

**Bon Secours Kentucky**  
**Our Lady of Bellefonte Hospital**  
**Community Health Needs Assessment**  
**IMPLEMENTATION PLAN 2013**

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## COMMUNITY BENEFIT PLAN

### EXECUTIVE SUMMARY

Bon Secours Kentucky, Our Lady of Bellefonte Hospital (OLBH) is a 214-bed facility licensed in the state of Kentucky. OLBH is a non-profit facility serving approximately 400,000 residents of the following communities; six counties in northeastern Kentucky, (Greenup, Boyd, Lawrence, Carter and Elliott which comprise the FIVCO Area Development District as well as Lewis County), and two counties in southern Ohio (Lawrence and Scioto counties); and Wayne and Cabell counties in western West Virginia.

Our Lady of Bellefonte Hospital is part of the Bon Secours Health System whose Mission is to bring compassion to health care and to be Good Help to those in Need, especially those who are poor and dying. As a system of care givers we commit ourselves to help bring people and communities to health and wholeness as part of the healing ministry of Jesus Christ and the Catholic Church.

Over the period of 12 months OLBH conducted a Community Health Needs Assessment (CHNA) that included surveys, focus groups and interviews with key individuals in the community including those representatives of our community with knowledge of public health, the broad interests of the communities we serve, as well as individuals with special knowledge of the medically underserved, low income and vulnerable populations and people with chronic diseases.

**The Community Health Needs Assessment Survey determined that the most significant health needs of our service area are:**

1. Obesity
2. Diabetes
3. Drug and Substance Abuse
4. Cancer
5. Heart Disease & Stroke
6. Dental Care
7. Asthma and Respiratory Diseases
8. Mental Illness
9. Alzheimer's Disease

Of the chronic diseases identified, obesity and diabetes are the most alarming, with a higher percentage of the population obese and diagnosed with diabetes than that of the national average and above Healthy People 2010 and 2020 targets.

Community status reveals there are significant barriers in access to health care such as poverty, unemployment, low educational attainment, and social barriers. Reviews of local schools regarding student fitness levels disclose that many school aged children are obese. Appalachian and rural traditions impact the health of many of the residents. Some of the issues are due to diet and traditional cooking techniques, low educational attainment of many in the area, lack of public transportation, personal motivation, very few safe areas to walk and exercise, and few areas with safe sidewalks, safe routes to schools.

After careful review and analysis and discussion with key members of the OLBH Board of Directors, Physicians, hospital staff and community leaders about the results from the OLBH Community Health Needs Assessment survey, the hospital is in the process of developing a plan to address the communities unmet needs and focus on key issues identified in the CHNA; this will be accomplished in part by working with local groups. Participation and agreement will be sought from community organizations, partners, OLBH management team, executive team and professionals from the community.

Resources and programs that are currently in place to address the health needs identified in the CHNA are provided by multiple community organizations in the area. A consortium of the Community Benefit Plan participants developed a common organization, Healthy Choices KY. These unified organizations, acting as one initiative, are carrying out individual action plans that are aligned with the most significant health needs identified in the CHNA. Through the development of a web site numerous programs and resources are available to help with the effort to address the top three identified health problems. Some of the programs recently conducted include a symposium, workshops, weight loss challenges and teleconferences just to name a few. Incorporating nutrition and physical activity components in the Healthy Community Initiatives projects, the Greenup County drug coalition forums and education opportunities, along with advocacy on substance abuse at the state and local levels is ongoing. Colon Cancer screening program and Diabetes classes are being offered to low income and uninsured community members.

In this report we have identified community wide resources that may assist in addressing the health needs of our community. We will work with many of these health and community based facilities and organizations to develop plans and programs to improve the health of our community. If you would like additional information on this CHNA please contact us at 606.833.3106.

## **OUR LADY OF BELLEFONTE HOSPITAL DESCRIPTION AND VISION**

The long range Vision of OLBH is “Inspired by the healing ministry of Jesus Christ and the charism of Bon Secours, OLBH will be recognized for its leadership in justice, transforming the communities in which we serve and work into places of health and hope, and being a prophetic voice for systemic US health reform and a more humane world.”

Bon Secours exists to benefit the people in the communities served. It is the policy of Bon Secours Health System, Inc., in collaboration with others, to benefit the people in the communities served. We advocate for and provide services to help meet health care and related social/economic needs of poor and disadvantaged individuals and the broader community (“Community Benefit Services”).

