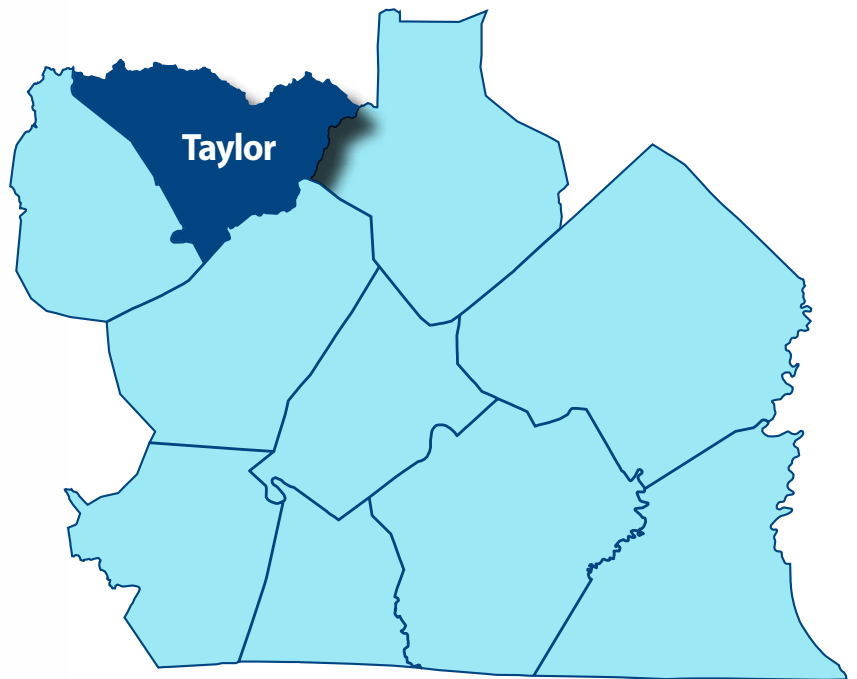


## 2014 Community Health Assessment



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



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

## An important message from the Director

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

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

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

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



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



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



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

# Taylor County Wellness Coalition

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

## inside

<b>Health Policy and Promotion</b>	
<b>Community Health Assessment</b> .....	4
<b>Taylor County Vision</b> .....	4
<b>MAPP</b> .....	5
<b>Ten Essential Public Health Services</b> ....	5
<b>LCDHD’s Road MAPP to Health</b>	
<b>Improvment</b> .....	6
<b>Taylor County Community Health</b>	
<b>Assessment Information</b> .....	7
<b>Taylor County Wellness Coalition</b>	
<b>Contact Information</b> .....	8
<b>Taylor County Wellness Coalition in</b>	
<b>Action</b> .....	9
<b>Community Health Status</b>	
<b>Assessment</b> .....	10
Demographic Characteristics	
Socioeconomic Characteristics	
Behavior Risk Factors	
Environmental Health Indicators	
Health Resource Availability	
Communicable Disease	
Maternal and Child Health	
Ten Leading Causes of Death	
Social and Mental Health	

## Forces of Change Assessment .....

- Economic
- Environmental
- Legal
- Political
- Social
- Scientific
- Technological
- Ethical

## Community Themes and Strengths Assessment .....

## Local Public Health System Assessment .....

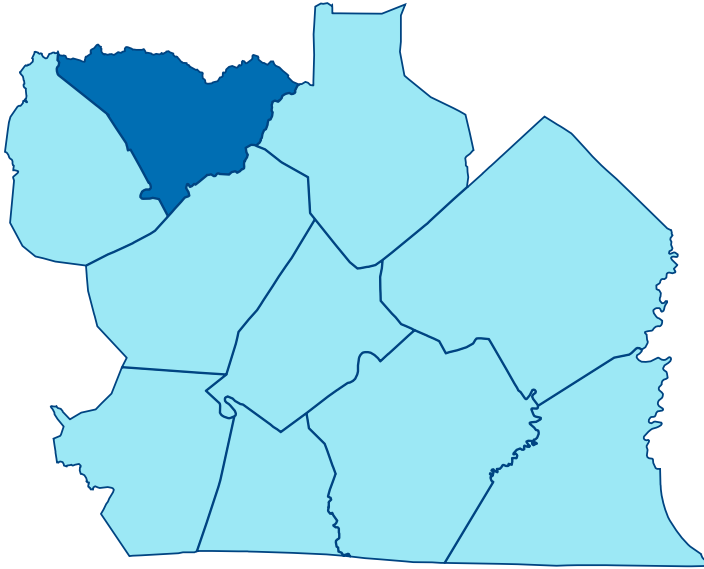
## APPENDIX Community Health Data Collection....

- Population Demographics
- Socioeconomic Characteristics
- Social and Mental Health
- Health Resource Availability
- Behavior Risk Factor
- Behavior Protective Factor
- Maternal and Child Health
- Crimes
- Death, Illness and Injury
- Communicable Disease
- Environmental
- References
- Ten Leading Causes of Death

## Taylor County Community Health Survey.....

# Health Policy and Promotion Community Health Assessment

The Lake Cumberland District Health Department (LCDHD) is located in rural south central Kentucky. The LCDHD is comprised of ten counties: Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor and Wayne. The District covers around 3,613 square miles with a population of approximately 207,000 (2010 Census). As one travels through our District they will notice an abundance of beautiful scenic opportunities along with a National and several State Parks. Nonetheless, the natural beauty of our rural communities and open countryside comes with many health challenges.



## The Lake Cumberland District Health Department Vision:

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

Taylor County is located in Southern Kentucky. The county population is 24,512. Campbellsville is the County Seat for Taylor County. Taylor County is home to Campbellsville University and Green River State Park.



## Taylor County Vision Statement:

“...to promote and coordinate all available community resources in health related activities.”

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

# 20 out of 120 counties

# Mobilizing for Action through Planning and Partnerships (MAPP)

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

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



figure 1:  
Ten Essential Public Health Services

## Ten Essential Public Health Services

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

# LCDHD's Road MAPP to Health Improvement

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

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



figure 2: Community Roadmap

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

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

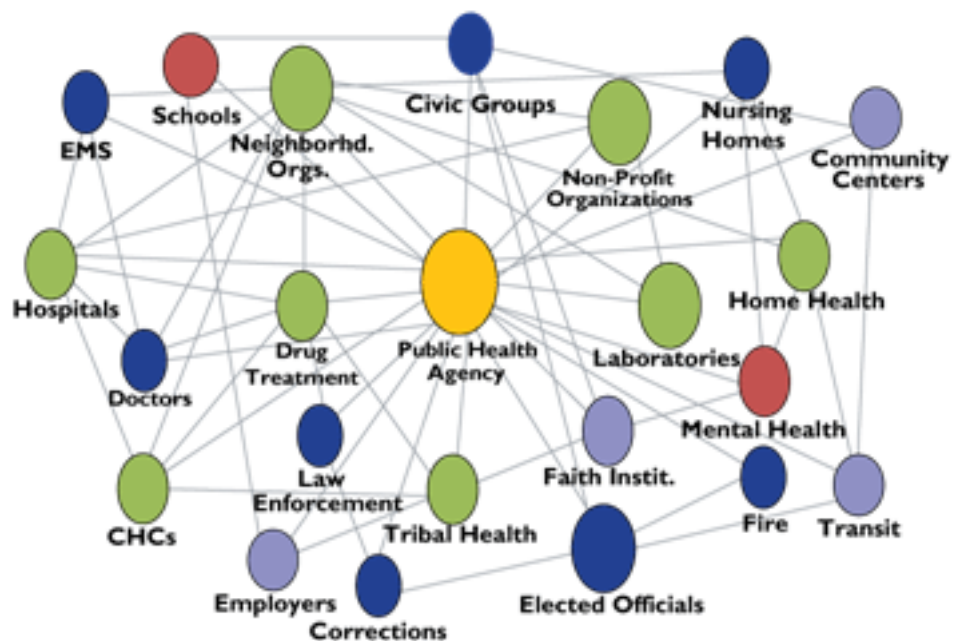


figure 3: Local Public Health System

# Taylor County Community Health Assessment Information

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

The four assessments conducted were:

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



figure 4: MAPP Model

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

# Strategic Plan for Community Improvement

Supported by the Lake Cumberland District Health Department, Taylor County Wellness Coalition was formed in June 11, 2012. The coalition has completed the four MAPP assessments: Community Themes and Strengths, Local Public Health System Assessment, Community Health Status Assessment and Forces of Change Assessment. These assessments provided insight on the gaps between current circumstances, provided information to use to identify the strategic issues, and served as the source of information from which our strategic issues, strategies and goals were built.



