a necessary and reliable resource to our community. Perhaps other community partners see more "advertisement" for the health department, but I feel as if LCHD should be shouting to the community the wealth of resources available through our health department.</p> <p>Knowing where data is located and being able to access.</p>	<p>Educate and inform the community about the assessment and the outcomes of the assessment.</p> <p>A central database where all LPHS partners can have access to the data.</p>
#2 Diagnose and Investigate	<p>During the COVID-19 pandemic, partnerships were forged between agencies that previously weren't that strong.</p> <p>The health dept leads the community in monitoring health threats.</p> <p>The local hospital and emergency management services support the community by collaborating in response to these threats.</p> <p>The school systems have come to the forefront in this collaboration to ensure the health and safety of their students and personnel.</p> <p>Community agencies look to the health department to provide guidance on state and national regulations and recommendations when responding to any threat.</p> <p>Strong partnerships that allow for timely investigations and response to public health issues.</p> <p>KY State Laboratory is easily available to local health department. Local health department works with partners when state lab is involved.</p>	<p>Maintaining strong communications</p> <p>Ensuring all supplies are readily available for packaging and shipping specimens.</p>	
#3 Inform, Educate, and Empower People about Health Issues	<p>Lots of collaboration on projects around health education and promotion by partners. Examples: Drug Take Backs, Pre-Prom Events, Upcoming Community Health Day event.</p> <p>Organizations do a great job of using various types of messaging to reach different audiences.</p> <p>During the COVID-19 Pandemic, there was frequent communication from the health department on recommendations on quarantine, isolation and caring for yourself if you were sick, case numbers, and guidance about how to stay safe. There were newspaper articles, daily Facebook Posts, webpage, radio interviews and television news stories where the health department relayed information to the public.</p> <p>The health department also communicated with its public health partners to keep them abreast of information in a timely manner.</p>	<p>Focus more in including target population in development of educational messages and programs.</p> <p>Hard to get everyone at all meetings and involved. Takes a long time getting materials approved so there is a lot of down time with no info out in public. Time consuming developing plans and sometimes have a short time span. Hard time being accountable for volunteers.</p> <p>Getting educational information to target population. Lack of funding at times. Sometimes the public hears about it on the news and doesn't get the entire context before professionals can get the appropriate information out.</p>	<p>It would improve the efforts of the health department if it could improve the marketing of itself and its services.</p>