Our Lady of Bellefonte Hospital, located on 32-acres just outside Ashland, Kentucky, began operations in 1954. Currently, OLBH employs more than 1200 dedicated and skilled health care professionals, affiliated physicians in 36 specialties and over 170 volunteers. OLBH serves a region of approximately 400,000 people in northeastern Kentucky, southern Ohio, and western West Virginia, where accessibility and affordability are barriers to care. While challenges exist at the state level, OLBH’s service area has higher incidences of cancer, diabetes, obesity, smoking and a sedentary lifestyle, as well as a lower per capita income and lower high school and college graduation rates than many areas of the country.

OLBH offers a wide range of medical/surgical services, cardiac catheterization services, acute psychiatric care and chemical dependency rehabilitation. Also located on campus is a specialized center for the treatment and care of Cancer, the Vitality Center a hospital based fitness and outpatient physical rehabilitation facility, a same day surgery center, a retail pharmacy and several medical office buildings.

The philanthropic arm of OLBH is the foundation, a 501 (c) (3) organization committed to raising and receiving funds in support of the hospital’s mission. Its objective is to generate, administer and manage gifts, grants, bequests and trusts to further enhance OLBH’s excellence as a provider of comprehensive health care services and clinical research through philanthropic support of its programs, activities and facilities. The foundation is governed by a volunteer board of directors, with comprised of a cross section of area business, community and medical leadership.

Our Lady of Bellefonte Hospital is a leader in the area by offering uncompromisingly high quality healthcare, exceptional patient satisfaction, and outstanding quality scores, educational community outreach services and multiple comprehensive health care

programs in relation to chronic disease, access to health care, and perceived health. At OLBH, we believe delivering quality health care is not a random proposition, but is a carefully researched, planned, and implemented process. We also believe that health care extends far beyond the waiting room, the doctor's visit and even the operating room. Our objective is to not only improve the health of the community but the quality of life as well. We celebrate the enduring spirit of community service which OLBH and the Franciscan Sisters of Poor originally set forth as an example and the Sisters of Bon Secours continue today.

## **Service area Characteristics / Population Demographics**

OLBH conducted a demographic analysis of the hospitals service areas and to project demographic trends OLBH is located in Greenup County, Ky., with approximately 14,000 households about 14 percent are living in poverty and 15 percent are age 65 and older. In adjacent counties, the poverty rate is 15 percent in Boyd County; 22 percent in Carter County; 29 percent in Lewis County; and approximately 19 percent in Lawrence County, Ohio. Lack of well-paying jobs has contributed to the rate of poverty in this area. The high poverty and high unemployment rate in the area result in a low socioeconomic status. It is a very industrialized region which creates carcinogens along with unhealthy life styles the tri-state area has some of the highest incidences in the country of smoking, diabetes, obesity and cancers.

**Major employers:** The largest employers in the region are two hospitals, Kings Daughters Medical Center and OLBH. Others include AK Steel, Marathon Petroleum refinery, CSX railroad, AT&T call center, and several banking firms, a community college, smaller businesses and retail stores. Many local businesses and chains do not provide employee benefits.

**Immigration:** According the U.S. Census gathered in 2010, Hispanics make up less than one percent of the hospital's service area. However, there are marked increases of the Hispanic population at OLBH's primary care centers in Carter County KY, in particular, where many residents still make a living through tobacco and other farm crops.

**Seniors:** Due to our growing aging population, services for our community residents aged 55 and older are needed, particularly women's health, orthopedics, diabetes, cardiopulmonary services and wound care. Major trends in the service area indicate a stable population that is aging. The 55 and older population is expected to increase by 14% over the next five years. The younger population tends to leave the area to find jobs. These demographic characteristics create a high demand for chronic disease health care including diabetes, cancer and heart disease among others. Major strategies that have been implemented to address the health care needs of the community include serving the

community with needed physicians and providing community educational opportunities (i.e., smoke free campus at the hospital, wellness center for employees and community members, weight loss education programs, community health fairs, mobile mammography and screenings). Access to primary care services is another area of focus that is being improved through services such as the mobile health van, the van ministry and the strategic placement of primary care centers in outlying rural communities. Significant health conditions, underserved populations, issues of access to health services including transportation issues are high priorities as we plan for expansion and physician recruitment and service lines.