## **Taylor County Wellness Coalition**

**21st Century Program**

**Bicycle Friendly Campbellsville**

**Campbellsville Board of Education**

**Campbellsville High School**

**Campbellsville Schools**

**Family Resource Youth Services Center**

**Campbellsville – Taylor County Anti-Drug Coalition**

**Campbellsville University**

**City of Campbellsville**

**Community Transformation Grant**

**Friends of Green River Lake**

**Green River Lake State Park**

**Taylor County Cooperative Extension Service**

**Taylor County Health Department**

**Taylor County Senior Center**

**Taylor Regional Hospital**

**U.S. Army Corps of Engineers – Green River Lake**

---

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

---

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

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

Contact Jaclyn Hodges at 270-465-4191 ext: 7268  
or email: [jaclyne.hodges@lcdhd.org](mailto:jaclyne.hodges@lcdhd.org)  
for meeting information.



# Taylor County Wellness Coalition in Action



# Community Health Status Assessment

Taylor County covers 266.33 square miles including the city of Campbellsville. Taylor County population is 24,512, with a population density of 92 people per square miles. Campbellsville University's home campus is located in Campbellsville where enrollment is 3,318. 22.2% of the population is under the age of 18 and 16.1% population is over age 65.

## Demographic Characteristics

	Taylor County	Lake Cumberland District	Kentucky
Total Population	24,512	206,629	4,339,367
Persons under 18 years of age	22.2%	18.4%	86.7%
Persons 65 years and older	16.1%	18.4%	13.3%
Female	51.6%	50.3%	51.0%
Male	48.4%	49.7%	49.0%
White	92.7%	95.3%	87.8%
Black	5.0%	2.1%	7.8%
American Indian & Alaska Native	0.1%	0.2%	7.8%
Hispanic or Latin origin	1.8%	2.2%	0.7%
Reporting 2 or more races	1.5%	1.1%	1.7%
School District Enrollment (P - 12)	3,958	31,404	675,530

Sources: US Census Quick Facts, 2012; Kentucky Department of Education, 2012

Socioeconomic characteristics play an important role in determining the health status of a county. The unemployment rate is 10.8% of our population. The median household income is \$35,962 with 26% of our children living below poverty. Homeownership rates are 68.8%. There are 15% of adults that are uninsured, 7% of children are without insurance, and 22.9% are enrolled in Medicaid. The rate of children living in single parent homes is 41%.

## Socioeconomic Characteristics

	Taylor County	Lake Cumberland District	Kentucky
Unemployment	10.8%	11.18%	10.5%
Median Household Income	\$35,962	\$29,548	\$42,248
Homeownership Rates	68.8%	73.4%	69.9%
Children Living below Poverty	26.0%	34.3%	23%
Uninsured Population	15.0%	17.9%	19%
Children without Insurance	7.0%	9.4%	10.9%
Enrolled in Medicaid	22.9%	31.3%	32%
Children in Single Parent Homes	41.0%	30.8%	32%

Sources: CHR, 2011; US Census, 2012; KHF, 2011

# Community Health Status Assessment

Behavior risk factors directly impact the individual's and the community's overall health status. There is a strong correlation between behavior risk factors and mortality rates. Adult obesity in Taylor County is 31% and 26% of adults are physically inactive. CDC estimates in 2010 more than one third of adolescents and teens were overweight or obese.

According to Kentucky Health Facts, data indicates that the smoking rate for adults is 30%. Kentucky Incentive Project data indicates that 13.3% of Taylor County youth use smokeless tobacco and 23.5% smoke cigarettes within the past 30 days of being surveyed.

## Behavior Risk Factors

	Taylor County	Lake Cumberland District	Kentucky
Adult Obesity	31%	32%	31%
Physical Inactivity Adult*	26%	34%	30%
Adult Smoking	30%	30%	28%
Excessive Drinking	8%	6%	11%
Drug/Narcotic Offenses Reported	210	1,784	35,665

\*1 Percent of population 20 or above with no leisure time activity

Sources: CHR, 2011; CDC, National Center for Chronic Disease and Health Promotion, Diabetes Atlas 2010; CDC, BRFSS 2005-2011; CHR, 2011; Kentucky State Police, Crimes Report 2011

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

## Environmental Health Indicators

	Taylor County	Lake Cumberland District	Kentucky
Access to healthy food****	50%	60%	44%
Population within 1/2 mile of park	7%	2%	20%
WIC - Authorized Food Store Access†	56.61%	37.17%	24.06%
Percent of Low Income w/Low Food Access	1.97%	3.38%	5.11%
Grocery Store Access†	28.56%	26.52%	19.22%

\*Average number of unhealthy air quality days due to FPM. \*\*Average number of unhealthy air quality days due to ozone. \*\*\*Recreation facilities are defined as county/city/state parks and trails.

\*\*\*\*Percent of zip codes with healthy food outlets. † Rate per 100,000 population. Sources: CHR, 2011; CDC, National Environmental Public Health Tracking Network, 2010; US Census Bureau, County Business Patterns, 2011; US Dept. Economic Research Service, Food Environment Atlas, 2011; Adair County 2011 Solid Waste Management Area Annual Report, 2011.

# Community Health Status Assessment

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



Taylor Regional Hospital (TRH) is the only hospital in Taylor County. The website, Kentucky Health Facts, states that 15% of Taylor County adults are underinsured or have no insurance. There are 22 licensed primary care physicians, eight family practice physicians, one general practice physician, seven internal medicine specialists, four OBGYN's, two pediatricians and 18 other specialty physicians serving Taylor County. There are also eight licensed dentist and four home health agencies.

Adults in Taylor County without insurance **15%**

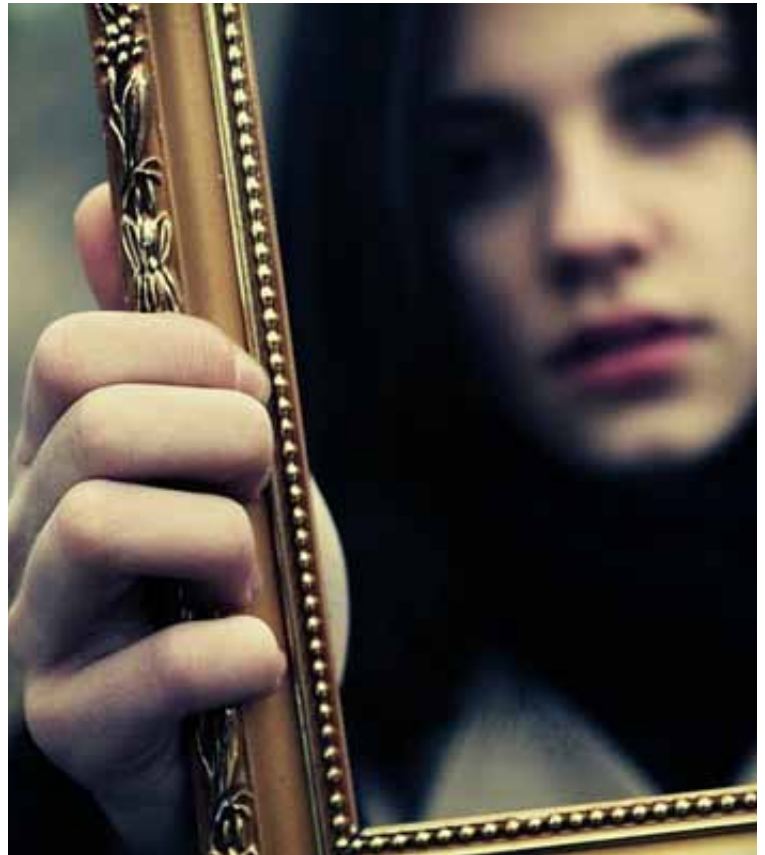
## Health Resources Availability

	Taylor County	Lake Cumberland District	Kentucky
Licensed Primary Care Physicians	22	158	4,241
Family Practice	8	78	1,547
General Practice	1	29	116
Internal Medicine	7	34	1,375
OB/GYN	4	15	493
Pediatricians	2	11	710
Other Specialty	18	123	5,874
Licensed Dentist	8	78	2,461
Primary Care Physician Ratio	1,427:1	unknown	1,232:1

