

COMMUNITY HEALTH PROFILE

and

COMMUNITY HEALTH IMPROVEMENT PLAN

Lawrence County

&

City of Ironton

Ohio

May, 2018



Public Health
Prevent. Promote. Protect.

Lawrence County Health Department

Adopted on _____

Revised on _____

Signature Page

This plan has been approved and adopted by the following individuals

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Project Funding:

Funded by a grant from the Ohio Department of Health



TABLE OF CONTENTS

Snapshot of Lawrence County	1
Community health profile	3
Community Themes and Strengths	5
Local Public Health System Assessment and Asset Map	7
Forces of Change	9
Critical Health Issues	11
Substance Abuse	12
Obesity and Related Health Issues	13
Social Determinants of Health	14
Environmental Health	15
Access to Care	17
Community Health Improvement Process	19
Health Equity	20
Strategies	20
The Community Health Improvement Plan	21
Summary	27
Sources	28
Appendix: Community Survey	31

List of Tables

Table 1. Local Community Health Team	2
Table 2. Related Community Health Documents	3
Table 3. Forces of Change	10
Table 4. Comparison of Community Health Priorities	11
Table 5. Substance Abuse Indicators	12
Table 6. Diabetes Indicators and Risk Factors	13
Table 7. Demographic Indicators	15
Table 8. Environmental Health Indicators	16
Table 9. Indicators Related to Access to Care	17

List of Figures

Figure 1. The Appalachian Region of the United States	1
Figure 2. The Community Health Assessment Model	4
Figure 3. Community Perceptions	6
Figure 4. Vision for the Community's Future	7
Figure 5. Local Public Health System	8
Figure 6. Asset Map Corresponding to Essential Services	8
Figure 7. Drug Overdose Death Rate per 100,000	9
Figure 8. Percent Diagnosed with Diabetes	9
Figure 9. Most Important Health Issue	19
Figure 10a. Least Healthy Places in County	20
Figure 10b. Lawrence County Less Healthy than State	20
Figure 11. Support for Strategies	21

List of Acronyms

ARC	Appalachian Regional Commission
ARHI	Appalachian Rural Health Institute
CHIP	Community Health Improvement Plan
CHNA	Community Health Needs Assessment
HCHC	Health Communities/Health Communities Coalition
ICHHD	Ironton City Health Department
ILCAO	Ironton/Lawrence Community Action Organization
KDMC	Kings Daughters Medical Center
LC/IC	Lawrence County/Ironton City
LCHD	Lawrence County Health Department
LCHT	Local Community Health Team
MAPP	Mobilizing for Action Through Planning and Partnerships
ODH	Ohio Department of Health
OLBH	Ohio Local Boards of Health
RWJF	Robert Wood Johnson Foundation



A SNAPSHOT OF LAWRENCE COUNTY AND IRONTON, OHIO

Lawrence County, in southern Ohio is part of the region designated “Appalachia” by the federal government (Figure 1). This means the county is eligible for specific funding opportunities currently managed by the Appalachian Regional Commission (ARC). Appalachia was first identified in 1965 as 360 counties bordering the Appalachian Mountains and sharing similar socioeconomic conditions. The region has grown geographically, so that in 2017, there are 420 counties in 13 states part of this federally-designated area. Although identifying Appalachia only on the basis of geography dismisses the importance of culture, history, and numerous other social and environmental factors, it does allow for comparisons both within and outside of the region. There are documented health, environmental, and economic disparities that distinguish Appalachia from the rest of the country. These include high rates of obesity and diabetes, increasing problems with drug abuse, environmental contamination, and high unemployment rates.

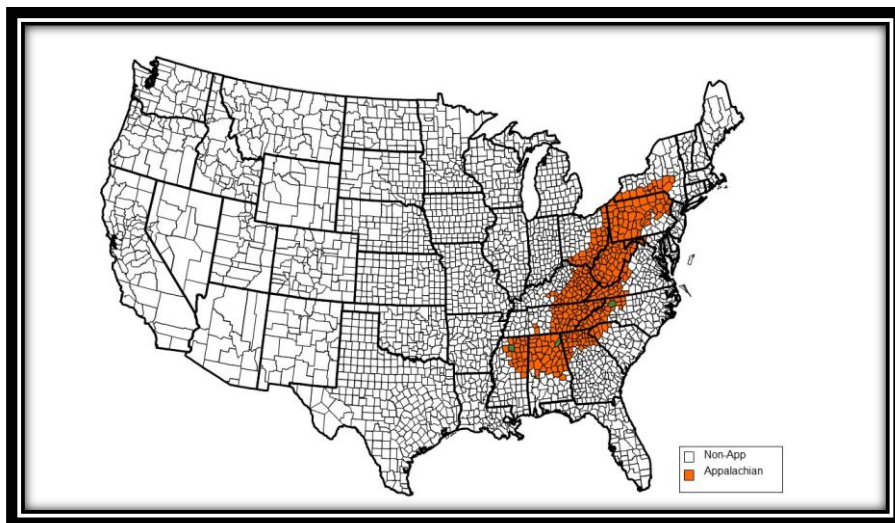


Figure 1. The Appalachian Region of the United States

The Lawrence County and Ironton City health departments (LC/IC) collaborated with the Appalachian Rural Health Institute (ARHI) at Ohio University in this Community Health Profile and Improvement Process. Together LC/IC and ARHI coordinated a group of individuals and organizations, the local community health improvement team (LCHT), to review

existing conditions and activities related to improving the health of residents in Lawrence County and the city of Ironton. Members of the LCHT included representatives from the health department, other governmental agencies, health care providers, and nongovernmental organizations. A list of participants is noted in Table 1.

Table 1. Local Community Health Team (LCHT)	
Angela Doyle, MSN, RN	Lawrence County Health Department (LCHD)
Brenda Martin	Healthy Choices/Healthy Communities
Donna Chadwick	LCHD
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Debbie Carpenter	Ohio State Extension
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This report contains two major sections: 1) A Community Health Profile that compiles and updates the community health assessment process and 2) A Community Health Improvement Plan (CHIP).

COMMUNITY HEALTH PROFILE

Since 2015, there have been several activities related to improving community health and this previous work provides additional information that should be used in conjunction with the information provided here. The reports in Table 2 below resulted from several community health improvement processes from the local health departments, hospital system, a regional coalition, and the state. As Table 2 shows, regardless of the group leading the efforts, the priorities are similar.

Table 2. Related Community Health Documents

Year	Report	Author(s)	Notes	Priorities
2015	<i>Lawrence County Community Health Assessment</i>	Lawrence County Health Department	Reports the results of a public survey of Lawrence County residents conducted in 2015	<ol style="list-style-type: none"> 1. Drug abuse 2. Obesity 3. Alcohol abuse 4. Cancer 5. Unemployment
2016	<i>Community Health Needs Assessment</i>	Kings Daughters Medical Center	Collaborative CHNA with other medical facilities in the region; includes 3 counties in Kentucky and Lawrence County	<ol style="list-style-type: none"> 1. Substance abuse 2. Obesity 3. Access to care 4. Poverty/unemployment 5. Diabetes 6. Hypertension
2016	<i>Community Health Improvement Plan</i>	Healthy Choices, Health Communities	Three counties in Kentucky and Lawrence County; report mainly focuses on strategies for Boyd County, KY	<ol style="list-style-type: none"> 1. Need for jobs 2. Access to care 3. Substance abuse 4. Physical activity/nutrition 5. Teen pregnancy
2017-2019	<i>State Health Improvement Plan</i>	Ohio Department of Health & Health Policy Institute of Ohio	Local health community health improvement plans must align with the SHIP	<ol style="list-style-type: none"> 1. Mental health and addiction 2. Chronic disease 3. Maternal and infant health

To update and tailor the community health assessment to Lawrence County and the City of Ironton, we used the previous work as the foundation. Then we applied a hybrid approach using the PRECEDE-PROCEED model and the Mobilizing for Action Through Planning and Partnerships (MAPP) process. Since the early 1980s, the PRECEDE-PROCEED (Figure 2) has helped planners determine community health intervention programs. This model is extremely useful for critical analysis and helps provide structure to ensure a comprehensive process.