**Key findings included:**

- The area's population declined over the last 10 years, 98% of which are white.
- The median age of the area's population 41.4 years. Persons 55 and older are a growing proportion of the population, and at a higher rate than younger residents.
- About 16% of the area's population lives at or below federal poverty levels.

**DESCRIPTION OF THE COMMUNITY SERVED**

According to the County Health rankings data 2011, the counties in OLBH primary service area rank among the highest in the state at risk for poor health outcomes and poor Health factors. Consistent with the state and national trends five chronic diseases account for most of the spending on health care: **diabetes, heart disease, hypertension, asthma and depression.** Prescription drug abuse and addiction is a growing problem in the area as is illegal drug use including methamphetamine, cocaine and marijuana.

Access to quality preventative care and disease management education is critical in minimizing future hospitalizations as well as the seriousness of these diseases. Health insurance coverage is also a factor in determining whether patients will seek preventative care or wait for symptoms to become more severe, thus requiring more extensive treatments, including hospitalization.

The area's growing drug addiction problems puts these individuals more at risk for depression, suicides and kidney failure. The area's population of drug abuse by all ages is growing at a relatively fast pace and will necessitate planning of and access to health care services unique to this population. There are few exceptions to our local community versus state averages with regard to health impacts. Our service area has higher overall cancer rates in Lung Cancer than the state average. Other cancers that are prevalent in our primary and secondary service areas are breast, colon, bladder, prostate and lymphoma. \_\_\_ for a complete list of the national, state and local data sources utilized in

determining the health and economic conditions of OLBH's service area, see Appendix B.

## **PROCESS AND METHODS USED TO CONDUCT THE ASSESSMENT**

**Survey** - In preparing the OLBH Community Health Needs Assessment, the hospital collaborated with community service organizations to provide feedback on the questions to be included in the survey at the end of 2011 and early 2012. OLBH worked to develop a formalized avenue through which to capture the community's voice. The goal of the Assessment survey was to assist the facility to gain feedback on the health and needs of the community to identify gaps and strengths in local community services. OLBH elected to utilize survey monkey as a template and to distribute the survey both online and in print form for community residents that do not have computers or access to the internet. The CHNA survey was available to the public in OLBH primary and secondary service areas and distributed to local service providers included the following – local Health Departments, police officers, fire departments, school districts, community-based service organizations, local businesses and representatives from local faith communities. \_ See Appendix A

The Survey was also distributed to local residents and organizations in order to ensure that outreach efforts were truly reflective of the community we serve.

**Interviews** were conducted with several individuals with special knowledge and expertise in public health, representatives of medically underserved and those with chronic disease:

- Chris Crum, Director Greenup County Health Department
- Maria Hardy, Director Boyd County Health Department
- Laura Brown, Director Ironton OH City Health Department
- Maxine Lewis, Director Lawrence County Ohio Health Department
- Ginger Clark, Director Boyd County Head Start
- Mary Crowley, NEKCC free clinic
- Debbie Sivis, Director at Shelter of Hope
- Alfreda Moore, Director of Ashland Community Kitchen
- Ann Perkins, Director of Safe Harbor
- Debbie Blevins, Director of Helping Hands
- Trish Hall, Director of CARES



**Greenup County Health Department (GCHD) MAPP-** the Mobilization Action Planning and Partnership (MAPP) process uses the National Public Health Performance Standards Program (NPHSP) and is a collaborative effort of seven national partners, including the Center for Disease Control (CDC), American Public Health Association (APHP), and National Association of County and City Health Officials (NACCHO).

MAPP is a collaboration effort between GCHD, OLBH and local community organizations, businesses and residents making up a Community Steering Committee. Over the past three years data was compiled from a variety of sources; paper surveys conducted at county fairs, festivals and events. One particular tool used by MAPP; was the local public health system performance assessment. This tool is intended to help users answer questions that can identify strengths, weaknesses and determine opportunities for improvement. With the assistance of Angela Carman, MBA, PHR, CHE, ASQ-CQIA and the National coordination center for public health system and services research, Kentucky Appalachia public health training center and University of Kentucky College of Public Health conducted Community Forums. A Community Health assessment was conducted using the Model “Three Perspectives on Community Health; Data, Organizational and Individual” these tools along with monthly steering committee meetings are ways the MAPP process is working to address and meet the identified health needs and issues.

