LAUREL COUNTY

2023-2026

COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)

Laurel County
Health in Motion
Coalition

CONTENTS

01.

Overview of Health in Motion Coalition and 2022 – 2023 CHA Process

02.

Steps in Strategic Planning for CHIP Health Priorities

03.

Implementation Plan

04.

Annual Updates of Data

2023 Laurel County Community Health Assessment

Conducted by the Laurel County Health in Motion Coalition

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.

The mission of the coalition is 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.

For more information about the coalition visit www.laurelcohealthdept.org/himc

Data Collection Completed April-November 2022

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

Strategic Planning for CHIP Completed March – June 2023

During 4 meetings from March-June 2023, the coalition conducted the strategic planning process to identify priorities, goals, and interventions for the Community Health Improvement Plan.

Steps in the Strategic Planning Process
1. Review results of Community Health Assessment
2. Review priorities of local hospitals that serve Laurel County (outside of coalition partner, Saint Joseph London)
3. Identify Cross-Cutting Themes within the Community Health Assessment
4. Choose prioritization criteria.
5. Conduct nominal voting technique to identify top three concerns.
6. Identify resources and gaps for each of the top priorities chosen.
7. Determine goals and interventions for each priority.

Summary of CHA Results

Secondary Data

Higher Rate(s) of
- Teen Births
- Children Living in Poverty
- Firearm Fatalities
- Physical Inactivity
- Lack of access to foods

Lower Rate(s) of
- Mammography screenings
- Flu Vaccines

Community Partner Assessment (LPHSA)

Lowest Scoring Areas:
1. Research / Innovations
2. Linking People to Health Services
3. Evaluation of Services

Community Survey

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

Top Things That Affect Health
1. Access to medical care
2. Community Infrastructure
3. Economy
4. Strong Family Relationships
5. Safe Neigborhoods

Top Health Concerns
1. Substance Abuse
2. Chronic Disease
3. Mental Health

Top Things that Negatively Impact Health
1. Substance and prescription drug abuse
2. Poverty
3. Unemployment
4. Crime
5. Pollution

Top Things that Positively Impact Health
1. More access to healthy choices (foods, activities, stores, etc.)
2. More Mental Health Services
3. More SUD prevention and treatment services
4. More money for community assistance programs
5. More jobs
6. More transportation services.

63% reported feeling that discrimination often or sometimes occurs.

23% reported being unable to pay for health care services

27% reported being worried about running out of food during the previous 3 months.

Forces of Change
- Changes in local gov't 2023
- Possible passage of medical marijuana bill
- Discontinuation of certain healthcare services
- Communicable Diseases
- Increase in use of IT
- Immunizations
- Natural/Manmade Disasters
- Fuel Prices
- Loss of Workforce
- Community Infrastructure

Local Hospital Priorities

Saint Joseph London
- Alcohol, Tobacco, & Drug Use
- Mental Health and Mental Disorders
- Weight Status, Physical Activity, and Nutrition

Baptist Health Corbin
- Obesity
- Cancer
- Cardiovascular Disease
- Mental Health and SUD
- Patient Transportation

Continue-Care Corbin
- High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles
- Access to Affordable Care and Reducing Health Disparities Among Specific Populations
- Access to Primary and Speciality Care Providers
- Community Infrastructure
- Access to Mental and Behavioral Health Care Services and Providers
- Access to Dental Care Services

KENTUCKY STATE PRIORITIES (SHIP)
- Substance Use Disorder
- Tobacco
- Obesity
- Adverse Childhood Experiences
- Integration to Health Access

Fabric Issues
(intertwined in each of the above)
- Data Collection & Analysis
- Health in All Policies
- Economic & Community Engagement/Development
- Enviornmental Health
- Mental Health