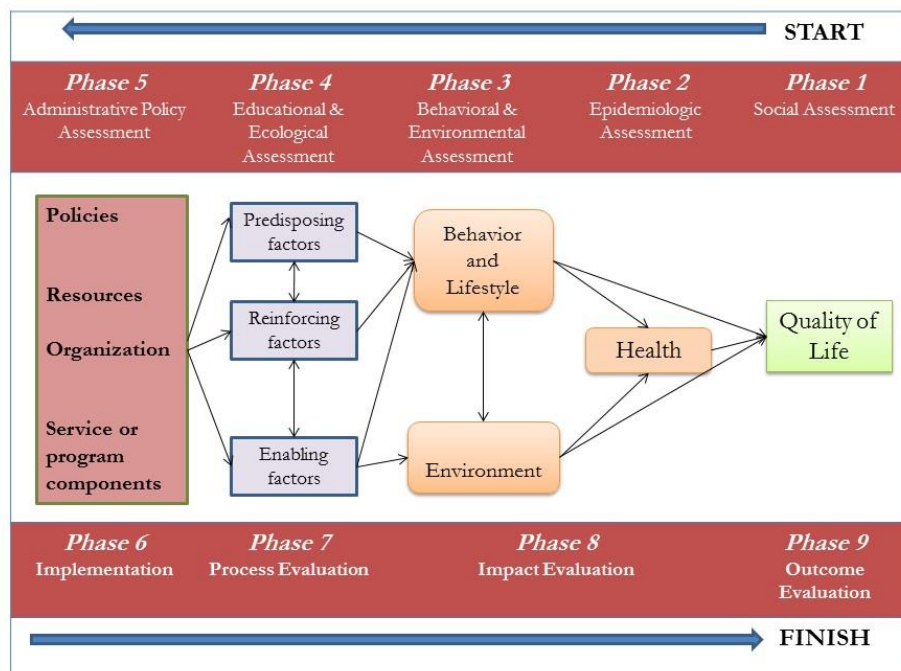


Figure 2. The Community Health Assessment/Improvement Model

The acronym PRECEDE- PROCEED stand for Predisposing, Reinforcing and Enabling Constructs in Educational Diagnosis and Evaluation, and Policy, Regulatory and Organizational Constructs in Education and Environmental Development. The PRECEED component of the model includes the steps to assess conditions in communities. While the process does not always follow the phases in order, it always starts with the social assessment to identify priorities and needs involving community members throughout. The PROCEED components of the model assist with the implementation and evaluation, providing information similar to several steps in MAPP.

The social assessment of the model allows participants to identify community priorities. The Community Health Needs Assessment conducted by Kings Daughters Medical Center (KDMC) and the Community Health Assessment survey conducted by the LC/IC health departments in

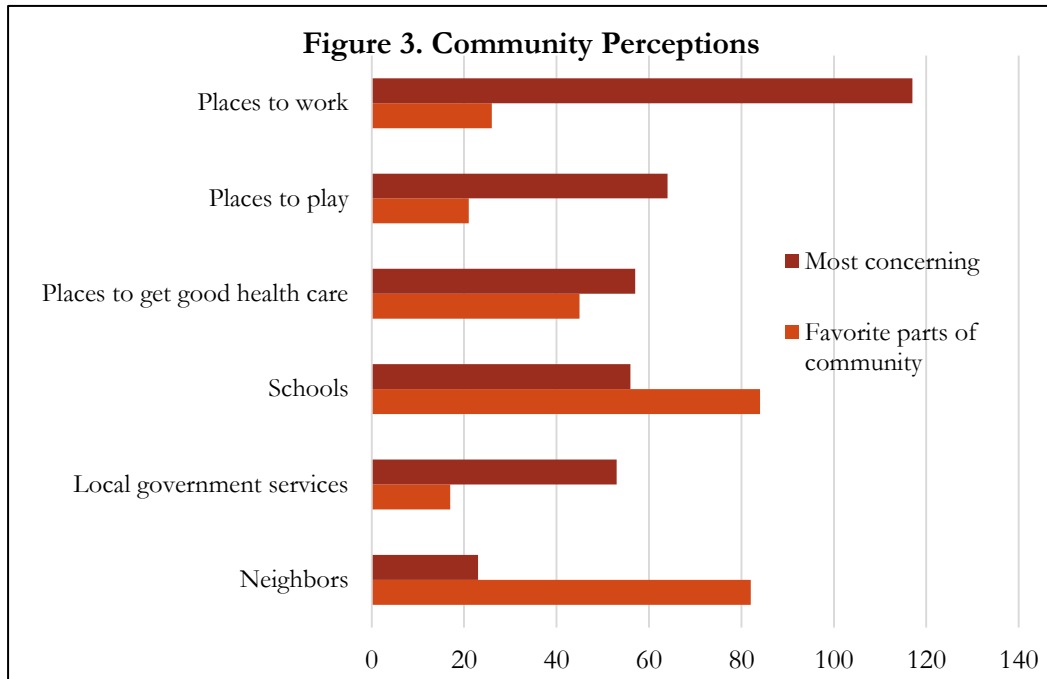
2016 are the initial components of the social assessment. These two processes identified health priorities and produced critical information related to existing conditions. The information available in the needs assessments includes epidemiological (Phase 2) and behavioral factors (Phase 3) that are key to setting priorities.

The KDMC CHNA offers a regional snapshot of conditions but the LCHT thought it was important to assess local conditions. As such, they integrated some specific elements of MAPP into phases 1 through 5 of the PRECEDE-PROCEED model including assessments of: 1) Community Themes and Strengths; 2) the Local Public Health System; and 3) the Forces of Change.

Community Themes and Strengths

The LCHT identified many aspects of the local community that are both concerning and encouraging. The three main concerns that they raised are echoed from previous work in the region: 1) economic conditions; 2) substance abuse; and 3) obesity. In terms of positive aspects, the group was optimistic about new business activity and an improved high school graduation rate. The community themes and strengths was also assessed from the perspective of community members through an on-line survey to gather input from residents of the county (Appendix A).

Although the sample size is small, Figure 3 shows that people who responded to the survey are most concerned about the availability of jobs, places to get physical activity, and places to access health care. On the other hand, respondents are satisfied with their neighbors and the schools. In envisioning the future, the respondents would like to see that there are enough jobs and that the people who live in the community are healthy (Figure 4).

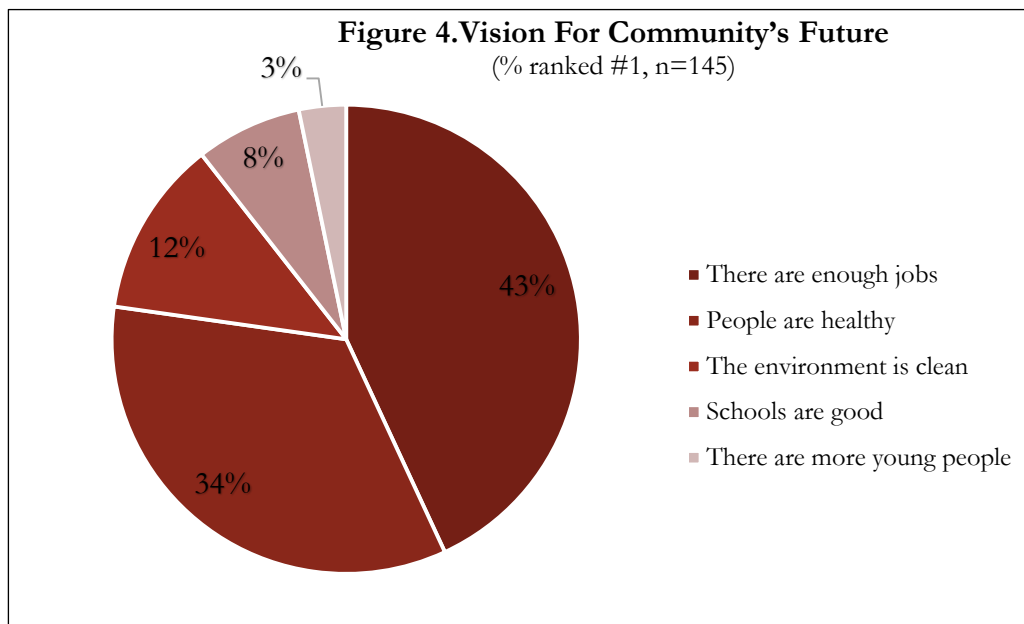


Other things people like best about living in the community:

- Peace and quiet of the country
- Sense of community
- The Appalachian foothills
- Friendly people and relatively safe
- Patriotic Americans
- Small town pace of life
- Family

Other things that concern people (most of the open-ended responses mentioned drugs):

- Drug problem
- Drugs, crime and not enough good paying jobs
- Lack of outdoor recreatuib: parks, hiking and biking trails



Other visions for the future of the community:

- Strong faith and family
- Community involvement to help those in need
- More involvement with faith-based organizations
- Drug issues eradicated
- Jobs that provide affordable health care
- People have hope

Local Public Health System Assessment and Asset Map

Figure 5 is the result of focused discussion with LCHT about the public health resources available in Lawrence County and the City of Ironton. There are numerous agencies and organizations involved with public health in the region and they can be specifically tied to the essential public health services as noted in Figure 6. The LCHT raised concerns about the need for better coordination and communication among the various players in improving local public health.