## **IDENTIFIED COMMUNITY HEALTH NEEDS**

The OLBH Community Health Needs Assessment survey and the Greenup County MAPP serve as a chronology and index of health needs and issues prevalent among our population groups and a tool for improving community health.

### **The most significant health needs of our service area are:**

1. Obesity
2. Diabetes
3. Drug and Substance Abuse
4. Cancer
5. Heart Disease & Stroke
6. Dental Care
7. Asthma and Respiratory Diseases
8. Mental Illness
9. Alzheimer’s Disease

## **DESCRIPTION OF EXISTING HEALTH CARE FACILITIES AND OTHER RESOURCES AVAILABLE TO MEET IDENTIFIED NEEDS**

Along with OLBH, the following health care facilities, health departments, and community organizations have significant resources available to address the health needs of our community. OLBH has excellent working relationships and work collaboratively with these resources in our collective goal to improve the health of our community. Several of these facilities have specialized services and clinical resources that are engaged in previously identified health needs.

- Cabell Huntington Hospital- [www.cabellhuntington.org](http://www.cabellhuntington.org)
- Community Hospice- [www.communityhospice.org](http://www.communityhospice.org)
- Healthy Choices KY- [www.healthychoiceskentucky.com](http://www.healthychoiceskentucky.com):
  - Applebee's Restaurant
  - Ashland Alliance
  - Ashland Area YMCA
  - Ashland Boyd County Health Department
  - Ashland Community and Technical College
  - Ashland Independent Schools
  - Ashland Kroger
  - Boyd County Extension Office
  - Boyd County Judge Executive
  - Boyd County Public Library
  - Boyd County Medical Alliance
  - City of Ashland
  - FIVCO
  - Greenup County Extension Office
  - Greenup County Health Department
  - Greenup County Judge Executive
  - Greenup County Schools
  - Highlands Museum and Discovery Center
  - Jim Fannin, Coach of Champions
  - Kentucky Heart Foundation/Healthy Kids Healthy Communities Coalition
  - Lawrence County Health & Wellness Initiative
  - Morehead State University
  - Morrison
  - Ohio University Southern
  - Our Lady of Bellefonte Hospital
  - River Cities Harvest
  - Russell Independent Schools
- Kings Daughters Medical Center- [www.kdmc.com](http://www.kdmc.com)
- Local Health Departments
  - Boyd- [www.abchealthdepartment.com](http://www.abchealthdepartment.com)

- Carter- [www.cartercounty.ky.gov](http://www.cartercounty.ky.gov)
- Greenup- [www.greenuphealth.com](http://www.greenuphealth.com)
- Lawrence- [www.lchdky.org](http://www.lchdky.org)
- Ironton OH- [www.ironton-ohio.com](http://www.ironton-ohio.com)
- Lawrence OH- [www.lawcohd.org](http://www.lawcohd.org)
- Scioto OH- [www.sciotocountyohio.com](http://www.sciotocountyohio.com)
- North East KY Care Center (NEKCC)- [www.nekcc.org](http://www.nekcc.org)
- Our Lady of Bellefonte Hospital- [www.olbh.org](http://www.olbh.org)
- Pathways- [www.pathways-ky.org](http://www.pathways-ky.org)
- Saint Mary's Medical Center- [www.st.marys.org](http://www.st.marys.org)
- Southern Ohio Medical Center- [www.SOMC.org](http://www.SOMC.org)
- Three Rivers Medical Center- [www.threeriversmedicalcenter.com](http://www.threeriversmedicalcenter.com)

## **OLBH PRIORITIES AND IMPLEMENTATION PLAN**

The results of the initial survey, input from the Greenup County MAPP steering committee and discussion among OLBH Board lead the facility to focus our significant efforts on Obesity. With improvement in obesity rates Diabetes will be indirectly positively affected.

The action plan for OLBH Community Benefit Plan was presented at the Board of Directors (BOD) retreat in April 2012 where attendees discussed the key findings from the CHNA survey. At the end of the discussion the retreat attendees, who included the BOD, voted to focus on **Obesity** as the primary health condition of concern. Following the needs assessment process, findings have been analyzed to determine next steps. Internal and external partners have been consulted to help develop a three-year plan that all can endorse. Participation and agreement has been sought from community organizations, partners, local agencies, residents, OLBH management team, executive team and professionals from numerous departments.