Cross Cutting Themes

	SECONDARY DATA	COMMUNITY SURVEY	FOCUS GROUPS/ INTERVIEWS	COMMUNTIY PARTNER ASSESSMENT	FORCES OF CHANGE	CHI SJL PRIORITY	BH CORBIN PRIORITY	CONTINUE CARE PRIORITY
3 POVERTY	X	X	X					
5 SUBSTANCE USE	X	X	X			X	X	
6 OBESITY	X	X	X			X	X	X
5 CHROINIC DISEASE	X	X	X				X	X
6 ACCESS TO CARE	X	X	X	X	X			X

Cross Cutting Themes

	SECONDARY DATA	COMMUNITY SURVEY	FOCUS GROUPS/ INTERVIEWS	COMMUNTIY PARTNER ASSESSMENT	FORCES OF CHANGE	CHI SJL PRIORITY	BH CORBIN PRIORITY	CONTINUE CARE PRIORITY
2 ACCESS TO FOODS AND OTHER HEALTHY CHOICES	X	X						
6 MENTAL HEALTH	X	X	X			X	X	X
3 COMMUNITY INFRASTRUCTURE		X			X			X
3 LOSS OF WORKFORCE/ UNEMPLOYMENT	X	X			X			
2 TRANPORTATION				X			X	

Prioritization Criteria

How big is the problem?

What is available related to the problem?
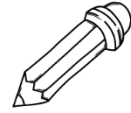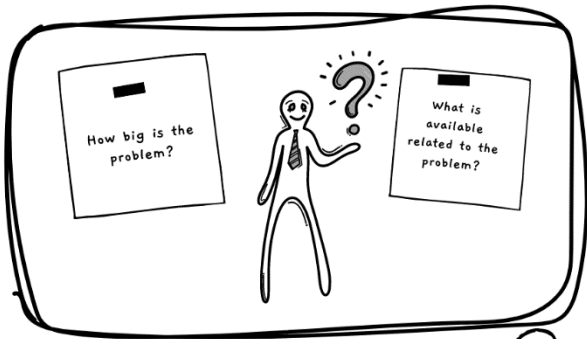
1. Size of Problem

2. Seriousness of Problem

3. Availiability of current interventions

4. Feasibility of Coalition to Implement

Size of Problem

Number or percentage of people affected by a health condition in a particular area (prevalence)

Seriousness of the Problem

The risk of death or disability from the problem.

Availability of Current Interventions

Are there evidence-based interventions or promising practices to prevent or control this health problem?

Can these interventions or practices be implemented easily?

Feasiblity to Implement

The possibility that a impactful intervention can be implemented by this coalition

STEP 5: Conduct Nominal Voting Technique to Identify Top Three Concerns

The coalition chose the top health priorities through a nominal voting technique. Each member chose their top three priorities by writing them on post-it notes. After the first round of voting, discussion was held and through this di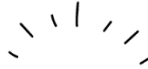scussion a consensus was reached to develop the CHIP Implementation with a focus on the following three priorities: Substance Use Disorder, Mental Health, and Obesity. The coalition recognized access to care, specifically transportation barriers as a fabric issue that impacts all three of the priority areas.

Prioritizing Health Problems

2023 Laurel County Community Health Improvement Plan

Health Problems	Round 1 Voting	Discussion after Round 1 vote	Final Priorities
SUD	12	Add Nicotine within SUD	SUD (include goals for -Nicotine -Maternal Child Health)
Tobacco (Nicotine)	9		
Mental Health	10	no change	Mental Health (goals for bullying and suicide px)
Obesity (Physical Activity & Nutrition)	9	no change	Obesity (Goals for Physical Activity and Nutrition)
Access to Foods	3	remove	na
Access to Healthcare	10	Add access to health care to transportation	Access to Care (Fabric issue addressed within all 3 priorities)
Transportation Barriers	10		

Resources
(Identifed 4/12/23 & 5/24/23)

What resources are available to assist with implementation of interventions for each priority area?
What, if any, current interventions are already available?