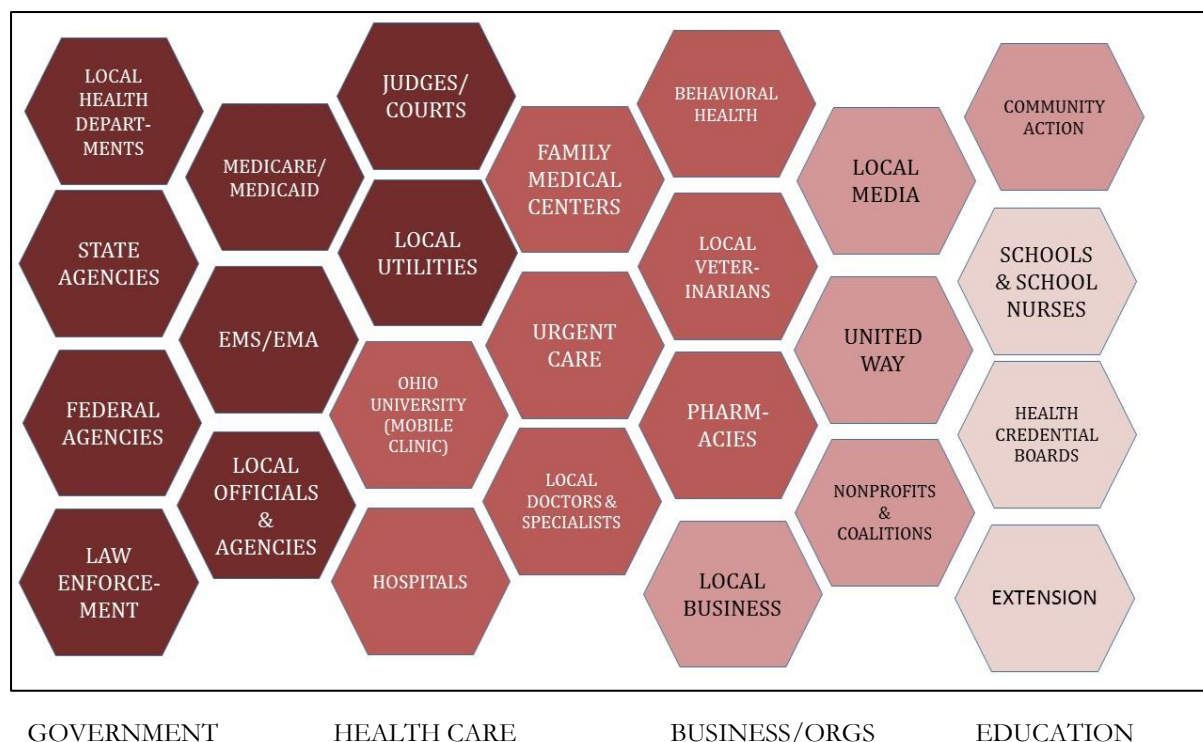


Figure 5. Local Public Health System

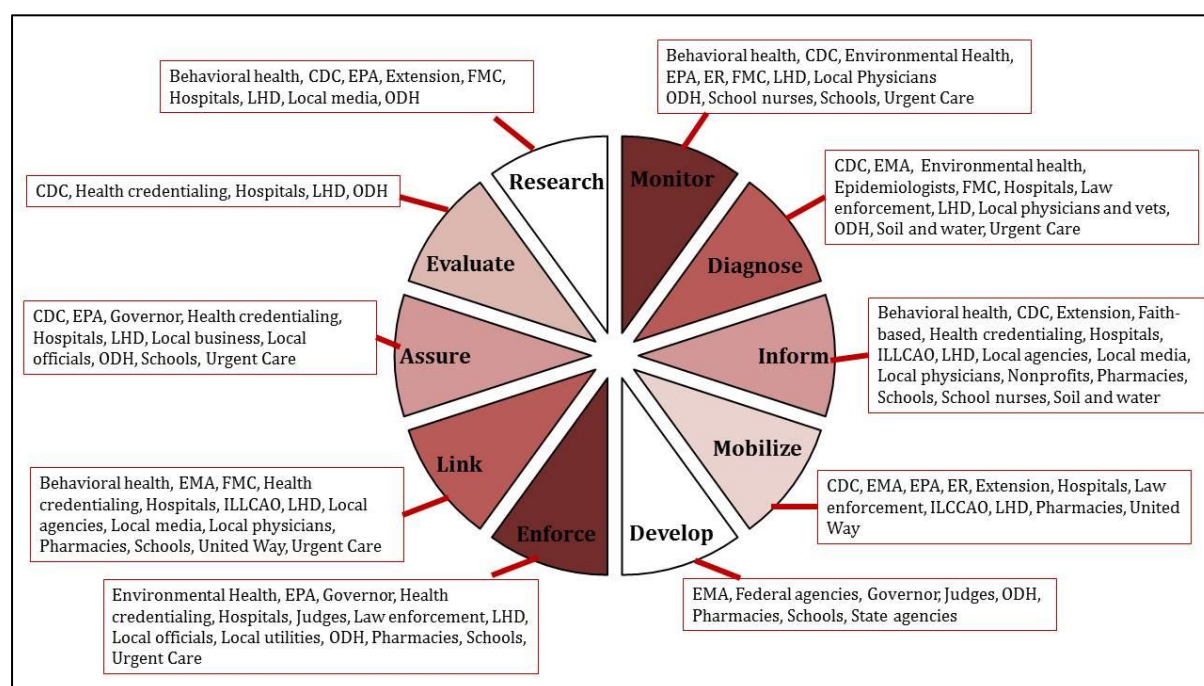
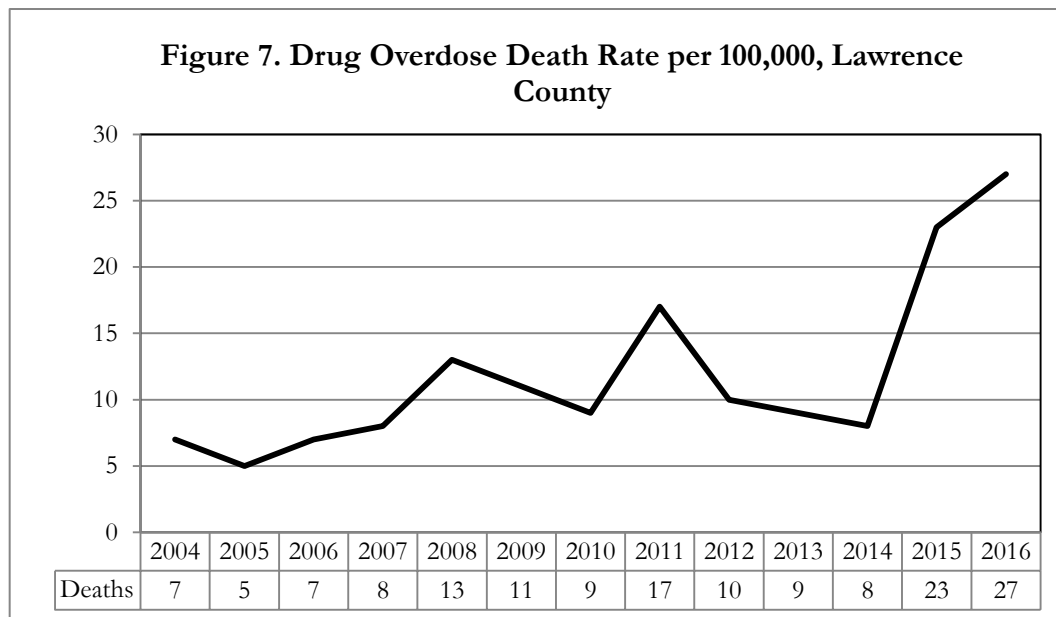