OLBH Community benefit team put together a Community Benefit Task Force made up of a cross section of vice presidents and directors who are stakeholders in the plan. Their charge was to develop the following action plan:

**FY13-15 Action Plan to address Obesity:**

Strategy	Plan
Overall	<p><b>Define your overall objectives</b></p> <ul style="list-style-type: none"> <li>• Raise awareness of identified health and wellness issues targeted by the team from the community data. Focus of program to be on obesity.</li> </ul>
Improve Health- Related Education	<p><b>Define plan for educating community around health and well-being</b></p> <ul style="list-style-type: none"> <li>• Utilize various educational strategies throughout the year to raise awareness and engage the community about obesity.</li> <li>• Recruit area experts from available resources: Physical Fitness, Nutrition, Behavior Modification, Stress Management, Depression, Chronic Disease, and Ergonomics to address community.</li> <li>• Educational opportunities will encompass electronic media, radio, community venues, and print media/material.</li> </ul>
Rollout of Educational Initiatives	<p><b>What resources are available? How will you leverage partnerships and/or educational programs?</b></p> <ul style="list-style-type: none"> <li>• Utilize on-site facilities for educational offerings through Bellefonte Centre and Bellefonte Pavilion</li> <li>• Partner with local media including radio and newspapers to promote health and wellness education- WLCG, Ashland Daily/Ironton Tribune, Russell &amp; Ashland Beacon</li> <li>• Take advantage of community involvement to provide educational material or guest speakers addressing obesity/healthy lifestyles/chronic disease</li> </ul>
Initiatives Actively	<p><b>What is your plan for actively addressing obesity in the community?</b></p>

Strategy	Plan
Addressing Obesity in the Community	<ul style="list-style-type: none"> <li>• Community Firm Fitness Weight Loss Challenge</li> <li>• Childhood Obesity Program</li> <li>• Corporate Weight Loss Challenge</li> <li>• Local Business alignment partnering with OLBH to encourage healthy behaviors and lifestyle choices</li> <li>• Physician education with patients</li> <li>• Symposiums and education sessions for community members</li> </ul>
Rollout of Active Initiatives	<p data-bbox="537 615 1385 688"><b>How will you resource program rollouts? How will you leverage partnerships and/or active programs?</b></p> <ul style="list-style-type: none"> <li>• Firm Fitness Weight Loss Challenge expanded to community level</li> <li>• Childhood Obesity Program in place presently at Vitality Center</li> <li>• Engage local corporations to challenge each other to a group weight loss event where the corporate sponsor donates a dollar for each pound lost with proceeds going to a community health program</li> <li>• Align with area markets and restaurants to engage in healthy opportunities, <i>i.e.</i> reduced produce costs and/or healthy menu choices available</li> </ul>
Establish/Support Community Benefit Plan Committee	<p data-bbox="537 1020 1385 1073"><b>How will you establish, maintain and support a Community Benefit Plan?</b></p> <ul style="list-style-type: none"> <li>• Regular committee meetings with defined chair and lead structure</li> <li>• The committee chair will meet in person with team members and/or team leads PRN</li> <li>• Team Leads will manage their own areas with a minimum of monthly reports directly to the Chair with updates on current activities and progress towards goals</li> </ul>
2013-2015 Metrics	<p data-bbox="537 1375 1385 1472"><b>What are the initial measures of success? For each indicator, how many people organizations/businesses were served? How many people were served?</b></p>

Strategy	Plan
	<p>Education success = 25 opportunities the community is engaged throughout the year addressing obesity and healthy lifestyle.</p> <p>Firm Fitness Weight Loss Challenge success = 15% reduction of BMI for participants. (If funding available changes in Lipid Profile can also be an excellent metric)</p> <p>Childhood Obesity success = 10% reduction in BMI and 80% continuance in structured exercise program</p> <p>Corporate Engagement Weight Loss Challenge success= 5% weight loss.</p> <p>Goals to be reviewed, revisited, revised or modified yearly.</p> <p>Physician involvement.</p>
Long Term Goals 3 years	Educate to reduce the percentage of obese population (30 BMI or greater) in the OLBH and Ashland service area. Boyd County has an obesity rate of 32.3 percent and Greenup County has an obesity rate of 31.9 percent

The program will incorporate a multi-faceted approach and include segments of education, diet and nutrition, exercise, and behavioral strategies. The delivery method will embrace the use of several hospital service lines and our outreach centers of Bellefonte Physician Services. In order to reach the enter community, including the poor and marginalized population we will network with local corporations, business leaders, churches, school systems, health departments, libraries, and grocers.