Sources: KHF, 2011; CHR 2011

# Community Health Status Assessment

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



*Communicable Disease: It can happen to you.*

## Communicable Disease

	Taylor County	Lake Cumberland District	Kentucky
Syphilis (number reported)	3	5	335
Gonorrhea (number reported)	14	32	4,521
Chlamydia (number reported)	104	446	16,631
HPV (number reported)	5	56	unknown
TB Rates (per 100,000 population)	0.0%	3.0%	2.1%
AIDS (number of people living with)	13	111	7,750

Sources: KY Vital Statistics 2011 preliminary data; LCDHD Report Card 2011

# Community Health Status Assessment

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

## Maternal and Child Health

	Taylor County	Lake Cumberland District	Kentucky
Infant Death (number of residents)	2	17	6.7
Teen Birth Rate (ages 15 - 17) per 1,000	48	58.8	43.7
Repeat Births Rate (per 1,000)	23.81%	24.21	17.84
Low Birth Rate (less than 2,500 grams) number	32	229	unknown
Neonatal Death (number)	1	7	unknown
Regulated Childcare Providers (number)	12	134	2,815
Children in Regulated Childcare (number)	640	5,560	182,350
Star Rated Childcare Facilities (number)	7	75	1,065

Sources: KY Kids Count Data Booklet, 2012; Kentucky Vital Statistics, 2011 Preliminary Data

## Ten Leading Causes of Death

Leading Causes of Death	Taylor County	Lake Cumberland District	Kentucky
Malignant Neoplasms	64	569	6.7
Diseases of the Heart	56	564	6,055
Accidents (unintentional injuries)	20	152	unknown
Chronic Lower Respiratory Diseases	16	170	17.84
Cerebrovascular Disease	14	101	unknown
Diabetes Mellitus	7	71	unknown
Influenza and Pneumonia	7	53	unknown
Alzheimer's Disease	4	68	unknown
Chronic Liver Disease and Cirrhosis	4	24	unknown
Intentional Self-Harm (suicide)	4	21	unknown

Sources: Kentucky Department for Public Health, Preliminary Data 2011



## Community Health Status Assessment

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

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

### Social and Mental Health

	Taylor County	Lake Cumberland District	Kentucky
Population without adequate social/emotional support	18.2%	21.9%	19.8%
Mean Travel Time to Work (age 16+) minutes	18.8	23.0	22.5
Poor or Fair Health*	24%	29%	22%
Number Physical Health Days **	5	5.3	6.1
Number Mental Health Days**	4.9	4.3	4.3
Child Abuse Neglect (number reported)	427	2,979	63,438
Suicide (number reported)	3	27	unknown

\*Percent of adults reporting poor or fair health. \*\*Average number in the past 30 days.  
Sources: CHR, 2011; Cabinet for Health and Family Service, Child Abuse Neglect Report by County, 2011; KY Vital Stats, 2011 Preliminary Data

## Forces of Change Assessment

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

The FOC Assessment was performed by community health stakeholders and volunteers. A brainstorming session was conducted on November 27th, 2012. Participants were charged with answering the following questions: “What is occurring or might occur that affects the health of our community or the local public health system?” and “What specific threats or opportunities are generated by these occurrences?” To address those questions, participants determined the economic, environmental, legal, political, social, technological, scientific, and ethical forces that impact how Taylor County’s public health system functions. Members then developed a list of potential opportunities and threats for each identified force.

Participant findings were compiled into the attached comprehensive matrix of key forces and their associated impacts upon the health of Taylor County.

A selection of the results is included below:

- **Increased Cost of Living**
- **Safe Roadways**
- **Resources for Recreational Activities**
- **Strong Law Enforcement**
- **Access to Healthcare**
- **Social Determinates of Health**
- **Technological Advances**
- **Research Opportunities**
- **Citizens Ethics**

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





<b>FORCE</b>	<b>THREATS POSED</b>	<b>OPPORTUNITIES CREATED</b>
<b>Economic</b>		
Employment	Lack of jobs, low paying jobs	
Increased cost of living	Increased food costs, less demand for leisure activities, high costs of community sports programs, health care and medication, less participation in activities, less home cooking/family meals	
University		Community contributions
Transportation	Elderly, less participation to community programs	Cost assistance for medical programs
<b>Environmental</b>		
Water	Water company not involved in community, does not promote fluoride programs	Fewer bottles and trash
Weather	Lack of knowledge about winter sports	
Resources	Lack of public physical activities, lack of family related events/opportunities, citizens lack funds for certain activities	Natural resources-Green River Lake, trails, parks, Clay Hill Forest, Tebbs Bend Nature Area, horseback riding, ATV's, Upward sports
Organic production	Lack of support	
Agriculture	Fewer farms and less acreage per farm	
Access to healthy foods	Lack of community gardens	Farmers Market, more organic foods
Roadways	Lack of driver knowledge	Traffic slowing measures on main street, law enforcement trained for increased bicycling
<b>Legal</b>		
Rehabilitation	Limited training from treatment to society, lack of coordinated efforts for transition, lack of resources	The Healing Place, need a women's substance abuse rehab facility and a juvenile facility
Law Enforcement	Weak consequences for illegal activity	More law enforcement, more options for retribution and community service, Drug Court, stronger truancy consequences for parents
Government Benefits		Drug screening for recipients, consequences for lack of responsibility
<b>Political</b>		
Laws	Legalized marijuana	HIPPA-confidentiality protected
School policies		24/7 Tobacco Free Schools, 21st Century-health initiatives required
National trends	Childhood obesity rates, school lunch initiative	Health promotion, local education regarding school lunch initiative
Local community leaders	Lack of inter-active planning, self-serving	Purchase of new sports complex, Trail Town initiative, Legislative designation of Homeplace on Green River
Healthcare	E.R. used as primary care provider, less access, increased co-pays per visit, insurance not as good, Healthcare Reform Act hard to read	More people are covered
Funding	Determines activities/initiatives	

<b>Social</b>		
Attitudes	Denial of problems, negative stigmas, unsafe roadways for pedestrians, focused on fast food options, entitlement	
Media	Faster paced living w/ no down time	Promote activities and events
Poverty	Lack of access to healthcare	
Aging society	Fixed income, disability, caregiving	
Families	Lack of participation, single parent homes, grandparents or other caregivers raising children instead of parents, working parents, fewer family meals	Pressure/accountability
Worksites	Extension office getting fewer requests for wellness programs, less money for wellness programs, not requirement for employees	Wellness programs slowly increasing, several worksites held programs in past, improved health
Migrant workers		
University		
Activities		Outdoor opportunities, hiking trails, hospital health fair
<b>Scientific</b>		
Research	Cooperative Extension under-utilized	
Urban myths	Medical misinformation	
<b>FORCE</b>	<b>THREATS POSED</b>	<b>OPPORTUNITIES CREATED</b>
<b>Technological</b>		
Medical	Electronic records	Electronic records, 24/7 access to nurse through insurance, local hospital with updated equipment, school health records, equipment at schools, PEP grants
Personal devices	Not enough physical activity, "BYOD" (Bring Your Own Device) - cost to students, distraction to students, ear buds-hearing loss, carpal tunnel, texting and driving, less sleep	Less back problems from carrying large text books, used for exercise and nutrition purposes, cost-effective
Protective measures		KASPER
Internet	Self-diagnosis, cyber-bullying	Nutrition info, food safety, healthy recipes
<b>Ethical</b>		
Attitudes	Entitlement, all work and no play, no desire to work, no desire for betterment, changing values	
Families	Morals and ethics are not taught at home, lack of parental responsibility, high rates of child abuse	Religion has a strong presence
Laws	Lack of enforcement for ethical issues, drugs, theft	
Community Involvement		Large volunteer base, numerous coalitions, cooperation among agencies, Christian university

## Community Themes and Strengths Assessment

Taylor County Wellness Coalition collaborated with Taylor Regional Hospital and the Taylor County Health Department to conduct a community health needs survey. Representatives from the mentioned organizations prepared the survey instrument. All three organizations worked together to publicize and distribute surveys throughout the community. The survey was launched on June 1, 2012, and was closed on September 30, 2012.