SUD (incl nicotine, infant mortality, prenatal care)

- Operation UNITE – vouchers/prevention & education
- HARM Reduction Program
- Laurel Co ASAP
- Community Mental Health Center (CRBH)
- Peer Support
- KY Moms
- QRT
- Human Trafficking Coalition
- Nurturing Child
- ROSC Plan of Safe Care
- Medication Lock Boxes
- Laurel Co Child Fatality Review Board
- Independent Tx Centers
- Drug Take Back & Med Drop Boxes
- KORE Treatment Access (Statewide)
- KCP – mega lung, events
- AHEC – continuing education, health related programs

Mental Health (incl bullying and suicide prevention)

- Counselors and Psychiatric Nurse practitioners
- Trillium Center – more focused on Substance Use
- School-based therapist
- ARH – program similar to Trillium Center
- National Suicide Px Hotline
- Turning Point Crisis Center for Children – Corbin
- CRBH – see children in home
- Program at Sue Bennett
- Bullying Programs in Schools
- LifeLines (Curriculum 5-12) and Sources of Strength (Peer Based- highschool elementary curriculum) – AVailable for Free to schools – from State
- State Suicide Px Coordinator – KYDPH QPR Trainings
- SAMHSA – materials for Free

Obesity (incl physical activity and nutrition)

- Park Network – walkability
- City of London/Grant
- Farmers Market Vouchers – WIC and Seniors
- Laurel HARVEST
- Community Garden Beds???
- Appalachia Grow – provides plants for gardens
- Community Supported Agriculture
- Availability of Kentucky Proud
- Foods
- PASS Program – Highschool students can work out at Planet Fitness
- Silver Sneakers – Powerhouse & Planet Fitness
- Church Gyms – offer memberships at affordable rate – may offer scholarship
- WIC Nutrition Program
- Managed Care Plan – cards/vouchers available to participants for healthy foods

Gaps

What gaps exist related to each priority area?

SUD (incl nicotine, infant mortality, and prenatal care)

- Transportation
- Cost of Treatment/Insurance Coverage
- Some facilities don't accept resources
- Lack of awareness of prevention /treatment/recovery resources
- Lack of after-care and case management post treatment
- Stigma
- Accountability/Valid Sober Living
- Timeframe to get access to services may be too long
- Lack of enforcement of vape products
- Lack of education on vape dangers
- Lack of access to students / sports to provide education
- Access to products (gummies, etc)
- Lack of education about safe disposal of medications

Mental Health (incl bullying and suicide prevention)

- Long waiting lists
- Limited space/in-patient specific for mental health and youth
- Cost of treatment/Insurance Coverage
- Transportation
- Limitations with Telehealth – access to device/internet
- Stigma (from general public as well as professionals)
- Lack of family involvement
- Lack of participation with some schools with putting suicide prevention program in place
- No universal screening tool
- Marketing of crisis line
- Overexposure/advertising on social media

Obesity (incl physical activity and nutrition)

- Transportation
- Limited Hours for Farmers Market
- In-home education
- Cost of fresh/healthy foods
- Lack of cooking knowledge
- Lack of marketing for both nutrition and physical activity
- Lack of insurance coverage for obesity as diagnosis (for things like home health, etc).

STEP 7: Determine Goals and Interventions for Each Priority

The Community Health Assessment was placed online, and a comment form allowed for the public to provide any comments regarding the findings.

Listings of evidence-based interventions were reviewed from a variety of resources including Healthy People 2030, SAMHSA, The Community Guide, and County Health Rankings What Works for Health. During the May 2023 coalition meeting, members identified a list of possible goals and interventions related to the three priority areas after consideration of current resources available, any gaps that may exist, public feedback provide.

This list was emailed out to the full coalition listserv following the May meeting. Partners on the listserv were provided the opportunity to suggest changes to the current list or additional interventions to consider. This was done through a google form link that was emailed out along with the list created by the coalition.

During the June 2023 coalition meeting, members developed the final list of goals and objectives that are found on the following pages within the CHIP Implementation Plan.