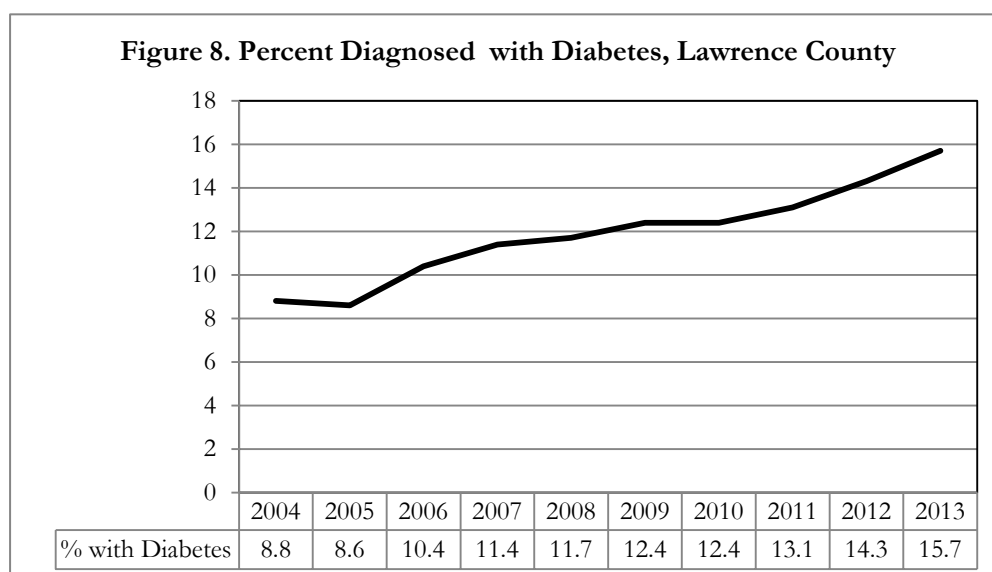
Figure 6. Asset Map Corresponding to Essential Services

Forces of Change

The LCHT identified several health issues that have worsened in recent years. Specifically substance abuse, particularly opioid use, is increasing the county. One indicator of this change is found in the rate of opioid overdose deaths in the county. As Figure 7 shows, this has been increasing for the past several years.



In addition to substance abuse, diabetes rates have also risen in Lawrence County as shown in Figure 8.



As some worsening health outcomes combine with an aging population, there may be long-term consequences in the county and City of Ironton. The LCHT identified both positive and negative forces of change and these are summarized in Table 3.

Table 3. Forces of Change	
Negative	Positive
Job losses due to closures	Emergency room opened in 2012
Family size decreasing due to economics	New bridge
Young people leaving and an aging population	Farmer's market has grown
Birth rates decreasing	Some new businesses
Hospital closure	Community garden
Increase in abandoned homes	High school graduation rate is up
	Some growth in industry

There are both threats and opportunities associated with the forces of change that the team grouped into the three categories below.

Demographic changes

Threats: Smaller workforce; smaller tax base, an aging population's effect on the public health system; and reduced skilled labor due to drug testing

Opportunities: Services for seniors and more community engagement

Economic changes

Threats: Environmental health; the costs of addiction

Opportunities: Good paying jobs; increased tax base from new business; expansion in addiction services.

Health changes

Threats: Increases in crime, mortality, chronic diseases and costs.

Opportunities: Educational and business expansions.

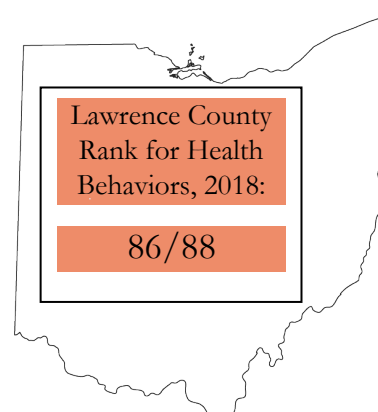
CRITICAL HEALTH ISSUES

The two needs assessments and the Lawrence County community health survey identified important health issues. Table 4 below compares how different groups ranked top health issues. This table shows that those who participated in the community survey believe that substance abuse is the most important health issue. The importance of obesity is similar across all sources.

Table 4. Comparison of Community Health Priorities				
Issue	Community Survey ^a	Hospital Needs Assessment ^b	Healthy Choices CHIP ^c	April 2018 Online Survey ^d
Substance abuse	1	1	3	1
Obesity	2	2		2
Alcohol abuse	3			6
Cancer	4			3
Unemployment/poverty	5	4	1	
Heart disease	6			
Access to care	6	3	2	4
Diabetes		5		5
Hypertension		6		
Physical Activity/ Nutrition			4	
Teen Pregnancy			5	
a. Based on the % ranking the issue as the most important health issue.				
b. As ranked by needs assessment participants and based on data, includes more than just Lawrence County.				
c. As ranked by participants, includes more than just Lawrence County				
d. Online survey, 145/188 participants				

The LCHT combined the health issues to make them more comparable into the following categories in ranked order:

1. **Substance abuse**, including alcohol
2. **Obesity** and related health issues including diabetes, hypertension, and nutrition
3. **Social determinants** such as unemployment, poverty, and **access to care**



SUBSTANCE ABUSE

There is no doubt that substance abuse, specifically opioid addiction, is an increasingly important public health issue, especially in Appalachia. All of the community health assessment activities indicate that there are serious concerns about substance abuse in Lawrence County. According to the Ohio Department of Health (ODH), substance abuse accounts for 26.9 deaths per 100,000 in Lawrence County¹. There were 94 reported deaths from unintentional drug overdoses on Lawrence County between 2011 and 2016. Other indicators (Table 5) of substance abuse show that Lawrence County has a higher than state rate of deaths related to both heroin and prescription opioid overdoses.

Table 5. Substance Abuse Indicators

	Lawrence County	Ohio
Unintentional drug overdose death per 100,000 people, 2016	47.5	36.8
Heroin-related overdose deaths per 100,000, 2015	23.0	13.1
Prescription opioids-related deaths per 100,000, 2015	19.5	5.9
Percentage of adults reporting excessive drinking	16%	19%
Percentage of driving deaths that are the result of alcohol, 2015	50%	34%
Percentage of adults who smoke	23%	23%
Bottles of liquor sold per capita, 2015	1.5	5.0
Hepatitis C Rate per 100,000 people	363.3	205.3
Suicide rate per 100,000 people, 2015	20.8	13.9
Sources: ODH, 2016 Drug overdose data; RWJF 2018 County Health Rankings; State Epidemiological Outcomes Working Group		



Infectious and communicable diseases such as Hepatitis B and C are key community health issues related to substance abuse.

¹ Even though there are less than 100,000 people in Lawrence County, this is one way to compare health impacts among different places.

OBESITY AND RELATED HEALTH ISSUES

More than one million adults in Ohio have diabetes; this means that more than 10 percent of the state's population has been diagnosed with diabetes. Diabetes increases the risk of developing heart disease, kidney failure, adult onset blindness and requiring limb amputations. More than 15% of the population of Lawrence County reported having diabetes in 2013. Since 2004 the prevalence of diabetes in Lawrence County has increased by almost 7%, and the county has a prevalence rate higher than that of Ohio. Risk factors for diabetes (Table 6) include physical inactivity, obesity and unhealthy eating habits. According to the County Health Rankings, 36% of the residents of Lawrence County are physically inactive and almost one-half of the county's population does not have access to exercise opportunities.

Table 6. Diabetes Indicators and Risk Factors

Factor	Lawrence County	Ohio
Adult obesity	38%	32%
Physical inactivity	36%	26%
Access to exercise opportunities	53%	85%
Diagnosed with diabetes, 2013	15.7%	10.3%
% of Medicare enrollees receiving HbA1c monitoring	83%	85%
Sources: RWJF, 2018 County Health Rankings; CDC Diabetes Atlas,		

SOCIAL DETERMINANTS OF HEALTH

Social determinants of health are conditions in which people “live, work, and play” that contribute to health status. These conditions include poverty, employment, income, and access to health care services. In addition, environmental health factors are social determinants of health.