The broad survey was intended to gather information regarding overall health of the community. The results of this survey yield information on different health and community factors. Areas surveyed include demographics and socioeconomic characteristics, behavioral risk factors, health conditions and access to health resources.

There were 1,555 surveys completed. Socio-demographic characteristics such as age, education, income and employment status were fairly comparable to the most recent census data. Over 80 percent of the survey respondents were female which is more than the 50 percent of the population that is female in the community. Additionally, representation of those individuals 66 and older is less than that reported in the latest census data.

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

Answer Options	%	Respondents
Cancers	66.2%	1,035
Alcohol/Drugs	49.1%	767
Obesity (children/adults)	32.9%	515

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

Answer Options	%	Respondents
Alcohol/Drug Use	86.9%	1,358
Obesity	55.5%	868
Tobacco Use	51.0%	797

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

Answer Options	%	Respondents
Good Place to Raise Children	47.5%	742
Low Crime/Safe Neighborhood	51.1%	799
Good Jobs/Healthy Economy	47.2%	738

*See Taylor County Community Health Surveys on pages 32 - 34 of this booklet.*

## Local Public Health System Assessment

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

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

accomplishment and provide a level to which all public health systems can aspire to achieve. The standards are intended to support a process of quality improvement. System partners should use the assessment process and the performance standards results as a guide for learning about public health activities throughout the system and determining how to make improvements.

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

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

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

EPHS		SCORE
1	Monitor Health Status To Identify Community Health Problems	47
2	Diagnose And Investigate Health Problems and Health Hazards	85
3	Inform, Educate, And Empower People about Health Issues	87
4	Mobilize Community Partnerships to Identify and Solve Health Problems	51
5	Develop Policies and Plans that Support Individual and Community Health Efforts	64
6	Enforce Laws and Regulations that Protect Health and Ensure Safety	74
7	Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	45
8	Assure a Competent Public and Personal Health Care Workforce	70
9	Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services	52
10	Research for New Insights and Innovative Solutions to Health Problems	71
<b>OVERALL SCORE</b>		<b>65</b>

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

# APPENDIX - Community Health Data Collection

POPULATION DEMOGRAPHICS	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Total Population <sup>1</sup>	18,656	15,995	10,272	6,819	11,258	18,306	63,063	17,565	24,512	20,813	206,296	4,339,367
Persons under 18 years of age <sup>1</sup>	22.2%	6.4%	23.6%	22.4%	22.4%	22.3%	13.5%	22.1%	22.2%	22.3%	18.4%	86.7%
Persons 65 years and older <sup>1</sup>	15.6%	16.6%	16.8%	18.8%	17.6%	12.8%	23.4%	17.6%	16.1%	16.6%	18.4%	13.3%
Female <sup>1</sup>	50.6%	51.2%	50.1%	51.0%	50.6%	45.7%	51.1%	48.9%	51.6%	50.5%	50.3%	51.0%
Male <sup>1</sup>	49.4%	48.8%	49.9%	49.0%	49.4%	54.2%	48.9%	51.1%	48.4%	49.5%	49.7%	49.0%
White <sup>1</sup>	95.5%	97.9%	97.5%	95.7%	96.0%	91.4%	96.0%	96.5%	92.7%	95.2%	95.3%	87.8%
Black <sup>1</sup>	2.8%	0.7%	0.5%	2.8%	2.2%	5.5%	1.0%	0.5%	5.0%	1.5%	2.1%	7.8%
American Indian and Alaska Native <sup>1</sup>	0.2%	0.3%	0.2%	0.1%	0.4%	0.7%	0.2%	0.3%	0.1%	0.2%	0.2%	7.8%
Hispanic or Latin origin <sup>1</sup>	1.9%	2.6%	2.4%	1.0%	1.6%	2.1%	2.0%	3.3%	1.8%	2.9%	2.2%	0.7%
Reporting two or more races <sup>1</sup>	1.1%	0.8%	1.2%	1.3%	1.3%	0.8%	1.0%	1.0%	1.5%	1.2%	1.1%	1.7%
Percentage of population with a college degree or higher level of education <sup>1</sup>	13.3%	8.2%	7.5%	8.7%	68.2%	7.6%	14.6%	12.7%	14.5%	9.6%	16.5%	20.6%
<b>School Enrollment</b>												
Total Enrollment <sup>2</sup>	3,475	3,244	1,333	840	1,676	3,078	7,670	2,565	3,958	3,565	31,404	675,530
Number of Head Start Students <sup>2</sup>	72	106	64	60	80	60	132	52	112	96	834	14,665
Number of Students in Preschool-Fifth Grade <sup>2</sup>	1,466	1,284	120	455	758	1,834	3,500	136	1,709	1,740	13,002	unknown
Number of Students Sixth - Eighth Grade <sup>2</sup>	1,085	1,072	165	230	385	409	1,850	279	838	825	7,218	unknown
Number of Students Ninth - Twelfth grade <sup>2</sup>	779	703	1,048	310	526	835	2,320	2,150	1,091	1,000	10,602	unknown
Number of Home School Students (P-12) <sup>2</sup>	145	185	unknown	unknown	68	unknown	unknown	unknown	19	unknown	unknown	16,493*
Number of Students Enrolled in Private/Amish/Christian Schools (P-12) <sup>2,3</sup>	40	148	0	0	0	0	568	0	109	0	865	16,493*
High School Graduation Rate <sup>4</sup>	86%	81%	90%	83%	98%	85%	86%	96%	90%	91%	79%	78%
College/University** Enrollment <sup>5</sup>	1,560	0	0	0	0	0	2,245	0	3,607	0	7,412	unknown

\*Home school, Christian, Amish, and Private numbers are combined on state level.  
 \*\*County specific home site

# APPENDIX - Community Health Data Collection

SOCIOECONOMIC CHARACTERISTICS	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Number of housing units <sup>1</sup>	8,568	7,477	5,334	3,698	5,307	7,500	31,928	10,093	10,942	5,871	96,718	1,932,599
Home ownership rate <sup>1</sup>	74.8%	85.1%	75.1%	75.1%	74.5%	73.6%	72.5%	68.8%	68.8%	72.5%	73.4%	69.9%
Percentage of families living below poverty level <sup>1</sup>	24%	27.8%	25.4%	26.3%	21.6%	36.6%	21.5%	27.8%	22.8%	28.3%	26.2%	18.1%
Median household income <sup>1</sup>	\$30,177	\$26,621	\$27,654	\$29,528	\$31,423	\$24,681	\$33,282	\$29,470	\$35,962	\$26,683	\$29,548	\$42,248
Veterans <sup>1</sup>	1,321	1,234	660	528	913	1,218	5,220	1,445	1,736	1,315	15,590	323,823
Unemployment rate <sup>4</sup>	11.0%	10.7%	9.7%	12.9%	12.0%	14.1%	10.6%	12.3%	10.8%	13.7%	11.8%	10.5%
Percentage Children in single parent families <sup>4</sup>	27.0%	23.0%	30.0%	25.0%	27.0%	32.0%	32.0%	33.0%	41.0%	28.0%	30.8%	32.0%
Percentage of children living below poverty level <sup>4</sup>	33%	37%	38%	36%	30%	51%	32%	33%	26%	37%	34%	23%
Number of childcare facilities (certified and licensed) <sup>6</sup>	7	7	7	6	5	6	46	15	12	20	134	1,815
Number of regulated childcare providers <sup>6</sup>	6	7	9	7	6	6	46	15	12	20	134	2,815
Children in regulated childcare (number) <sup>6</sup>	430	330	230	200	140	230	2,440	520	640	400	5,560	182,350
Number of childcare facilities receiving CCAP services <sup>6</sup>	310	138	12	12	136	139	670	12	7	307	1,743	unknown
Star rated childcare facilities <sup>6</sup>	6	7	4	3	3	5	20	10	7	7	75	1,065
Homeless persons <sup>7</sup>	9	10	0	3	3	3	139	5	33	18	233	858
Percentage of adults without health insurance or underinsured <sup>8</sup>	19.0%	21.0%	17.0%	20.0%	24.0%	17.0%	17.0%	21.0%	15.0%	15.0%	17.9%	19.0%
Percentage of children without health insurance <sup>8</sup>	10.0%	12.0%	9.0%	20.0%	13.0%	9.0%	9.0%	11.0%	7.0%	8.0%	9.4%	10.9%
Number of Food Stamp Recipients <sup>9</sup>	1,724	1,952	1,423	874	1,132	3,186	6,418	2,314	2,547	2,789	24,359	unknown