EPHS	STRENGTHS	CHALLENGES	OPPORTUNITIES
#4 Mobilize Community Partnerships to Identify and Solve Health Problems	<p>New partnerships have been made over the past couple of years.</p> <p>Community partnerships continue to be a priority for the local public health system. Agencies and organizations rely on partnerships to be successful</p>	<p>Due to the pandemic, some partnerships have been lost due to not having in-person meetings.</p> <p>Pandemic created increase in silo-based care.</p> <p>Priority changes as a result of pandemic.</p>	<p>If possible, try to move to a hybrid approach to meetings maybe where you have some that are in-person and some that are virtual to allow all partners to be involved.</p> <p>Make an effort to reach out to those lost partners to build back the relationship.</p> <p>Increase awareness of benefits of collective impact.</p>
#5 Develop Policies and Plans that Support Individual and Community Health Efforts	<p>Many local agencies are visible in the community that are local branches of state government such as the local health department and dept for community-based services. The hospital has a governmental benefit that they fall under.</p> <p>Local government officials are very visible in the community such as the mayor, county judge executive and councils.</p> <p>Policies have been passed on a statewide level.</p> <p>Community health assessment completed every 3 years, and a CHIP is written based on the results of the community health assessment. Coalition prioritizes needs based on assessment data and surveys.</p> <p>Policies on emergency preparedness are written and drills are executed.</p>	<p>Lack of knowledge in the community regarding all available services.</p> <p>Not as much focus has been put on passaged of local policies.</p> <p>The process for monitoring and reporting progress of CHIP activities hasn't been as productive since the pandemic.</p> <p>LCHD's strategic planning reporting has also been lacking since the pandemic.</p> <p>Sometimes it's difficult to determine who does what when there are multiple agencies involved.</p>	<p>Include local government officials or designees on more community coalitions and groups.</p> <p>More focus on local policies.</p> <p>Outline a better process for tracking and reporting CHIP activities for the 2023 CHIP.</p> <p>LCHD has developed a dashboard to better track Strategic Plan progress.</p> <p>Continue to update policies and emergency plans and conduct drills and exercises.</p>
#6 Enforce Laws and Regulations that Protect Health and Ensure Safety	<p>Lots of laws and regulations in place Annual updates to laws and regulations Mid-fiscal updates to regulations when needed.</p> <p>Kentucky Public Health Association (KPHA) continues to advocate on specific issues. Local health department is actively involved with KPHA.</p> <p>Agencies have individual operational plans that outlines enforcement procedures.</p> <p>The health department works closely with law enforcement, EPA, division of water, and the division of plumbing to enforce local public health laws.</p> <p>Law enforcement enforces public safety laws and regulations.</p>	<p>Still takes a long time to adopt codes at the state level.</p> <p>Laws need to change as society changes.</p> <p>Lack of public education on laws</p> <p>Large businesses are more likely to comply, but smaller businesses are not because they don't know exactly how to put plans in place</p>	<p>More frequent review of existing regulations.</p> <p>Involve more agencies in identifying what policy changes are needed.</p> <p>Conduct more evaluations of the impact of policy changes.</p> <p>Try to provide more education before an actual event occurs.</p> <p>On a day-to-day basis, try to be more proactive than reactive.</p>
#7 Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	<p>Community assessment is used to identify the health needs of the community.</p> <p>CHIP identifies initiatives to impact health needs. A lead agency is identified for each CHIP objective.</p> <p>Supportive Community resources/collaboration among agencies</p> <p>Collaboration between agencies to get services for clients.</p> <p>Schools have FRYSC that work with various community partners to make refers to needed services.</p> <p>Hospital has case management that works with discharged patients and provides financial assistance for those who may have a financial hardship when receiving care.</p> <p>FQHC - Grace Health has multiple locations in the county and region to provide low-cost health care services.</p> <p>Several agencies work with managed care organizations to help clients enroll in health benefits.</p>	<p>Sometimes it's hard to get members of vulnerable populations to participate in community assessment or focus groups that are intended to help identify needs.</p> <p>Transportation - not a lot of choices for public transportation</p> <p>Sometimes there is lack of knowledge about what resources are available. The partner has to make lots of calls to learn what services the client may access.</p> <p>Fragmented Resource Guides.</p>	<p>Build a resource listing to help support organizations easily access the information they need to help their clients.</p> <p>Try to establish more options for transportation.</p> <p>A centralized resource listing (easily updated)</p>