Economic and Demographic Indicators

The Appalachian Regional Commission (ARC) categorizes Lawrence County as a “transitional” county. This means that, according to unemployment, per capita income, and poverty, the county is transitioning between weak and strong economies. The transition in Lawrence County began in 2013, according to ARC; in 2012, Lawrence County was identified as an “at risk” county. Using this one economic index, there is some positive news for Lawrence County.

This section offers a snapshot of some of the important population indicators in the county. The total population in Lawrence County and the City of Ironton has declined in recent years. This is in opposition to the state that has seen a slight increase in population during this same time period. Notably, the population over the age of 65 is higher in Lawrence County and Ironton than the state, while the population under 5 years old is lower. These population indicators suggest an aging population which could have implications for health care in the future.

Other indicators summarized in Table 7 suggest a aging housing stock that is of lower value than the state. In addition, while the percent of people in Lawrence County who are high school graduates is higher than the state, the percent in both the county and the City of Ironton with a college education is much lower. Added to this, are indicators suggesting higher rates of disabilities, uninsured individuals, people living in poverty, and lower median household incomes. The social determinants of health noted in the demographic indicators point to numerous challenges.

Table 7. Demographic Indicators			
Population			
	Lawrence County	Ironton City	Ohio
Total population, 2017	60,249	10,722	11,658,609
Population change, 2010-2017	-3.5%	-3.7%	1.1%
Persons under 5 years	5.8%	7.9%	6.0%
Persons under 18 years	22.1%	22.8%	22.8%
Persons 65 years on over	17.9%	18.9%	15.5%
Population per square mile, 2010	137.7	2674.6	282.3
Housing			
Owner-occupied	73.6%	62.6%	66.0%
Median housing value	\$101,600	\$91,400	\$131,900
Housing units built prior to 1939	12.6%	33.1%	20.7%
Education			
High school graduate or higher	85.7%	86.6%	89.5%
Bachelor's degree or higher	14.1%	15.2%	32.3%
Health			
People with disability, under 65	16.7%	17.7%	13.8%
Without health insurance, under 65	7.0%	15.0%	8.5%
Employment and Income			
Unemployment rate	7.6%	6.2%	7.2%
Median household income	\$44,256	\$34,140	\$50,674
Persons in poverty (%)	17.9%	21.4%	15.4%
Source: U.S. Census, American Community Survey, 2012-2016, 5 yr averages; US Census QuickFacts.			

Environmental Health

Environmental health includes a range of issues that affect public health, such as sewage treatment systems, food safety, and vector control. Environmental health programs in health departments conduct inspections, issues licenses to operate, and responds to complaints.

Indicators of environmental health include those related to housing stock and quality, exposures

and illnesses associated with vectors that transmit disease such as mosquitoes and ticks, and pollution. The table below summarizes some of the available environmental health indicators and is not meant to be a comprehensive assessment of environmental conditions in the county.

Annually, facilities are required by federal law to report releases of pollution to the air, land, water and underground as part of the Toxic Release Inventory (TRI). In 2016, 1 facility in the City of Ironton reported releases of a little more than 3,000 pounds of chemicals, all of which was in the form of styrene released to the air. Overall, toxic releases in Lawrence County are very low compared to other counties in the Appalachian region. There are nine public drinking water systems that serve the community, seven of which are in Lawrence County, and the other two are in neighboring counties. Hecla Water is the largest system. There are two surface water sources (Ironton and Aqua) and both source from the Ohio River. The other systems source from ground water. In addition, there are community water systems that serve mobile home parks and other small communities.

Table 8. Environmental Health Indicators

Category	Indicator	Lawrence County	City of Ironton	Ohio
Built Environment	Owner-occupied housing units, 2012-2016	73.6%	62.6%	66.0%
	Median gross rent, 2012-2016	\$664	\$579	\$743
	Median value of owner-occupied units, 2012-2016	\$101,600	\$91,4000	\$131,900
	Property crime rate per 100,000 people, 2015	1,773.8	NA	2,557.2
	Housing units built before 1970	43%	81%	54%
Vectors	Reported rabies exposures, 2015, city and county	73	26	19,565
	Reported and investigated animal bites, 2017	37	28	NA
	Confirmed Ohio rabies cases in animals, 2017	0	NA	20

Table 8. Environmental Health Indicators

Category	Indicator	Lawrence County	City of Ironton	Ohio
	Human cases of West Nile Virus, 2017	0	NA	34
	West Nile Virus positive mosquito samples, 2017	1	NA	2,328
	Mosquitoes collected for monitoring, 2017	159	1,401	447,079
	Lyme disease cases, 2017	2	NA	270
Water	Community water systems (year-round service, includes mobile home parks and apartments)	21	NA ¹	1,209
	Estimated percent population served by public water	81%	NA ¹	84%
Food	Licensed food establishments, 2017	168	79	
	Food establishment inspections, 2017	462	203	
Air Quality & Pollution	Total reported toxics released to air in pounds, 2016 (pounds)	3,000	NA	32.6 million
	Number of facilities reporting pollution releases to air	20	NA ¹	
1. Included in county numbers				

Access to Care

Access to health care includes availability of medical care providers as well as the ability of the population to use these services and their satisfaction with over all services. The LCHT identified access to care as a priority in the county, especially for people living in rural areas. There are objectives related to improving transportation to health care providers and the LCHT will continue to work on these approaches. Nevertheless, they also determined that it was

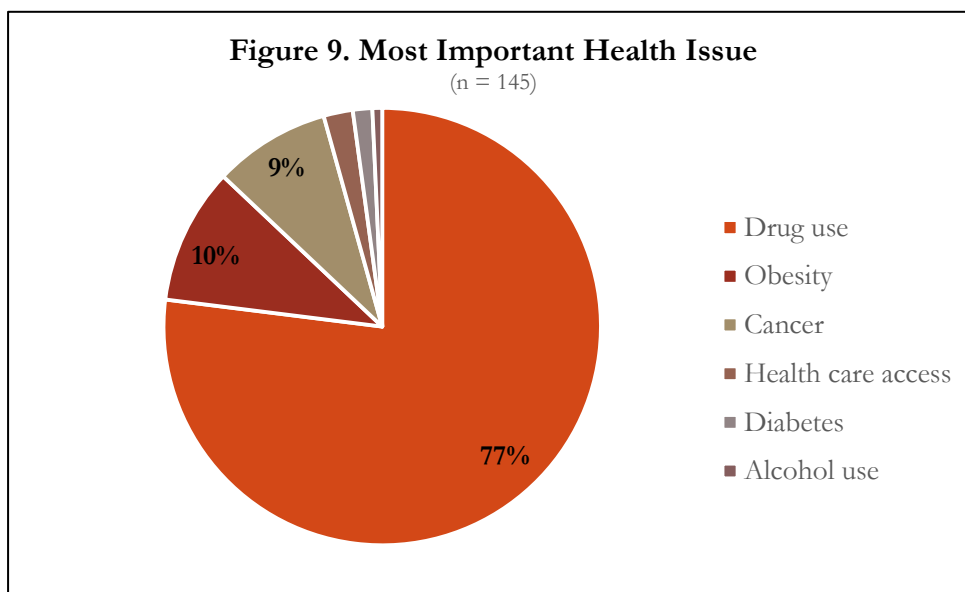
important to gather additional evidence on the magnitude of this priority. Some indicators of access to care are summarized in Table 9.