# APPENDIX - Community Health Data Collection

SOCIAL AND MENTAL HEALTH	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Mean travel time to work (minutes) workers ages 16+ <sup>1</sup>	24.7	28.3	16.4	20.5	27.6	26.9	22.4	19.2	18.8	25.0	23.0	22.5
Population without adequate social and emotional support <sup>8</sup>	27.7%	21.0%	14.4%	17.8%	19.9%	30.0%	19.4%	26.3%	18.2%	24.0%	21.9%	19.8%
Number of mentally unhealthy days per month <sup>4</sup>	5.1	5.1	4.5	4.9	5.2	5.8	3.8	3.8	4.9	3.7	4.3	4.3
Number of physically unhealthy days per month <sup>4</sup>	5.7	6.4	5.5	5.9	5.7	7.8	5.3	4.7	5	3.7	5.3	6.1
Less than Good Health in Adults <sup>4</sup>	31%	30%	29%	28%	29%	43%	24%	24%	24%	28%	29%	22%
Number of parent volunteer hours in school system <sup>2</sup>	2,748	3,262	2,875	3,957	770	9,787	68,562	7,436	6,857	10,544	111,412	3,105,012
Number of drug related motor vehicle collisions resulting in death <sup>10</sup>	1	1	0	1	1	0	4	1	0	1	10	215
Number of drug related motor vehicle injuries (persons) <sup>10</sup>	13	9	1	0	0	4	17	2	5	0	51	983
Number of alcohol/drug poison deaths <sup>11</sup>	4	3	6	3	3	1	15	8	7	6	56	unknown
Number of suicide deaths <sup>11</sup>	3	1	2	4	1	0	10	3	3	0	27	unknown
Number of alcohol related motor vehicle collisions <sup>10</sup>	18	15	10	5	8	15	42	13	24	9	159	4,762
Number of alcohol related motor vehicle injuries (collisions) <sup>10</sup>	6	7	3	2	3	8	12	4	11	3	59	1,676
Number of alcohol related motor vehicle collisions resulting in death <sup>10</sup>	1	0	2	1	0	0	1	2	0	0	7	156
Number of alcohol related motor vehicle injuries (persons) <sup>10</sup>	11	10	6	4	3	16	17	5	17	3	92	2,489
Number of motor vehicle deaths, alcohol related (persons) <sup>10</sup>	7	0	3	1	0	0	1	2	0	0	8	167
Number of drug related motor vehicles collisions <sup>10</sup>	9	8	1	1	2	6	27	3	3	3	63	1,617
Number of drug related motor vehicle injuries (collisions) <sup>10</sup>	4	5	1	0	0	2	12	1	1	0	26	602
Number of motor vehicle deaths, drug related (persons) <sup>10</sup>	1	1	0	1	1	0	4	1	0	1	10	232
Child Abuse/Neglect (number reported) <sup>12</sup>	358	179	183	31	187	297	766	229	427	322	2,979	63,438
Percent of registered voters who vote in general election <sup>13</sup>	60.0%	58.0%	30.1%	40.6%	28.9%	18.4%	23.0%	33.8%	34.2%	26.0%	35.0%	28.6%

# APPENDIX - Community Health Data Collection

HEALTH RESOURCE AVAILABILITY	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Percentage of population enrolled in Medicaid <sup>8</sup>	28%	31%	43%	34%	24%	46%	29%	33%	25%	35%	32%	22%
Number of licensed dentists <sup>8</sup>	5	2	3	2	5	3	39	6	8	5	78	2,461
Number of licensed primary care physicians <sup>8</sup>	11	6	9	4	4	10	65	12	22	15	150	4,241
Number of general practioners <sup>8</sup>	1	0	1	0	2	2	20	1	1	1	29	116
Number of family practices <sup>8</sup>	5	4	4	4	1	8	26	9	8	8	77	1,547
Number of OB/GYN's <sup>8</sup>	1	0	2	0	0	0	8	0	4	0	15	493
Number of internal medicine specialists <sup>8</sup>	5	2	2	0	1	0	10	2	7	5	34	1,375
Number of peditricians <sup>8</sup>	0	0	0	0	0	0	8	0	2	1	11	710
Number of other speciality physicians <sup>8</sup>	2	1	6	0	3	2	79	6	18	6	123	5,874
Proportion of population with a regular source of primary care <sup>8</sup>	83%	76%	95%	94%	89%	84%	81%	80%	89%	89%	86%	82%
Primary Care Physician ratio <sup>8</sup>	1,791:1	5,467:1	1,901:1	2,254:1	2,883:1	3,557:1	1,102:1	1,571:1	1,427:1	3,445:1	unknown	1,232:1
Average expenditures per recipient for Medicaid beneficiaries <sup>8</sup>	\$5,184	\$3,893	\$3,941	\$5,294	\$5,101	\$4,327	\$7,305	\$4,291	\$4,332	\$3,788	\$5,161	\$4,444
Local Health Department full time staff <sup>14</sup>	18	16	9	10	8	24	48	23	16	24	231	unknown
Prevention Quality Indicators: Acute <sup>15</sup>	11	14	25	15	7	7	7	9	8	11	11	8
Prevention Quality Indicators: Chronic <sup>15</sup>	22	13	24	19	7	11	9	10	11	16	14	12
Number of Alzheimer centers <sup>15</sup>	0	0	0	0	0	0	1	0	1	1	1	unknown
Number of Veterans centers <sup>15</sup>	0	0	0	0	0	0	1	0	1	0	2	unknown
Number of Hospice services <sup>15</sup>	1	1	1	1	1	1	1	1	1	1	2	15
Number of patients Hospice served 2011 <sup>15</sup>	unknown	76	46	19	64	55	419	72	103	116	unknown	unknown
Number of home health agencies <sup>15</sup>	3	3	3	3	3	2	4	3	4	2	4	unknown
Number of nursing home facilities <sup>15</sup>	1	1	1	1	1	1	5	1	2	1	15	unknown
Number Substance Abuse Residence Treatment Centers <sup>16</sup>	0	0	0	0	0	0	1	0	1	0	2	unknown