EPHS	STRENGTHS	CHALLENGES	OPPORTUNITIES
<p>#8 Assure a Competent Public and Personal Health Care Workforce</p>	<p>Each organization does organizational planning as to what each person can do at their job.</p> <p>For many healthcare agencies, all licensures and trainings must be up to date with CEUs provided. Following Medicare guidelines and requirements</p> <p>On several occasions community partners have collaborated to plan and implement professional development opportunities locally.</p> <p>Organizations allow staff to participate in continuing education opportunities.</p> <p>Leadership Training available (Kentucky Public Health Leadership Institute, Tri-County Leadership)</p> <p>Laurel County Health Department's QI team help putting those in leadership roles, allowing those to have a leadership opportunity that may not otherwise get to. Director or other leader may coach or mentor others to help them develop their leadership skills.</p>	<p>Tuition reimbursement in not always provided by the employer.</p> <p>The pandemic lessened the opportunities to receive continuing education.</p> <p>Companies do not always offer positions based on experience or need but instead on who a person is.</p> <p>Knowledge of public health competencies.</p>	<p>When job descriptions are updated, perform an assessment before the update to better understand what needs to be updated.</p> <p>Increase awareness of public health competencies.</p>
<p>#9 Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-based Health Services</p>	<p>Evaluations are conducting by partners on various activities including after public health preparedness exercises and drills, using performance management tracking and monitoring, through satisfaction surveys, quality care evaluations, and looking at health outcomes as a result of implementing a program or activity.</p> <p>Continues to be a shift to more electronic methods of providing health care. Technology is available to perform real time data on personal health metrics.</p> <p>A community health assessment is completing using the MAPP framework every 3 years.</p> <p>A Community Health Improvement Plan is written based on the findings in the community health assessment.</p> <p>Large # LPHS partners involved.</p> <p>Multiple community coalitions addressing health and safety issues</p>	<p>Can't fix everything in an evaluation (ex. funding, etc.)</p> <p>Participation in population-based programs sometimes is very low.</p> <p>Lack of adequate measurement</p> <p>Can't always evaluate everything.</p> <p>Some agencies still do not have electronic records.</p> <p>Lack of interconnectivity between agencies that make it easy to share records for continuity of care.</p> <p>Hospitals are not able to share records among each other.</p> <p>Not all of the LPHS is involved in the process</p>	<p>Make evaluation a standard part of the project report.</p> <p>Include more people with lived experience in the evaluation.</p>
<p>#10 Research for New Insights and Innovative Solutions to Health Problems</p>	<p>The extension office continues to bring research opportunities into the community.</p> <p>The health department has applied and received grants to implement innovative ways to reach specific populations with services: ex: mobile health van.</p> <p>Many local agencies have relationships with the University of Kentucky, University of Louisville, and Eastern Kentucky University.</p> <p>Health Department has staff that serves on advisory boards for both EKU and UK.</p> <p>Many agencies accept interns from the universities and participate in student learning opportunities to help build the knowledge of the future workforce.</p> <p>Access to research support through extension office</p> <p>The Public Health Training Center offers research opportunities.</p> <p>LCHD is a member of the Appalachian Translational Research Network and serves on the UK Center for Clinical and Translational Science's Community Champions Cabinet.</p>	<p>Sometimes things that are innovative isn't recognized as innovative by the organization.</p> <p>The closest university is 30 miles away. EKU is 40 miles away and UK is 60 miles away. Sometimes it is difficult to keep consistent communication with the universities.</p> <p>Don't always use the resources that are out there and available. Many times will wait on a university to contact them about research instead of reaching out to the university first.</p> <p>Don't have access to the resources/research that others collect.</p> <p>How do apply research or evidence-based practices and measure policy change?</p>	<p>Research and stay abreast of successful innovations in other communities.</p> <p>Be more proactive using resources/contacts that help with data collection and research</p> <p>Develop policies to track evidence-based policy adoption.</p>

4. Forces of Change Assessment

The Forces of Change assessment identified trends, factors, or events that influence the health and quality of life of the community and the work of the local public health system.

This assessment was completed on August 12, 2022, by the Health in Motion Coalition Members during a regularly scheduled coalition meeting. Members were asked to share ideas on trends that may impact the health of Laurel County. The group then worked together to identify challenges, opportunities, and impacts on wellness and health equity.

The members were asked the following questions:

1 FORCES

What forces (trends, factors, and events) are occurring that affects the health of our community or how the public health system functions?

Possible categories: social, economic, political, technological, environmental, scientific, legal, and ethical)

2 CHALLENGES

What challenges/threats or opportunities may be generated by these occurrences?

3 WELLNESS DIMENSION IMPACT

Which wellness dimensions each may impact?

4 HEALTH EQUITY IMPACT

What impact (positive or negative) may the trend have on health equity?

The members were provided the below information during the assessment.

DIMENSION OF WELLNESS

- Culture - Individual awareness of one's own culture as well as understanding and respecting diversity and richness of other cultures.
- Emotional- Coping effectively with life and creating satisfying relationships.
- Environmental-Good health by occupying pleasant, stimulating environments that support well-being.
- Economic -Satisfaction with current and future financial situations
- Educational-Recognizing creative abilities and finding ways to expand knowledge and skills.
- Physical - Recognizing the need for physical activity, healthy foods, and sleep.
- Social- Developing a sense of connection, belonging, and a well-developed support system.
- Spiritual- Expanding a sense of purpose and meaning in life.