Through this very informative process, the Obesity Action Plan continues to develop and evolve and is a working document that has been used to approach and determine stakeholders, and agencies needed to collaborate with to implement the goals and strategies that will address obesity and the identified significant health care issues that are associated with this condition; the document will also assist the organization in the process needed to implement the community plan.

**Our Lady of Bellefonte Hospital- Implementation Plan 2013-2015**

- Continue to support and expand (NEKCC) Free healthcare clinic uninsured adults
- Support RAM Clinic June 2013
- KY Colon Cancer Screening Program
- OLBH Mobile Mammography program
- Healthy Choices Kentucky
- The Family Practice Clinic and Residency Program

- Healthy Community Services Program and Transportation Services
- Childhood and adult obesity programs- within the communities
- Healthy Community Initiatives Program
- Enhance collaboration and advocacy with City, County and State Leaders
- Advocate for safe walking facilities, safe routes to schools public transportation
- Collaborative efforts with schools, churches and local agencies
- Increase the number of school-aged children who have access to health care and to increase the number of children who have health insurance
- Continue collaborative efforts to work towards a healthy tri-state area
- Continue to support partners who assist and help the poor and indigent of our region
- Continue to collaborate with local schools to encourage Academic achievement

#### **COMMUNITY HEALTH PROGRAMS AND SERVICES –**

**“Northeast Kentucky Care Center” (NEKCC)**-A collaboration effort between multiple agencies and local health departments resulted in a non-profit free health clinic serving uninsured residents of Boyd and Greenup Counties. The clinic is staffed by volunteers and has already had over 600 patient visits. We continue to support NEKCC free health care clinic through Board appointment, staff volunteers, physician staffing, financial contributions, donations and grant funding.

**Remote Area Medical (RAM)**-In Collaboration with Greenup County Health Dept. Remote area medical (RAM) clinic will be held in June of 2013. The clinic provides free Medical, Dental and Vision care to Adults and Children. Services provided are for the Uninsured, Underinsured, the Unemployed, or those who cannot afford these services.

**Cancer screening Programs-** OLBH mobile Mammography program serves residents in the rural community and local organizations by offering services in the local community. With grant funding, residents receive services at no cost for uninsured residents. Through collaborative efforts our area received a Kentucky Colon Cancer Screening Program. This was an effort between Greenup, Carter and Lawrence County Health Departments, Our Lady of Bellefonte Hospital and Three Rivers Medical Center. The two year funding received will cover screening for over 600 individuals through this screening program. Kentucky residents who meet the established guidelines on age,

income, lack of public or private insurance coverage will be provided with a self-administered test that they mail to the state lab “FIT” test or be referred for a Colonoscopy depending on individual risk factors.

**Diabetes Center-** Diabetes self-management including nutrition education at OLBH site daily, Grayson Primary Care 3 days a month, and South Shore Primary Care 1 day a month and diabetes education in the hospital setting daily. Resource assistance includes testing supplies and insulin for indigent patient, assistance with pharmaceutical assistance programs. Participation in community diabetes programs and wellness initiatives with Carter County and Greenup County coalitions; assists with diabetes education at NEKCC free clinic. Participation in health fairs and community diabetes screenings along with support groups include *Camp Quest*—a youth support group for children with diabetes and asthma; this group meets 4 times a year and includes a summer camp program for participants, Greenup County Diabetes Today Coalition is a collaborative effort between OLBH and the Greenup County Health Department, the Coalition meets monthly and serves residents of Boyd and Greenup Counties.

**Primary care outreach centers-**Recognizing the need to reach into the communities the hospital serves; OLBH began operating outreach centers in the 1980s. OLBH Primary care Services have expanded in the past years to include six (6) different facilities. These centers provide primary and urgent care services, as well as lab and x-ray services. Additional physician affiliated practices are also being acquired and opened to serve the residents of the communities in our primary service areas.