# APPENDIX - Community Health Data Collection

BEHAVIOR RISK FACTOR	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Adult smoking (% of adults age 18+) <sup>4</sup>	32%	25%	23%	30%	29%	40%	29%	28%	30%	32%	30%	29%
Excessive drinking <sup>4</sup>	6%	6%	2%	3%	6%	10%	6%	7%	8%	6%	6%	11%
Drug arrests (number) <sup>17</sup>	10	9	26	13	2	51	113	5	80	25	334	38,020
Drug/Narcotic Offense (reported) <sup>17</sup>	258	135	17	36	87	64	617	144	210	216	1,784	35,665
Youth using smokeless tobacco in past 30 days <sup>18</sup>	26.0%	23.0%	11.7%	16%	13.0%	unknown	21.0%	unknown	13.3%	14.7%	11.1%	unknown
Youth smoking cigarettes in past 30 days <sup>18</sup>	37.0%	38.0%	12.5%	19.25%	17.25%	unknown	23.0%	unknown	23.5%	26.0%	19.7%	16.0%
Youth being drunk 1+ times in past 30 days <sup>18</sup>	19.0%	18.0%	8.75%	16.0%	21.75%	unknown	23.0	unknown	13.6%	7.0%	15.3%	15.1%
Youth using marijuana 1+ times in past 30 days <sup>18</sup>	11.0%	unknown	3.75%	6.25%	14.25%	unknown	10.0%	unknown	9.8%	unknown	8.13%	9.6%
Youth using inhalents, 1 - 5 times in past 30 days <sup>18</sup>	2.0%	unknown	0.5%	1.5%	6.5%	unknown	3.0%	unknown	3.0%	unknown	2.9%	2.7%
Youth using Meth in past 30 days <sup>18</sup>	unknown	unknown	0%	0%	1.75%	unknown	unknown	unknown	0.1%	unknown	0.38%	0.4%
Youth binge drinking (5+ drinks in past 2 weeks) <sup>18</sup>	unknown	unknown	5.25%	14.5%	0	unknown	unknown	unknown	10.4%	unknown	12.0%	11.8%
Youth using prescription drugs (narcotics) in past 30 days without a doctor telling them to <sup>18</sup>	unknown	unknown	0.25%	2.5%	10.0%	unknown	unknown	unknown	3.9%	unknown	3.8%	4.33%
Youth using over-the-counter drugs <sup>18</sup>	unknown	unknown	0.5%	1.0%	3.75%	unknown	unknown	unknown	3.3%	unknown	5.3%	5.7%
Youth say sort of/very easy getting alcohol <sup>18</sup>	40.0%	unknown	unknown	unknown	2.25%	unknown	57.0%	unknown	46.8%	56.0%	48.2%	46.8%
Youth say sort of/very easy getting cigarettes <sup>18</sup>	64.0%	76.0%	unknown	unknown	22.25%	unknown	70.0%	unknown	58.5%	75.0	60.9%	55.8%
Smoke free restaurants <sup>19</sup>	16	4	5	4	3	1	Somerset**	19	Campbell**	7	unknown	unknown
Prevalence of obesity - adults (BMI over 30) <sup>4</sup>	33%	35%	31%	32%	30%	31%	30%	32%	31%	31%	32%	31%
Percentage of adults that eat 5+ fruit & vegetables <sup>8</sup>	12%	11.8%	23.7%	28.8%	19.4%	16.2%	18.5%	10.1%	20.6%	18.3%	18%	unknown
Prevalence of diabetes - adults percent <sup>8</sup>	12%	13%	10.9%	10.9%	10.0%	12.2%	12.2%	10.9%	7%	11.3%	11%	8%
Percentage of adults missing six or more teeth <sup>8</sup>	32%	35%	33%	44%	30%	37%	29%	37%	33%	28%	34%	unknown

<sup>4</sup> Excessive drinking is binge plus heavy drinking.  
<sup>\*\*</sup> Somerset and Campbellville Cities are Smokefree.

# APPENDIX - Community Health Data Collection

BEHAVIOR PROTECTIVE FACTOR	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Number of motor vehicle total crashes <sup>20</sup>	348	230	200	114	177	249	1,725	327	711	327	1,816	unknown
Number of drownings <sup>21</sup>	0	0	0	0	1	*	*	*	0	0	*	431
Number of firearm accidents/ED visits <sup>21</sup>	*	0	*	0	0	*	8	*	*	0	20	1,680
Number of ATV accidents/ED visits <sup>21</sup>	47	14	23	14	5	7	19	40	8	8	185	unknown
Number of water accidents <sup>21</sup>	*	0	0	0	*	0	0	*	0	0	*	unknown
Number of accidental poisonings/ED visits <sup>21**</sup>	8	*	5	*	26	*	57	12	6	9	30	48,207

MATERNAL & CHILD HEALTH	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Number of infant deaths (residents) <sup>11</sup>	2	2	1	0	1	1	4	2	2	0	17	6.7
Number of low birthweight babies (< 2,500 grams) <sup>11</sup>	15	24	8	10	11	24	66	23	32	16	229	unknown
Number of neonatal deaths <sup>11</sup>	2	1	0	0	0	0	1	2	1	0	7	unknown
Teen birth rate (15-19 yr. olds) <sup>11</sup>	26.2	66.9	58.3	36.9	47.6	84.3	60.3	84.5	48	75.3	58.8	43.7
Percent of repeat births to teens (15 - 19 yr. olds) <sup>11</sup>	0%	18.18%	44.44%	50%	18.55%	28.57%	19.44%	13.95%	23.81%	25%	24.21%	17.84%

CRIMES	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Violent crime rate per 100,000 population <sup>17</sup>	80	0	0	42	39	52	135	94	180	100	722	288
Per capita rate of fraud offenses <sup>17</sup>	29	7	2	0	7	21	74	7	76	22	245	7,100
Per capita rate of homicide offenses <sup>17</sup>	2	0	2	1	0	1	2	2	3	1	14	223
Per capita rate of prostitution <sup>17</sup>	1	0	0	0	0	0	0	1	2	0	4	112

A crime is committed every (days, hrs, min) <sup>17</sup>	0.14.18	0.21.31	7.18.0	3.15.0	0.35.54	0.18.35	0.02.35	0.15.41	0.05.30	0.13.20	unknown	0.02.38
---	---------	---------	--------	--------	---------	---------	---------	---------	---------	---------	---------	---------

<sup>\*\*</sup>Accidental Poison Death/ED Visits are not related to drugs or alcohol.  
<sup>\*</sup>At least one but less than five.

# APPENDIX - Community Health Data Collection

NOTE: Age-adjusted incidence rates or crude death rates per 100,000 population for U.S. standard population

DEATH, ILLNESS & INJURY	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Cancer incidence rate (all types) <sup>22</sup>	473.1	648.1	590.2	414.3	624.9	523.2	533.3	507.5	502.3	547.1	535.9	527.2
Cancer death rates (all types) <sup>22</sup>	131.9	219.6	211.0	208.0	190.9	213.6	219.30	165.8	250.3	256.1	211.9	211.9
Female breast cancer incidence <sup>22</sup>	96.5	159.9	183.5	48.9	173.5	161.8	102.7	103.4	109.0	96.3	116.6	121.2
Female breast cancer death rate <sup>22</sup>	15.8	17.5	0.0	43.3	0.0	38.6	5.5	6.6	33.5	58.2	18.9	24.2
Lung cancer incidence <sup>22</sup>	106.8	129.4	124.3	105.1	105.9	98.3	101.1	81.7	86.0	76.4	99.8	99.5
Lung cancer death rate <sup>22</sup>	34.5	72.5	54.1	39.3	53.5	88.2	65.4	59.3	75.8	83.2	65.4	74.2
Cervical/uteri cancer incidence <sup>22</sup>	0.0	36.3	0.0	0.0	0.0	21.4	11.6	13.1	8.3	0.0	10.5	9.0
Cervical/uteri cancer death rate <sup>22</sup>	0.0	9.5	0.0	0.0	10.6	23.4	4.7	6.6	0.0	8.0	6.1	3.1
Colorectal cancer incidence <sup>22</sup>	23.2	87.7	29.0	39.0	51.3	46.5	55.0	60.3	35.0	49.2	49.5	55.3
Colorectal cancer rate <sup>22</sup>	0.0	14.8	15.3	10.4	12.8	16.8	22.1	4.7	44.9	21.6	19.0	20.5
Cerebrovascular disease/stroke death rate <sup>22</sup>	40.1	37.9	14.7	18.0	52.4	16.1	48.2	50.7	61.0	48.3	43.7	47.2
Heart disease death rate <sup>22</sup>	244.6	225.9	372.7	307.9	268.5	250.4	224.7	174.3	157.3	282.2	233.9	218.2
<b>COMMUNICABLE DISEASES</b>	<b>Adair</b>	<b>Casey</b>	<b>Clinton</b>	<b>Cumber.</b>	<b>Green</b>	<b>McCreary</b>	<b>Pulaski</b>	<b>Russell</b>	<b>Taylor</b>	<b>Wayne</b>	<b>District</b>	<b>KY</b>
Tuberculosis (rate per 100,000 pop.) <sup>22</sup>	0.0%	0.0%	21.3%	14.9%	8.7%	5.6%	0.0%	5.8%	0.0%	0.0%	3.0%	2.1%
AIDS (Number of people living with) <sup>22</sup>	6	7	7	4	6	8	44	8	13	7	111	7,750
Hepatitis A (rate per 100,000 pop.) <sup>22</sup>	0.0	0.0	0.0	0.0	8.8	0.0	0.0	0.0	4.08	0.0	.96	.28
Hepatitis B (rate per 100,000 pop.) <sup>22</sup>	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	4.8	4.8	.96	2.16
Hepatitis C (rate per 100,000 pop.) <sup>22</sup>	0.0	0.0	0.0	14.59	0.0	0.0	0.0	0.0	0.0	14.41	1.93	1.48
Pertussis (rate per 100,000 pop.) <sup>22</sup>	26.80	25.07	0.0	0.0	17.77	0.0	1.59	0.0	8.16	14.41	15.92	10.5
Salmonellosis (rate per 100,000 pop.) <sup>22</sup>	5.36	12.54	29.21	43.76	53.30	5.46	15.86	11.39	8.16	14.41	15.92	10.5
Number of Syphilis primary cases <sup>23</sup>	1	0	0	0	0	1	0	0	3	0	5	335
Number of Gonorrhea cases <sup>23</sup>	2	2	1	1	1	0	9	1	14	1	32	4,521
Number of Chlamydia cases <sup>23</sup>	43	18	10	10	39	39	112	32	104	39	446	16,631
Number of local health department HPV cases <sup>22</sup>	3	5	3	2	3	8	14	4	5	9	56	unknown