Table 9. Indicators Related to Access to Care		
Factor	Lawrence County	Ohio
Uninsured population	8%	8%
Primary care physicians	2,180:1	1,310:1
Dentists	2,900:1	1,660:1
Mental health providers	1,220:1	560:1
Sources: RWJF, 2018 County Health Rankings;		

COMMUNITY HEALTH IMPROVEMENT PROCESS

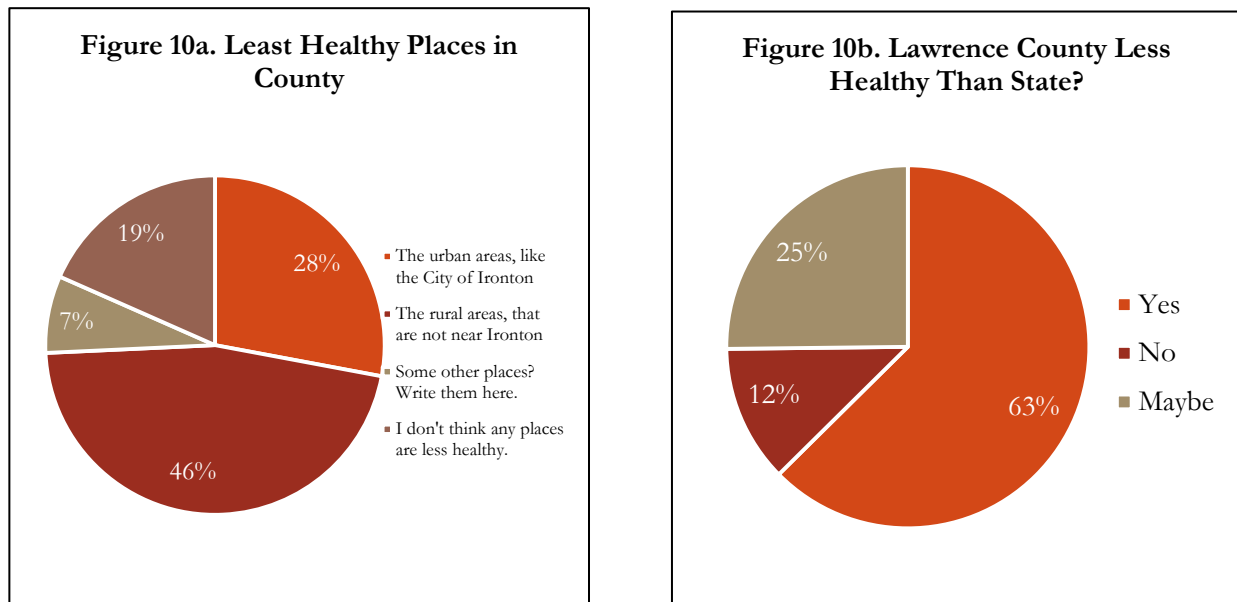
Lawrence County and the City of Ironton are part of the Healthy Choices Healthy Communities (HCHC) coalition that includes three counties in Kentucky. HCHC developed a community health improvement plan (CHIP) for 2016-2019. The CHIP document focused significant attention to Boyd County, Kentucky although many of the goals and objectives are regional in nature. Representatives from Lawrence County and the City of Ironton have been engaged in the HCHC coalition and are participating in several of the CHIP initiatives. The intent of the current CHIP is to update the progress of the HCHC related the three priority areas for Lawrence County/Ironton and to identify several new local objectives.

In April 2018, an online survey was disseminated by the health departments in Lawrence County. The purpose of this survey was to get additional input about the important health issues in the community. Almost 200 people participated in the survey, sharing their views and opinions. The 2015 community health assessment identified major priorities for the community health improvement process. The April 2018 survey presented these priorities to the respondents and asked them to identify the most important health issue. The survey reinforced the priorities of drug abuse and obesity as show in Figure 9.



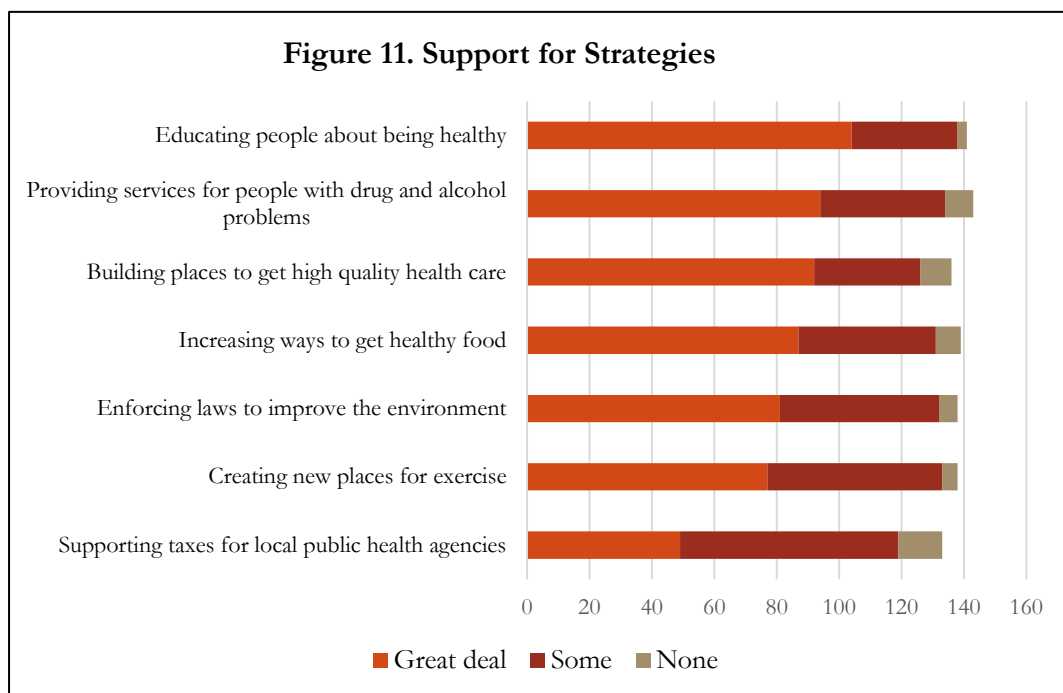
Healthy Equity

People who responded to the survey think that Lawrence County is less healthy than the rest of the state. In addition, they believe that the rural areas of the County are less healthy than the urban areas. Figures 10a and 10b summarize this aspect.



Strategies

The survey also asked for support on specific strategies that could improve community health. The LCHT discussed which strategies to get input on and Figure 11 shows the results of the survey. In general, people are most supportive of educational programs, services for drug abuse victims, and building places for high quality health care.



The Community Health Improvement Plan

As noted above, Lawrence County and the City of Ironton are participating in a regional community health improvement process. HCHC prepared a Community Health Improvement Plan in 2016 and recently updated the plan in late 2017. The LCHT reviewed the HCHC CHIP, identified goals and objectives they are currently engaged in, and developed several specific new objectives related the three priority areas to focus on locally. The tables below identify the key HCHC objectives that meet the local community health priorities, indicate their current status, and document additional objectives from the LCHT including the responsible parties. The new, local objectives are highlighted in green.

Substance Abuse

HCHC identified 4 overall goals related to substance abuse:

1. Development of Substance Abuse Workgroup;
2. Contribute resources to 2-1-1 project;
3. Reduce the spread of communicable disease among intravenous substance abusers;
and
4. Provide Substance Abuse Prevention Education in School settings.

Members of LCHT have been actively engaged with most of the objectives and activities related to these regional goals and one key objective is to continue to be involved with the workgroup. Additionally, the LCHT has identified three objectives that are local in nature focusing on the goal of reducing the spread of infectious disease and enhancing educational opportunities.

Development of a Substance Abuse Workgroup	
HCHC Objectives	Status
Identification of lead workgroup members for planning and steering committee workgroup by May 2016	Completed
Conduct monthly workgroup meetings from April to November 2016	Completed
Emphasize recruitment of agency representatives related to substance abuse by May 2016	Completed
2018-2021 Lawrence/Ironton Objectives	Responsible parties
Continue to be engaged with the Substance Abuse Workgroup	Health Department

Contribute Resources to 2-1-1 Project	
HCHC Objectives	Status
Identify community resources related to substance abuse by October 2016	Completed
Educate Substance Abuse Workgroup about 2-1-1 project by August 2016	Completed
2018-2021 Lawrence/Ironton Objectives	Responsible parties
Continue to be engaged with Substance Abuse Workgroup	Health Department

Reduce the Spread of Communicable Disease Related to Substance Abuse	
HCHC Objectives	Status
Implement a syringe exchange project in Boyd County, KY by July 2016	Completed
Implement a syringe exchange project in Greenup County, KY by April 2017	Completed
2018-2021 Lawrence/Ironton Objectives	Responsible parties
Create a local group and explore the feasibility of a syringe exchange project and other strategies by December 2018.	Health Department

Provide Substance Abuse Prevention Education in School Settings	
HCHC Objectives	Status
Establish partnership with at least 3 school districts to provide substance abuse prevention education in topics such as: tobacco cessation, drug education, vaping and/or prevention of tobacco product use, by 2019	In progress
Provide substance abuse education in school districts by Kings Daughters Medical Center (KDMC) Wellness Educator, by 2019.	In progress
2018-2021 Lawrence/Ironton Objectives	Responsible parties
Identify and evaluate current educational efforts with school districts by December 2018	Ohio University
Evaluate the feasibility of implementing additional school-based education programs including needed resources by May 2019	LCHT

Obesity and Related Chronic Conditions

HCHC identified three goals to address obesity and related chronic conditions:

1. Establish strong participation in the HCHC coalition Obesity workgroup;
2. Identify and promote programs and services available in the community for healthy eating and physical activity; and
3. Identify and implement evidence-based, promising practices or innovative approach directed toward the Obesity Workgroup target audience(s).