**Behavioral Health/Mental Health and Chemical Dependency-** the Bellefonte Behavioral Health Center, located on the OLBH campus, is equipped with health care professionals experienced in the practice of providing both individual and group therapy. Educational advice and confidential assessments about psychiatric conditions, anxiety, depressive moods, and psychotic disorders are available. Comprehensive treatment of chemical dependency for alcoholism and other drug abuse are available for patients and family members. Levels of care are based on criteria endorsed by the American Society of Addiction Medicine; specially-trained staffs experienced in the aftercare and support group meetings also are an important emphasis of the center's treatment plans.

**Prevention Services/Screenings** In FY12, Healthy Community Services conducted one hundred (100) health fairs and screenings resulting in the following: personal health counseling, and those with abnormal results received appropriate educational materials and the offer of assistance in finding a health care provider if they had none. Participants were given a copy of their screening results and encouraged to share these results with their health care provider. Additionally, the services of our Diabetes Center, Firm Fitness and the Human Motion Vitality Center, and nutrition services were recommended when appropriate. Information about the Northeast Kentucky Care Center, our local “free”



clinic was also given to participants who were uninsured or couldn't afford a health care provider.

**Faith Community Health Ministry** OLBH currently partners with fifty (50) local churches in health ministry and about nineteen (19) additional congregations are on our mailing list. A significant number of our health fairs and community flu shot clinics were held in our partnering congregations. Additionally, our congregational partners receive a monthly mailing that provides an article suitable for their church newsletter that blends scripture with timely health education. Information about health issues and events at the local, state and national levels is also included in the mailing. This includes information about advocacy and resources that might benefit members of the congregation. We also provide weekly Wellness Tips for Body, Mind and Spirit that can be used in church bulletins. Our mailing is also shared with the Kentucky Parish Nurse Network and the BSHI Parish Nurse Network which significantly increases the number of congregations we reach. In FY12 we transitioned our lay health ministry model to a true faith community nurse model of health ministry by offering the basic preparation course for faith community nurses this course is endorsed by the International Parish Nurse Resource Center. The program is offered in three one-and-one-half day sessions scheduled one month apart.

**Community Health Education programs** Healthy Community Services provides our community CPR classes. In FY11 we provided fourteen classes and certified ninety-one individuals in CPR. We provided one Safe Sitter class in FY11 resulting in fifteen certified Safe Sitters. We also offered a parish nurse conference and retreat with thirteen nurses in attendance and a diabetes education program to the Salvation Army's Home League. The Salvation Army is one of our health ministry partners and fifteen ladies attended this program

**Healthy Community Initiative's** A healthy community initiative is founded in long term, collaborative relationships in which service organizations engage and empower the members of a defined geographic community to support them in improving their quality of life and holistic health. Bon Secours Kentucky has pursued Healthy Communities work in two neighborhoods within its service area – a rural area of Greenup County called Argillite, and the central area of Ironton, Ohio. OLBH Healthy Community Initiatives leaders attends and offers community forums, meetings and organizational events to develop both relationships and gain a better understanding of the unique social, economic and cultural needs of the community.

## APPENDIX A

### **Input Community Health Needs Assessment**

1. Community Health Needs Assessment Survey-online and paper version
2. Community Benefit Planning Committee
3. Focus groups with local organizations and residents
4. MAPP Greenup County Assessment- Focus groups, community forums, steering committee, Community Health Improvement plan

### **Our Lady of Bellefonte Hospital - Community Health Needs Assessment Survey**

[http://www.surveymonkey.com/s/olbh\\_cna](http://www.surveymonkey.com/s/olbh_cna)

**“Dear Community Member,**

Make your opinions count. We are currently conducting a survey of community professionals and volunteers in Our Lady of Bellefonte Hospital (OLBH) primary and secondary service areas. OLBH is seeking feedback on the health needs of the communities we serve.

This survey will take approximately 5 minutes and your answers will be kept strictly confidential. To participate in this survey, simply click on the link below or copy and paste this address into your Web browser: [http://www.surveymonkey.com/s/olbh\\_cna](http://www.surveymonkey.com/s/olbh_cna) Please feel free to share this survey link with others; the OLBH survey is open to the public, we are seeking participation from a wide range of people. If you have any questions about the survey, experience difficulties accessing this link or would like to discuss community issues, please feel free to contact me by e-mail or phone. We would like to thank you for your participation in this important community project.