# APPENDIX - Community Health Data Collection

ENVIRONMENTAL	Adair	Casey	Clinton	Cumber.	Green	McCreary	Pulaski	Russell	Taylor	Wayne	District	KY
Access to recreational facilities**	6	6	11	0	9	0	10	6	21	5	7	8
Access to healthy food**	40%	33%	50%	50%	50%	50%	75%	100%	50%	100%	60%	44%
WIC - Authorized Food Store Access <sup>24†</sup>	26.76	50.29	29.41	43.91	26.71	71.10	25.13	22.71	56.61	19.08	37.17	24.06
Percent of Low Income w/Low Food Access <sup>24</sup>	2.95%	3.62%	1.02%	1.25%	3.78%	3.47%	6.19%	1.09%	1.97%	8.48%	3.38%	5.11%
Grocery Store Access <sup>25†</sup>	21.44	56.44	19.47	29.17	17.77	21.85	28.54	22.77	28.56	19.22	26.52	19.22
Percent of adults (age 20+) who report no leisure physical activity <sup>1</sup>	33%	37%	35%	35%	36%	34%	32%	36%	26%	39%	34%	30%
Rate of recreational facilities per 100,000 population <sup>4</sup>	6	6	11	0	0	0	7	6	20	unknown	unknown	unknown
Limited access to healthy food (% of low-income population who do not live close to a grocery store) <sup>4</sup>	4%	5%	1%	1%	4%	2%	2%	2%	2%	2%	2.3%	unknown
Fast Food Restaurants (% of restaurants that are fast-food establishments) <sup>4</sup>	47%	36%	50%	33%	50%	69%	52%	46%	63%	68%	50.4%	unknown

\*Rate of all recreational facilities per 100,000 of population.  
 \*\*Percent of zip codes with healthy food outlets.  
 †Rate per 100,000 population.

## APPENDIX - REFERENCES

- 1 US Census Bureau - Quick Facts, November 2012
- 2 Kentucky Department of Education, 2012
- 3 Amish/Christian Schools: Adair, Pulaski and Taylor Counties 2012
- 4 County Health Rankings, 2011
- 5 Lindsay Wilson College, Campbellsville University and Somerset Community College Admissions Office, 2012
- 6 Kentucky Division of Regulated Childcare - 2011
- 7 Adanta - Point-in-Time Homeless Count, 2011
- 8 Kentucky Health Facts, 2011
- 9 Cabinet for Health and Family Services, HRFSS81 REPORT, 2011
- 10 Kentucky Traffic Collision Facts, 2011
- 11 Kentucky Vital Statistics, 2011
- 12 Cabinet for Health and Family Services, Child Abuse Neglect Report by County, 2011
- 13 Commonwealth of KY, State Boards of Elections 2011
- 14 Lake Cumberland District Health Department, Human Resource Department, 2011
- 15 Cabinet for Health and Family Service, Division of Certification of Need, 2011
- 16 Adanta Treatment Administration, 2012
- 17 Kentucky State Police, Crimes Report 2011
- 18 Kentucky Incentive Prevention Project, 2012
- 19 Lake Cumberland District Health Department, Health Promotion and Policy Department, 2011
- 20 Lake Cumberland Area Development District, Yearly Crash Totals Report, 2011
- 21 Kentucky Outpatient Hospital Claim File, (Provisional), Office of Health Policy, Kentucky Cabinet for Health and Family Services, 2011 KYDPH, Injury Fatalities from Selected Cause Report, 2011
- 22 Lake Cumberland District Health Department, Health Report Card, 2011
- 23 Kentucky Vital Statistics, Kentucky Department of Public Health, STD Morbidity - 2011
- 24 CDC, National Environmental Public Health Tracking Network, 2010
- 25 US Census Bureau, County Business Patterns, 2011

# APPENDIX

## Top Ten Leading Causes of Death

### Lake Cumberland District

Cause of Death	# Deaths
Malignant Neoplasms	569
Diseases of the Heart	564
Chronic Lower Respiratory Diseases	170
Accidents (Unintentional Injuries)	152
Cerebrovascular Diseases	101
Diabetes Mellitus	71
Alzheimer's Disease	68
Influenza and Pneumonia	53
Nephritis, Nephrotic Syndrome & Nephrosis	41
Septicemia/Chronic Liver Disease & Cirrhosis	24

### Adair County

Cause of Death	# Deaths
Malignant Neoplasms	55
Diseases of the Heart	44
Chronic Lower Respiratory Diseases	13
Cerebrovascular Diseases	10
Influenza and Pneumonia	10
Accidents (unintentional injuries)	7
Septicemia	5
Diabetes Mellitus	4
Nephritis, Nephrotic Syndrome & Nephrosis	4
Pneumonitis due to solids and liquids	3

### Casey County

Cause of Death	# Deaths
Malignant Neoplasms	48
Diseases of the Heart	38
Chronic Lower Respiratory Diseases	13
Accidents (Unintentional Injuries)	10
Nephritis, Nephrotic Syndrome & Nephrosis	9
Cerebrovascular Diseases	8
Influenza and Pneumonia	5
Septicemia	5
Alzheimer's Disease	4
Other Diseases of the Rerspiratory System	4

### Clinton County

Cause of Death	# Deaths
Diseases of the Heart	33
Malignant Neoplasms	32
Chronic Lower Respiratory Diseases	15
Accidents (unintentional injuries)	9
Cerebrovascular Diseases	5
Diabetes Mellitus	5
Nephritis, Nephrotic Syndrome & Nephrosis	5
Septicemia	3
Alzheimer's Disease	2
Influenza and Pneumonia	2

### Cumberland County

Cause of Death	# Deaths
Diseases of the Heart	34
Malignant Neoplasms	17
Accidents (unintentional injuries)	9
Chronic Lower Respiratory Diseases	8
Alzheimer's Disease	5
Nephritis, Nephrotic Syndrome & Nephrosis	4
Influenza and Pneumonia	3
Intentional Self Harm (suicide)	3
Cerebrovascular Diseases	2
Diabetes Mellitus	2