DEFINITION OF TRENDS, FACTORS, AND EVENTS OF WELLNESS

- **TRENDS** are patterns over time, such as migration in and out of a community or a growing disillusionment with government.
- **FACTORS** are discrete elements, such as a community's large ethnic population, an urban setting, or a jurisdiction 's proximity to a major waterway.
- **EVENTS** are one - time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation.

RESULTS

The following represents the themes that emerged from the forces of change assessment.



Trend	Challenge	Opportunity	Wellness Dimension Impact	Health Equity Impact
Possible passage of medical marijuana bill	<ul style="list-style-type: none"> • May increase the use of other drugs. • Increase in DUI offenses. • Division within the community and state 	Improve treatment and quality of life for individuals with severe medical conditions such as neuropathy, cancer, and multiple sclerosis.	Culture Economic Physical Health	
Termination or discontinuation of certain health services (ex MNT/RD services)	<ul style="list-style-type: none"> • Increased risk of health concerns • Burden on other agencies to provide. • Individuals feel de-valued 	<ul style="list-style-type: none"> • Collaboration between agencies • Sharing of resources 	Culture Economic Education Physical Health Social Emotional	(-) People who don't have the means to travel out of county for services
Changes in local government officials (new mayor in 2023)	Different priorities Division in the community Fear	Fix what's broken. Improvement of past failures/weaknesses	Culture Social Emotional	(+) New ideas can bring health equity to the fore front of local policies
Communicable Diseases (COVID-19, Monkeypox, etc.)	Overload of the health care system Division within the community (Politicized) Increase in mortality rates	Secure more funding for public health services.	Economic Emotional Physical Social	(-) Specific populations are more disproportionately affected by certain diseases. (+) Implement programs and services to educate these populations

Trend	Challenge	Opportunity	Wellness Dimension Impact	Health Equity Impact
Increased use of technology	<ul style="list-style-type: none"> • May isolate certain user groups and divide generations. • Integrating it into services being provided (HIPAA issues) • Multiple outlets or platforms available. 	<ul style="list-style-type: none"> • Increase in productivity/less travel time to meetings / appts. • Increase in IT jobs. • Less use of paper • Increased ability to connect with others quickly 	Culture Social Economic	<p>(+) Increase healthcare access and address unmet needs for patients.</p> <p>(-) May increase existing bias when supporting decision making, test results, etc.</p>
Immunizations	<ul style="list-style-type: none"> • Controversial • Have been politized 	<ul style="list-style-type: none"> • Education • Decrease in communicable disease 	Culture Physical Social	<p>(+) Implement strategies to increase confidence and access to vaccinations among members of racial and ethnic minority groups and other groups disproportionately affected by diseases</p>
Natural and manmade disasters (flooding, tornados, climate change, spills, etc.)	Getting resources quickly	<ul style="list-style-type: none"> • Community collaboration • Planning and response 	Culture Environmental Economic	<p>(-) Low-income persons and members of racial/ethnic minority groups are more likely to live in disaster-prone areas and have lower quality housing.</p>
Fuel Prices	<ul style="list-style-type: none"> • Decrease in ability to travel (healthcare, job, etc.) • Economic stress • Decrease in tourism 	<ul style="list-style-type: none"> • Use of technology to still be able to provide services. • Use of technology to allow employees to work from home 	Environmental Economic Emotional Physical	<p>(-) Low-income persons are impacted more by high fuel prices</p>
Loss of Workforce	<ul style="list-style-type: none"> • Loss of momentum • Strain on remaining staff 	<ul style="list-style-type: none"> • Prioritization of services • Stronger bonds with co-workers • Collaboration between community partners 	Culture Social Emotional Physical Spiritual	<p>(-) Lack diversity in healthcare workforce can result in a poor patient experience.</p>
Infrastructure	<ul style="list-style-type: none"> • Cost (tax base) • A lot of population is well outside of the city limits 	<ul style="list-style-type: none"> • Increase in business. • Improve economy. • Increase tourism. • Improve access to services 	Economic Physical	

References

CHI Saint Joseph Health Saint Joseph London. Community Health Needs Assessment 2023-2025. Data collected 2021-2022.

County Health Rankings

<https://www.countyhealthrankings.org/explore-health-rankings/kentucky/laurel?year=2022>

Everytown for Gun Safety Support Fund, “EveryStat for Gun Safety,” accessed July 2022, <https://everystat.org/> .