### **Greenup County Health Department: MAPP**

The local County Public Health Departments employs a variety of professionals to track and meet the diverse health needs of county residents. In addressing health needs as identified by the state and local agencies, the Health Department sponsors preventative health programs on parenting skills, diabetes education and prevention. In addition the Health Department places nurses in area school districts to provide skilled professionals to work with students.

**The essential services of the local Kentucky health departments include:**

- Monitor the health status of the population & environment & identify health problems.
- Promote positive health behaviors and environmental practices.
- Mobilize community partnerships to solve identified health problems.
- Enforce laws and regulations that protect the health of the public and the environment.
- Counsel and support high-risk children, youth and families.
- Assure access and provide linkages to personal health services.
- Provide prenatal services to low income mothers.
- Develop policies that support and protect the health of the community and the environment.
- Health Education classes on Tobacco, Physical Activity, Diabetes,
- Preparedness and Epidemiology programs prevent and control the spread of communicable disease.
- Clinical Services provided include; family planning, TB, women's cancer screening, lead screening, immunizations, sexually transmitted diseases.
- WIC Program- supplemental nutrition and breastfeeding program.
- Hands Program- Health Access nurturing development program first time moms or dads.
- School health program provides school clinics with nurses in local school districts.

**The following list identifies potential community partners and organizations to collaborate with to implement our community benefit plan:**

**Greenup and Boyd County Champion for a Healthy Community**

Location: Bellefonte Centre

Time: Second Tuesday of every month at 11:30 a.m.

**Greenup County Drug Free Coalition**

Location: Sunshine Methodist Church, 16 Tygart's Bend, South Shore, KY

Time: Second Thursday of every month at 6:30 p.m.

**Healthy Kids, Healthy Community**

Location: Ashland-Boyd County Health Department

Time: Meet quarterly. Next meeting will be 05/22/13 at 8:30 am.

**Health Choice Kentucky**

Contact Chuck Charles at 606-833-3655 or Tawnia Jones at 606-833-3655 for information.

## APPENDIX B

### Public Data from State, regional and National sources that was accessed:

- Boyd County Health Department website
- Greenup County Health Department- MAPP & website
- Carter County Health Department website
- 2011-2012 County Health Rankings
- U.S. Census 2010
- Ashland Alliance
- U.S. Bureau of Economic Analysis
- U.S. Bureau of Labor Statistics
- Kentucky Cancer Registry
- Kentucky Behavioral Health Risk Surveillance System, 2006 report
- CDC center for disease control and prevention
- Appalachian family & Children first council
- Annual planning survey analysis- Lawrence county, Ohio 2007

## Service Area Health Condition

Health Risk Behaviors	FVCO	Kentucky	USA
Mental distress	16.7%	14.1%	9.9%
Barriers to health care	13.5%	9.8%	6.0%
Fair or poor health	28.1%	23.1%	14.7%
Activity limitation	31.3%	27.7%	19.9%
Lack of health care coverage	24.0%	18.2%	14.1%
Current smoker	28.2%	28.5%	20.0%
Lack of physical activity	36.1%	30.4%	22.3%
No mammography	29.1%	23.0%	20.1%
Diabetes	13.1%	9.9%	7.7%
Arthritis prevalence	35.8%	34.2%	27.5%
Adult Asthma	10.0%	8.2%	8.4%
Overweight	74.7%	66.4%	62.3%
Cost as a barrier to seeing a doctor	17.7%	17.7%	12.4%
Requires use of special equipment due to health	7.5%	9.5%	6.7%
Coronary heart disease	5.9%	6.0%	4.5%
No dental care	21.7%	20.9%	19.5%
No health care coverage	15.5%	17.0%	14.5%
No cervical screening	19.3%	16.9%	16.0%
Unscreened for colon cancer	78.3%	80.3%	75.9%
Heart attack or myocardial infarction	5.3%	6.6%	4.1%
Lack of primary care provider	16.8%	18.4%	18.9%
No annual flu shot	29.2%	34.0%	30.9%
Heavy alcohol consumption	1.3%	2.0%	4.9%

Ashland & surrounding areas are higher than the national average for overall health status – in particular mental health, breast care, diabetes, smoking, asthma & health care access.

31% of Ashland area indicators mirror the U.S. average or are just above it.

Alcoholism, lack of primary care provider & flu immunization are better than the U.S. average.

Source: Kentucky Behavioral Health Risk Surveillance System, 2006 Report

# APPENDIX C

## BY ZIP CODE