### Green County

Cause of Death	# Deaths
Diseases of the Heart	31
Malignant Neoplasms	22
Chronic Lower Respiratory Diseases	11
Cerebrovascular Diseases	7
Diabetes Mellitus	6
Accidents (unintentional injuries)	5
Alzheimer's Disease	5
Essential Hypertension & Hypertensive Renal	3
In Site, Benign and Uncertain Neoplasms	3
Nephritis, Nephrotic Syndrome & Nephrosis	3

### McCreary County

Cause of Death	# Deaths
Malignant Neoplasms	45
Diseases of the Heart	40
Chronic Lower Respiratory Diseases	16
Accidents (unintentional injuries)	11
Diabetes Mellitus	7
Cerebrovascular Diseases	5
Nephritis, Nephrotic Syndrome & Nephrosis	5
Influenza and Pneumonia	4
Chronic Liver Disease & Cirrhosis	3
Alzheimer's Disease	2

### Pulaski County

Cause of Death	# Deaths
Malignant Neoplasms	193
Diseases of the Heart	152
Chronic Lower Respiratory Diseases	48
Accidents (unintentional injuries)	43
Alzheimer's Disease	35
Cerebrovascular Diseases	30
Diabetes Mellitus	30
Influenza and Pneumonia	18
Chronic Liver Disease & Cirrhosis	13
Intentional Self Harm (suicide)	12

### Russell County

Cause of Death	# Deaths
Diseases of the Heart	64
Malignant Neoplasms	37
Accidents (Unintentional Injuries)	19
Chronic Lower Respiratory Diseases	13
Cerebrovascular Diseases	12
Alzheimer's Disease	7
Other Diseases of Respiratory System	6
Diabetes Mellitus	5
Septicemia	5
Influenza and Pneumonia	4

### Taylor County

Cause of Death	# Deaths
Malignant Neoplasms	64
Diseases of the Heart	56
Accidents (unintentional injuries)	20
Chronic Lower Respiratory Diseases	16
Cerebrovascular Diseases	14
Diabetes Mellitus	7
Influenza and Pneumonia	7
Alzheimer's Disease	4
Chronic Liver Disease & Cirrhosis	4
Intentional Self Harm (suicide)	4

### Wayne County

Cause of Death	# Deaths
Diseases of the Heart	72
Malignant Neoplasms	56
Accidents (unintentional injuries)	19
Chronic Lower Respiratory Diseases	17
Cerebrovascular Diseases	8
Nephritis, Nephrotic Syndrome & Nephrosis	7
Diabetes Mellitus	5
Alzheimer's Disease	4
Chronic Liver Disease & Cirrhosis	4
Pneumonitis due to solids and liquids	4

# Taylor County Community Health Survey

## Taylor County Community Health Assessment

1. Zip Code where you live

2. Zip Code where you work

3. Age

- 18-25  
 26-39  
 40-54  
 55-64  
 65 or older

4. Gender

- Male  
 Female

5. Ethnic Group

- African American/Black  
 Asian/Pacific Islander  
 Hispanic/Latino  
 Other (please specify)
- Native American  
 White/Caucasian

6. Language spoken at home

- English  
 Spanish  
 German  
 Chinese  
 Vietnamese  
 Other (please specify)

7. Are you satisfied with the quality of life in Taylor County?

- Yes  
 No

## Taylor County Community Health Assessment

13. What are the three most "risky behaviors" in Taylor County?

- Alcohol/drug use  
 Dropping out of school  
 No seatbelts/child safety seats  
 Not getting "shots" to prevent disease  
 Not using birth control  
 Other (please specify)
- Obesity  
 Racism  
 Tobacco use  
 Unsafe sex

14. How would you rate Taylor County as a "Healthy Community?"

- Very healthy  
 Healthy  
 Somewhat healthy  
 Unhealthy  
 Very unhealthy

15. How would you rate your personal health?

- Very healthy  
 Healthy  
 Somewhat healthy  
 Unhealthy  
 Very unhealthy

16. Have you seen a primary care doctor in the last 12 months?

- Yes  
 No

17. Have you used the Emergency Room in the past 12 months?

- 1-2 times  
 3-5 times  
 6 or more  
 None  
 Don't remember

## Taylor County Community Health Assessment

8. Is this a good county to raise children?

- Yes  
 No

9. Are you satisfied with the health care system in Taylor County?

- Yes  
 No

10. Is this a good community to grow old?

- Yes  
 No

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

- Good place to raise children  
 Low crime/safe neighborhood  
 Good school systems  
 Easy access to healthcare  
 Family/youth activities  
 Affordable housing  
 Other (please specify)
- Excellent race relations  
 Good jobs/healthy economy  
 Religious or spiritual values  
 Clean environment  
 Arts/cultural events  
 Recreational facilities

12. What do you think are the three most important "health problems" in Taylor County?

- Aging problems (e.g. arthritis, hearing/vision loss, etc.)  
 Alcohol/drugs  
 Cancers  
 Child abuse/neglect  
 Dental problems  
 Diabetes  
 Domestic Violence  
 Environmental issues  
 Other (please specify)
- Farming injuries  
 Firearm injuries  
 Heart disease/stroke  
 HIV/AIDS  
 Homicide  
 Infant death  
 Infectious diseases
- Mental health problems  
 Motor vehicle crashes  
 Obesity (children and adults)  
 Rape/sexual assault  
 Respiratory/lung disease  
 Sexually Transmitted Diseases/infections (STD's or STIs)  
 Suicide  
 Teenage pregnancy

## Taylor County Community Health Assessment

18. Have you used the Emergency Room in the past 12 months for a child in your care?

- 1-2 times  
 3-5 times  
 6 or more  
 None  
 Don't remember

19. When you need health services how do you get there?

- Personal vehicle  
 Hospital van  
 Walk  
 Share ride  
 Other (please specify)

20. Check the items below that you feel are a barrier to health care in Taylor County.

- Doctor office hours  
 Discrimination  
 Insurance (lack of)  
 Insurance (failure to accept)  
 Transportation  
 Health knowledge  
 Other (please specify)
- Stigma  
 Cost/expenses  
 Health beliefs  
 Culture/language  
 Lack of childcare  
 Unemployment

21. What preventative health services do you use?

- Vaccinations/shots  
 Colonoscopy  
 Yearly lab work  
 Family planning  
 Breast exam  
 Yearly physical  
 Other (please specify)
- Mammography  
 Pap smear  
 Prostate Exam  
 Skin exam  
 Educational programs  
 Support groups

# Taylor County Community Health Survey (cont.)

**Taylor County Community Health Assessment**

**22. If the following screenings were available which ones would you be interested in doing?**

- Prostate screening (PSA)
- Pap smear
- Stool for occult blood
- Participation in American Cancer Society study
- Mammogram
- Body Fat Analysis
- Health Risk Assessment

**23. The last time you visited Taylor Regional Hospital did you feel you received enough information/education to recover?**

Yes  
 No

**24. The last time you used another health care facility did you feel you received enough information/education to recover?**

Yes  
 No

**25. Which of the following do you use for recreation?**

- Campbellsville Baptist Church Community Life Center
- Campbellsville University
- Green River Lake State Park trails and other recreational facilities
- Green River Lake US Army Corps of Engineers trails and other recreational facilities
- Health Department classes
- Local 5K races and other competitive events
- Robert and Bernice Miller Park
- Taylor County Cooperative Extension Service classes
- Veterans Memorial Park

Other (please specify)

**26. Where do you go to find information on recreational opportunities in Taylor County?**

**Taylor County Community Health Assessment**

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

**Taylor County Community Health Assessment**

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

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

**28. What group needs the most help with access to health care in Taylor County?**

- Low-income families
- Immigrants/refugees
- Elderly
- Physically/mentally disabled
- Other (please specify)
- Minority groups (e.g.African American, Hispanic)
- Children/infants
- Young adults

**29. To improve the health of Taylor County children what can we do?**

- Increase dental health
- Mental/emotional health access
- Immunization services
- More exercise places
- Access to healthy foods
- Special health care needs
- Other (please specify)



# 2014 Community Health Assessment

## TAYLOR COUNTY

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

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



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



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



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