2023-2026 Community Health Improvement Plan (CHIP)

Implementation Plan

HEALTH PRIORITY
SUBSTANCE USE DISORDER

Goal 1.1: By December 2026, overdose rates within Laurel County will decrease by 15%

Intervention		Lead Organization(s)
1.1.1	Medication Lock Box/Bag Distribution	ASAP, RPC, LCHD
1.1.2	Provide Education on Safe Disposal of Medications	ASAP, RPC, UNITE, LCHD
1.1.3	Deterra Disposal Pouch Distribution	RPC
1.1.4	Drug Take Back Events	ASAP
1.1.5	Naloxone Trainings	ASAP, RPC
1.1.6	Quick Response Team	CRBH
1.1.7	Explore Development of Opiate Overdose Response Team	LCHD, ASAP, UNITE

Goal 1.2: By December 2026, rates of youth substance use will decrease by 10%

Intervention		Lead Organization(s)
1.2.1	Education and Awareness on Vaping and Nicotine Use	ASAP, LCHD
1.2.2	Conduct Media Campaign during Tobacco Prevention Month – include Vaping/Nicotine Use	LCHD
1.2.3	I Can End the Trend Program – conducted by UK	ASAP, Laurel Co Schools
1.2.4	Inform Schools of Too Good for Drugs Curriculum	RPC
1.2.5*	Support the inclusion of vaping/e-cigarettes in London City's Tobacco Ordinance	LCHD, ASAP, SJL

Goal 1.3: By December 2026, increase knowledge/access of substance use disorder resources.

	Intervention	Lead Organization(s)
1.3.1	Create and maintain Electronic Resource Guide	*TBD*
1.3.2	Professional Development Trainings	LCHD, RPC, ASAP

Goal 1.44: By December 2026, decrease Infant Mortality Rates by 20%

	Intervention	Lead Organization(s)
1.4.1	Cribs for Kids Program	LCHD, SJL
1.4.2	Safe Sleep Education	LCHD, SJL
1.4.3	Child Fatality Review Team	LCHD

HEALTH PRIORITY
MENTAL HEALTH

Goal 2.1: Decrease percentage of poor mental health days reported by 10%

	Intervention	Lead Organization(s)
2.1.1	NAMI Chapter	SJL
2.1.2	Create and Maintain Online Resource Guide (same as 1.3.1)	LCHD
2.1.3	Mental Health Social Media Campaigns	*TBD*
2.1.4	Mental Health First Aid Trainings	ROSC
2.1.5*	Support policies to increase trauma-informed care within school setting	RPC, RIAC
2.1.6*	Support policies to increase access to mental health counselor for students	RPC, RIAC

Goal 2.2: By December 2026, decrease suicide rates by 15%

	Intervention	Lead Organization(s)
2.2.1	Integrate Coping Skills into SUD Curriculums	ASAP
2.2.2	Eddie the Eagle Gun Violence Program	SJL
2.2.3	QPR (Question, Persuade, Refer) Trainings	RPC, ROSC
2.2.4	Promote Evidence-based Suicide Prevention Programs within Schools	RPC
2.2.5*	Support policies that protect the mental and physical health of LGBTQ+ students	Full Coalition

HEALTH PRIORITY
OBESITY

Goal 3.1: By December 2026, decrease food insecurity rates by 5%

	Intervention	Lead Organization(s)
3.1.1	WIC Program	LCHD
3.1.2	WIC Farmers Market Program	LCHD
3.1.3	Senior Farmers Market Program	Laurel Co Extension
3.1.4	Laurel HARVEST Program	LCHD, Laurel Co Extension
3.1.5	Meal Delivery Programs	CVADD, OPAC
3.1.6	CCC (Community Cooperative Care) Meal Program	CCC
3.1.7	Create and Manage Coalition Social Media Account(s)	*TBD*
3.1.8	Social Media Campaigns (Healthy Eating)	*TBD*
3.1.9*	Support policies that improve school nutrition standards	Full Coalition

Goal 3.2: By December 2026, decrease physical inactivity rates by 5%

	Intervention	Lead Organization(s)
3.2.1	Affordable Access to Physical Activity Equipment	OPAC, Laurel Co Public Library
3.2.2	Promotion of Public Parks	LCHD, City of London
3.2.3	Community Walking Programs	LCHD, SJL, Laurel Co Extension Office
3.2.3*	Support policies that strengthen school physical education requirements	Full Coalition

Goal 3.3: By December 2026, decrease poor physical health days by 10%

	Intervention	Lead Organization(s)
3.3.1	Affordable Health and Fitness Programs	OPAC, LCHD
3.3.2	Education Programs – Healthy Behaviors and Chronic Disease	LCHD, Laurel Co Extension

At the time of publication, a plan to implement interventions related to the use of social media was under development, therefore lead organizations are to be determined.