The LCHT determined that they would continue to be involved with the Obesity Workgroup, which was renamed “Wellness Together.” Specifically, the Lawrence County Health Department would remain an active member of this group. In addition, the LCHT identified additional objectives related to young children. They agreed that third graders seem to be a high-risk group for obesity and that additional work understanding the root causes of this would be an objective that they would take on.

Establish a Strong Participation in the HCHC Coalition Obesity Workgroup	
HCHC Objectives	Status
Identify an Obesity workgroup leader by September 2016 whose primary responsibilities include engaging workgroup members and/or their representatives to participate in workgroup meetings.	Completed
Expand the Obesity workgroup membership by at least 3 members, by December 2016.	Completed
Identify key stakeholders/community partners to be invited to a Lunch and Learn Program, by December 2017.	Completed
2018-2021 Lawrence/Ironton Objectives	Responsible parties
Continue to be engaged in the Obesity Workgroup (now known as “Wellness Together”)	LCHD

Identify and Promote Programs and Services Available in the Community for Healthy Eating and Physical Activity	
HCHC Objectives	Status
Gather information about programs and services provided by members and non-members of the obesity workgroup that address healthy eating and/or physical activity, via survey monkey, by March 2017	Completed
Present information gathered to the HCHC coalition at their quarterly meeting, by March 2017.	Completed
Develop obesity reduction and/or prevention workgroup focus for the next 2 years based on: identification of target audience(s), review of existing programs/activities, and workgroup members’ research of programs/activities, by October 2017.	In progress
2018-2021 Lawrence/Ironton Objectives	Responsible parties
Continue to be engaged in the Obesity Workgroup (now known as “Wellness Together”)	LCHD

Identify and Implement Evidence-Based, Promising Practice or Innovative Approach Directed Toward the Wellness Together Workgroup Target Audiences	
HCHC Objectives	Status
Workgroup members complete research and propose an approach to obesity reduction and/or prevention at monthly meetings, by June 2018.	In progress

Research funding opportunities for implementation/improvement of a new or existing program/activity directed toward the obesity workgroup target audience(s), by June 2018.	
Select and implement program/activity/intervention directed to Obesity workgroup target audience(s), by October 2018.	
Expand the Obesity workgroup membership by at least 2 members, by October 2018.	
2018-2021 Lawrence/Ironton Objectives	Responsible parties
Continue to be engaged in the Obesity Workgroup (now known as “Wellness Together”)	LCHD
Conduct research to examine the root causes of obesity among third graders in the county by December 2019.	Health Department Ohio University

Social Determinants of Health: Access to Care

As with substance abuse and obesity, the HCHC Coalition has an Access to Care workgroup that members of the LCHT are actively participating in. They will continue to be engaged in the goals to:

1. Develop a focused approach to increasing access to care for the four-county area;
2. Identify and implement evidence-based and/or promising practices directed toward the workgroup’s access to care focus and the target audience selected; and
3. Improve access to comprehensive, quality health care services for the achievement of health equity (HP2020).

The LCHT identified one additional objective for goal #1 and that is to gather additional data about access to care in Lawrence County and the City of Ironton.

Develop a Focused Approach to Increasing Access to Care for the Four-County Area of Boyd, Carter, Greenup (KY) and Lawrence (OH)	
HCHC Objectives	Status
Based on data review, define the aspect of access to care that needs immediate focus in the coalition area. Prepare to distribute the access to care focus area definition to the full coalition, by June 2016.	Completed
Identify an Access to Care workgroup leader, By March 2016 whose primary responsibilities include maintaining contact information for workgroup members and working with members to set meeting dates and times.	Completed
Complete a list of area resources and expertise available to contribute to the Access to Care workgroup, by May 2016.	Completed
Based on data review and review of resources/expertise, identify the target population to which the access to care	Completed

activities will direct activities/interventions.	
2018-2021 Lawrence/Ironton Objectives	Responsible parties
Continue to be engaged in the Access to Care Workgroup	Ironton in Bloom Ironton Community Action Our Lady of Bellefonte ILCAO
Conduct a survey to assess the issues related to access to care in rural areas of the county by December 2018	Ohio University

Identify and Implement Evidence-based and/or Promising Practices Directed Toward the Workgroup's Access to Care Focus and the Target Audience Selected	
HCHC Objectives	Status
Complete a review of evidence-based and/or promising practices directed toward the workgroup's access to care focus and the target audience selected, by June 2016.	Completed
Based on data, review of area resources and review of evidence-based or promising practices, identify by June 2016, an intervention for implementation in the four-county HCHC coalition area.	Completed
Develop an implementation calendar of intervention activities, by July 2016.	Completed
2018-2021 Lawrence/Ironton Objectives	Responsible parties
Continue to be engaged in the Access to Care Workgroup	Ironton in Bloom ILCAO Our Lady of Bellefonte

Improve Access to Comprehensive, Quality Health Care Services for the Achievement of Health Equity	
HCHC Objectives	Status
Promote KDMC "24/7 Care line" free public access, for a nurse to answer medical questions, get advice about needed services and prescription refill from 2018 to 2019.	Completed
2018-2021 Lawrence/Ironton Objectives	Responsible parties
Continue to be engaged in the Access to Care Workgroup	Ironton in Bloom ILCAO Our Lady of Bellefonte

SUMMARY

The Local Community Health Team comprised of members from both Lawrence County and the City of Ironton developed three focused priorities based on previous activities and new information. These three priorities are: 1) substance abuse; 2) obesity; and 3) access to care. Members of the team are currently working with the regional coalition on broad objectives and will continue this work as part of the community health improvement process. The team identified five new objectives that are locally-based and still fit with the regional goals. The five new objectives will be implemented and monitored by the local health department.

SOURCES

The sources below are the main references used to compile the secondary information in this document; they do not represent a comprehensive set of sources available.

POPULATION AND DEMOGRAPHICS

Greater Lawrence County Chamber of Commerce.

<https://www.lawrencecountyohio.org/>

U.S. Census Bureau. *Quick Facts: Lawrence County, Ohio*.

<https://www.census.gov/quickfacts/fact/table/lawrencecountyohio,US/PST045217>

PRECEDE-PROCEED MODEL

Binkley, C., Johnson, K. (2014). Application of the Precede-Proceed Planning Model in Designing an Oral Health Strategy. *Journal of Theory And Practical Dental Public Health*, 1(3).

Community Tool Box. Section 2: Precede-proceed. <http://ctb.ku.edu/en/table-contents/overview/other-models-promoting-community-health-and-development/preceder-proceder/main>

Li, Ying., Cao, Jia., Lin, Hui., Li, Daikun., Wang, Yang., He, Jia. (2009). Community Health Needs Assessment with Precede Proceed Model: A Mixed Methods Study. *BMC Health Services Research*, 63-181

Merzel, C., D’Afflitti, J. (2003). Reconsidering Community-Based Health Promotion: Promise, Performance and Potential. *American Journal of Public Health*, 93(4). 557-574.

NEEDS ASSESSMENTS AND COMMUNITY HEALTH IMPROVEMENT RESOURCES

Healthy Choices, Healthy Communities, Community Health Improvement Plan. Boyd, Greenup, Carter County, Kentucky and Lawrence County, Ohio, 2016-2019.

<http://www.abchdkentucky.com/ABCHD%20CHACHIP%202016-2019.pdf>

King’s Daughters Community Health Needs Assessment, 2016

<http://www.kingsdaughtershealth.com/documents/Final-CHNA-9-2016.pdf>

King's Daughters Medical Center Ohio Implementation Plan, 2017-2019

<http://www.odh.ohio.gov/~media/ODH/ASSETS/Files/chss/healthpolicy/reports/counties/SCIOTO/Kings%20Daughters%20Medical%20Center-%20Ohio/IS.pdf>

SUBSTANCE ABUSE

Ohio Department of Health. 2016 Ohio Drug Overdose Data: General Findings.