Steel, M., Mirzaian, M. (2022). *Kentucky Resident Drug Overdose Deaths, 2017–2021*. **Kentucky Injury Prevention and Research Center**

US Census

<https://www.census.gov/quickfacts/fact/table/KY,laurelcountykentucky/PST045222>

Appendix I: Baptist Health Corbin 2022-2024 CHA

Baptist Health Corbin conducted a Community Health Assessment in 2022.

Below is an excerpt from that assessment:

“Committee Discussion

During the Community Health Needs Assessment Committee meeting, members expressed their thoughts about several health concerns in the area and where Baptist Health Corbin should concentrate its resources over the next three years. The committee included senior hospital leadership and specific department directors.

After studying the primary and secondary data, the committee discussed the issues. First and foremost, the team unanimously agreed that the opioid crisis is the top-of-mind community health issue. The committee agreed that this health issue is creating additional stress on agencies throughout the community, including the hospital.

Prioritized Health Issues

The committee identified a number of community health issues. Using a voting methodology, the team then identified the top five the hospital will focus on over the next three years. They are:

- Obesity
- Cancer
- Cardiovascular Disease
- Mental Health and Substance Abuse
- Patient Transportation”

The full assessment and Implementation Plan for each priority area can be found on Baptist Health’s website at <https://www.baptisthealth.com/connect-learn/community-health-outreach/community-health-needs-assessments/baptist-health-corbin>

Appendix II: ContinueCare Hospital at Baptist Health Corbin CHA

ContinueCare Hospital at Baptist Health Corbin completed a CHA that was released in February 2023. Members of the Laurel County Health in Motion Coalition participated as key informant interviewees as part of the assessment.

Below is an excerpt from that assessment:

“A comprehensive, six-step community health needs assessment (“CHNA”) was conducted for ContinueCARE Hospital at Baptist Health Corbin (CCHBHC) by CHC ContinueCARE. This CHNA utilizes relevant health data and stakeholder input to identify the significant community health needs in Knox, Laurel, and Whitley Counties, Kentucky.

The CHNA Team, consisting of leadership from CCHBHC, reviewed a summary of the research findings created by CHC ContinueCARE to prioritize the community health needs. Six significant community health needs were identified by assessing the prevalence of the issues identified from the health data findings combined with the frequency and severity of mentions in community input.

The CHNA Team participated in a roundtable discussion prioritization process using a structured matrix to rank the community health needs based on three characteristics: size and prevalence of the issue, effectiveness of interventions and the hospital’s capacity to address the need. Once this prioritization process was complete, the hospital leadership discussed the results and decided to address three of the prioritized needs in various capacities through a hospital specific implementation plan.

The final list of prioritized needs is listed below:

1. Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles
2. Access to Affordable Care and Reducing Health Disparities Among Specific Populations
3. Access to Primary and Specialty Care Services and Providers
4. Continued Focus on Community Infrastructure
5. Access to Mental and Behavioral Health Care Services and Providers
6. Access to Dental Care Services

CCHBHC is a long-term acute care facility within Baptist Health Corbin. Based on CCHBHC’s status as a long-term acute care facility, the hospital has focused its capabilities on addressing the needs of this particular market. Therefore, “Continued Focus on Community Infrastructure”, “Access to Mental and Behavioral Health Care Services and Providers”, and “Access to Dental Care Services” and are not directly addressed in the hospital’s implementation plan. While CCHBHC acknowledges that these are significant needs in the community and will work with the host hospital to see how the facility can assist in these needs, the priorities listed above that will not be addressed by the hospital are not core business functions of the hospital and the leadership team felt that resources and efforts would be better spent addressing the remaining prioritized needs.

The CCHBHC Board reviewed and adopted the 2023 Community Health Needs Assessment and Implementation Plan on February 28, 2023.”

The full assessment and implementation plan for the above priorities can be found on ContinueCare’s website at <https://corbin.continuecare.org/chna/>

Appendix III: REVISIONS

DATE	REVISIONS MADE
4-2024	Add descriptions of data and assessment findings (page 8, 17, and 23)