REPORTING PROGRESS

Progress is reported electronically by coalition members.

Workgroups that focus on each priority are meet at least once between quarterly coalition meetings to discuss and report progress toward goals and interventions.

Progress is available for public viewing by visiting www.laurelcohealthdept.org/himc and is updated quarterly.

Health indicators (Appendix I) for goals are reviewed annually to determine progress toward each goal set.

Appendix I: Monitoring Health Indicators Related to CHIP Goals					
Indicator	**2022**	**2023**	**2024**	**2025**	**Data Source**
Overdose Death Rates	23	NA			Overdose Fatality Report – KY Office of Drug Control Policy. Data is always a year behind
Youth Substance Use Rates	See table on following page				KIP Survey (use regional data report since Laurel Co Schools do not participate)
Infant Mortality Rates	8	8			(per 1,000 live births) County Health Rankings
Poor Mental Health Days Reported	5.9	6.0			County Health Rankings
Suicide Rates	17	NA			County Health Rankings (per 100,000 population)
Obesity Rates	36%	40%			County Health Rankings
Food Insecurity Rates	17%	16%			County Health Rankings
Physical Inactivity Rates	32%	34%			County Health Rankings
Poor Physical Health Days Reported	5.6	4.9			County Health Rankings
Poor or Fair Health	27	NA			County Health Rankings

Appendix I: Monitoring Health Indicators Related to CHIP Goals					
*Youth Substance Use Data Indicators					
Indicator	**2022**	**2023**	**2024**	**2025**	**Data Source**
Alcohol Use	11.6%				KIP State and Regional Data Report – 10th Graders
Binge Drinking	6.3%				
Cigarettes	8.0%				
Smokeless Tobacco	8.9%				(Cumberland Valley Region Data is used, however Laurel Co Schools do not participate in the survey).
Vaping	23.7%				
Cannabis	7.8%				
Synthetic Marijuana	1.1%				
Narcotics/Prescription Drugs	1.4%				Data is 1 year behind. For example, the 2022 Data Report uses 2021 Rates.
Painkillers	1.0%				
Over the Counter Drugs	2.1%				
Inhalants	2.0%				
Drunk or High at School	6.9%				

REFERENCES

Kentucky Injury Prevention and Research Center. (2023). 2022 Kentucky
  Overdose Fatality Report. In https://odcp.ky.gov/Pages/Reports.aspx.
  Kentucky Office of Drug Control Policy. Retrieved June 1, 2023, from
  https://odcp.ky.gov/Reports/2022%20Overdose%20Fatality%20Report%20up
  dated.pdf

Laurel County Community Health Assessment, conducted by the Laurel
  County Health in Motion Coalition, 2022-2023.

Office of Disease Prevention and Health Promotion (n.d.). Tools for Action.
  Healthy People 2030. Retrieved May 1, 2023, from
  https://health.gov/healthypeople/tools-action

University of Wisconsin Population Health Institute. County Health Rankings &
  Roadmaps 2023. www.countyhealthrankings.org.

U.S. Department of Health and Human Services (n.d.). Evidence-Based
  Practices Resource Center. Substance Abuse and Mental Health Services
  Administration. Retrieved May 1, 2023, from
  https://www.samhsa.gov/resource-search/ebp

What Works for Health. County Health Rankings. Retrieved May 1, 2023, from
  https://www.countyhealthrankings.org/

What Works Fact Sheets. The Guide to Community Preventive Services.
  Retrieved May 1, 2023, from
  https://www.thecommunityguide.org/pages/what-works-fact-sheets.html