<https://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/health/injury-prevention/2016-Ohio-Drug-Overdose-Report-FINAL.pdf>

Ohio Network of Care. Public Health Assessment and Wellness, Lawrence County.

<http://lawrence.oh.networkofcare.org/ph/>

Ohio State Epidemiologists Outcomes Workgroup (SEOW): County/State Indicators.

http://state.oh.networkofcare.org/indicator_maps/ohio/seow.aspx

CANCER

Centers for Disease Control and Prevention. *Cancer Prevention and Control: How to Prevent Cancer of Find it Early*. <https://www.cdc.gov/cancer/dcpc/prevention/index.htm>

Ohio Department of Health. *Lawrence County Cancer Profile*

<https://www.odh.ohio.gov/-/media/ODH/ASSETS/Files/opi/cancer-incidence-surveillance-system-ociss/lawrence.pdf?la=en>

Ohio Department of Health. *Cancer Incidence data 1996-2015*.

<http://publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/StateLayoutLockdownCancers>

DIABETES

CDC. Behavioral Risk Factor Surveillance System.

<https://www.cdc.gov/brfss/>

CDC. Diabetes Atlas.

<https://www.cdc.gov/diabetes/atlas/countydata/atlas.html>

CARDIOVASCULAR DISEASE

Health Data.gov

<https://www.healthdata.gov/>

MENTAL HEALTH

Ohio State Epidemiologists Outcomes Workgroup (SEOW): County/State Indicators.

http://state.oh.networkofcare.org/indicator_maps/ohio/seow.aspx

ENVIRONMENTAL HEALTH

Ohio Department of Health. *Ohio's Reportable Infectious Diseases, Effective March 22, 2018.*

<http://www.odh.ohio.gov/reportablediseases>

Ohio State Epidemiologists Outcomes Workgroup (SEOW): County/State Indicators.

http://state.oh.networkofcare.org/indicator_maps/ohio/seow.aspx

U.S. EPA. Toxic Release Inventory, TRI Explorer.

https://iaspub.epa.gov/triexplorer/tri_release.chemical

U.S. EPA. Safe Drinking Water Information System.

<https://www3.epa.gov/enviro/facts/sdwis/search.html>

Lawrence County/Ironton Community Health

The health departments in Lawrence County and the City of Ironton are working on a plan to improve the health of everyone who lives here. The Appalachian Rural Health Institute at Ohio University is helping them get ideas and opinions and we are asking you to take a few minutes and answer some questions.

The first screen of the survey is a consent form, please read this form and if you agree continue to the survey.

Ohio University Anonymous Online Consent Form

Title of Research: **Lawrence County CHIP**

Researchers: **Michele Morrone** IRB number: **18-E-285**

You are being asked by an Ohio University researcher to participate in research. For you to be able to decide whether you want to participate in this project, you should understand what the project is about, as well as the possible risks and benefits in order to make an informed decision. This process is known as informed consent.

This form describes the purpose, procedures, possible benefits, and risks of the research project. It also explains how your personal information will be used and protected. Once you have read this form and your questions about the study are answered, you will be asked to participate in this study.

Summary of Study: This is a study to create a community health improvement plan for Lawrence County, Ohio. This survey is an important part of the study because it will provide information that lead to programs and policies to improve community health.

Explanation of Study : We are conducting this study to create a community health improvement plan for Lawrence County. If you agree to participate, you will be asked to complete this survey. ou should not

participate in this study if you are not at least 18 years old and not a resident of Lawrence County. Your participation in the study will last 10-15 minutes. _

Risks and Discomforts: No risks or discomforts are anticipated but you can skip questions that you choose not to answer or stop the survey any time.

Benefits: Individually, you may benefit because it might lead to ways to improve the health of your community. _

Confidentiality and Records: For maximum confidentiality, please clear your browser history and close the browser before leaving the computer. Your study information will be kept confidential because we are not asking for any identifying information on the survey.

Future Use Statement: Data collected as part of this research, even if identifiers are removed, will not be used for future research studies. _

Contact Information

If you have any questions regarding this study, please contact the investigator ***Dr. Michele Morrone, 740-593-9549, morrone@ohio.edu***.

If you have any questions regarding your rights as a research participant, please contact Dr. Chris Hayhow, Director of Research Compliance, Ohio University, (740)593-0664 or hayhow@ohio.edu.

By agreeing to participate in this study, you are agreeing that:

- you have read this consent form (or it has been read to you) and have been given the opportunity to ask questions and have them answered;
- you have been informed of potential risks and they have been explained to your satisfaction;
- you understand Ohio University has no funds set aside for any injuries you might receive as a result of participating in this study;
- you are 18 years of age or older;
- your participation in this research is completely voluntary; you may leave the study at any time;
- if you decide to stop participating in the study, there will be no penalty to you and you will not lose any benefits to which you are otherwise entitled.

Think about your community 10 years from now. What would a strong community look like? Rank the following from the most to the least important parts of a strong community. Click on the items to put them in order.

- _____ People are healthy
 - _____ There are enough jobs
 - _____ Schools are good
 - _____ The environment is clean
 - _____ There are more young people
 - _____ Something else? Write it here.
-

What are the things you like best about living in your community? Mark as many as you want.

- ☐ Schools
 - ☐ Places to work
 - ☐ Places to play
 - ☐ Neighbors
 - ☐ Local government services
 - ☐ Places to get good health care
 - ☐ Something else? Write it here. _____
-

What are the things that concern you the most about living in your community? Mark as many as you want.

- ☐ Schools
 - ☐ Places to work
 - ☐ Places to play
 - ☐ Neighbors
 - ☐ Local government services
 - ☐ Places to get good health care
 - ☐ Something else? Write it here. _____
-

What is the most pressing health concern in the community? Only mark the one you think is most important.

- ☐ Obesity
 - ☐ Drug use
 - ☐ Access to health care services
 - ☐ Cancer
 - ☐ Diabetes
 - ☐ Alcohol use
 - ☐ Something else? Write it here. _____
-

How much do you support the following ideas to improve the health of your community?

	A great deal of support	Some support	No support at all	No opinion
Educating people about being healthy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enforcing laws to improve the environment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Creating new places for exercise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Providing services for people with drug and alcohol problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Building places to get high quality health care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Supporting taxes for local public health agencies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increasing ways to get healthy food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Something else? Write it here.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you think there are some places in Lawrence County that are less healthy than others?

- ☐ Yes
- ☐ No
- ☐ Maybe
- ☐ No opinion

Which places do you think are less healthy?

- ☐ The urban areas, like the City of Ironton
- ☐ The rural areas, that are not near Ironton
- ☐ Some other places? Write them here.

- ☐ I don't think any places are less healthy.

Do you think Lawrence County is less healthy than the rest of Ohio?

- ☐ Yes
- ☐ No
- ☐ Maybe
- ☐ No opinion

End of Block: Default Question Block

Start of Block: People

How old are you?

- ☐ 18-24
- ☐ 25-44
- ☐ 45-64
- ☐ 65 or more

What is your race?

- ☐ White alone
 - ☐ Black alone
 - ☐ Asian alone
 - ☐ Hispanic of any race
-

How do you identify your gender?

- ☐ Male
 - ☐ Female
 - ☐ Transgender
 - ☐ Prefer not to answer
-

What is the highest level of school you have completed?

- ☐ Less than high school
 - ☐ High school graduate
 - ☐ Some college or 2 year degree
 - ☐ Bachelor's degree
 - ☐ Advanced degree
-

What zip code do you live in?

☐ 45619

☐ 45638

☐ 45645

☐ 45659

☐ 45669

☐ 45675

☐ 45678

☐ 45680

☐ 45688

☐ 45696

☐ Some other zip code, enter it here _____

End of Block: People

Start of Block: Block 1

Would you like to talk more about creating a healthy community in Lawrence County?

☐ Yes

☐ No

☐ Maybe

If you would like to talk more about creating a healthy community in Lawrence County, please enter this information, otherwise leave it blank.

☐ Name _____

☐ Email address _____

Use this space to write any questions about this survey or the community health improvement process.

End of Block: Block 1
