

### **REID HEALTH**

2019 Community Health Needs Assessment



## **TABLE OF CONTENTS**

Executive Summary	1
Introduction	1
Summary of Findings	1
Prioritized Areas	2
Introduction_	3
Reid Health_	
Reid Health Service Area	4
Reid Health Community Benefit Team	
Consultants	
Evaluation of Progress since Prior CHNA	6
Priority Health Topics from Preceding CHNA	
Community Feedback from Preceding CHNA &	
Implementation Plan	7
Methodology Overview	
Overview	
Secondary Data Sources & Analysis	
Primary Data Collection & Analysis	
Community Survey	
Focus Groups & Key Informant Interviews	
Data Considerations	
Prioritization	
Prioritization Session Participants	
Prioritization Process	13
Demographics	15
Population	15
Age	16
Race/Ethnicity	16
Social and Economic Determinants of Health	17
Income	17
Poverty	18
Unemployment	19
Education	20
Transportation	20
SocioNeeds Index®	21
Data Synthesis	23
Prioritized Significant Health Needs	24
Prioritization Results	
Mental Health & Substance Misuse	
Physical Activity, Nutrition, & Weight	
Advarca Childhood Expariances	20

Non-Prioritized Significant Health Needs	32
Cancer	32
Economy	
Older Adults & Aging	33
Heart Disease & Stroke	34
Transportation	34
Access to Health Services	35
Low Income and Underserved Populations	35
Other Findings	30
Barriers to Care	36
Disparities	3
Conclusion	38
Appendix A. Reid Health Impact Statement	39
Grants	58
Reid Health Community Benefit Implementation Plan	65
Mental Health and Substance Abuse	66
Access to Care	74
Physical Activity, Nutrition & Weight	83
Appendix B. Secondary Data Methodology	88
Secondary Data Sources	88
Secondary Data Scoring	89
Secondary Data Scoring Detailed Methodology	89
Data Scoring Results	90
Disparity Analysis	210
Secondary Data	210
Primary Data	210
Appendix C. Primary Data Methodology	211
Community Input Participants	211
Key Informant Interview Questionnaire	212
Focus Group Guide	215
Community Survey	217
Appendix D. Prioritization Tools	230
Prioritization Preparation Document	230
Data Synthesis Handout	232

Appendix E. Community Resources 235

**SECTION 1** 

## **EXECUTIVE SUMMARY**



#### INTRODUCTION

Reid Health is pleased to present its 2019 Community Health Needs Assessment (CHNA). As federally required by the Affordable Care Act, this report provides an overview of the methods and process used to identify and prioritize significant health needs in Reid Health's service area. Reid Health partnered with Conduent Healthy Communities Institute (HCI) to conduct the CHNA.

The goal of this report is to offer a meaningful understanding of the most pressing health needs across Reid Health's service area, as well as to guide planning efforts to address those needs. Special attention has been given to the needs of vulnerable populations, unmet health needs or gaps in services, and input from the community.

Findings from this report will be used to identify, develop, and target Reid Health initiatives to provide and connect patients with resources to improve these health challenges in our communities.

#### **SUMMARY OF FINDINGS**

The CHNA findings are drawn from an analysis of an extensive set of secondary data (over 150 indicators from national and state data sources) and in-depth primary data from community leaders, non-health professionals, and organizations that serve the community at large, vulnerable populations, and/or populations with unmet health needs.

Through an analysis of the primary and secondary data the following top health needs were determined:

- Access to Health Services
- Cancer
- Children's Health
- Diabetes
- Economy
- Exercise, Nutrition & Weight
- Heart Disease & Stroke
- Low Income and Underserved
- Mental Health & Mental Disorders
- Older Adults & Aging
- Substance Abuse
- Transportation

#### **PRIORITIZED AREAS**

On June 17th, 2019, Reid Health's Community Benefit team, other members from various departments in the hospital, and representative members of the community came together to prioritize the significant health needs in a session led by consultants from Healthy Communities Institute. While considering several prioritization criteria, the following three topics were identified as priorities to address:

- Mental Health & Substance Misuse
- · Physical Activity, Nutrition & Weight
- Adverse Childhood Experiences



#### **REID HEALTH**

Reid Health, located in Richmond, Indiana is a non-profit 217-bed regional referral medical center serving east central Indiana and west central Ohio. Reid Health's service area is home to about 285,267 people spanning eight counties across two states. Though a new hospital was opened in 2008, Reid Hospital originated in 1905 when Daniel G. Reid financed construction for the hospital in memory of his wife and son. Through the years, Reid Health has grown to employ 3,300 people and has the support of 300 volunteers. Major service lines within the organization include: Heart Services, Cancer Center, Women's Health, Orthopedic and Rehab Services, and Psychiatric Care.

**Mission Statement:** "Wholeness — in body, mind and spirit — is basic to fulfillment of human potential. Reid Health and its people work with others to enhance wholeness for all those we serve. Our convictions include commitment to:

- Compassion
- Service
- Excellence
- Value

These convictions are expressed daily through C.A.R.E. principles, the active demonstration of:

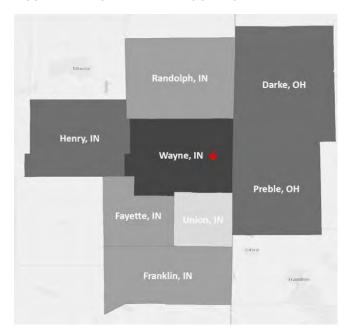
- Courtesy
- Attitude
- Respect
- Enthusiasm

These principles are directed toward those people we are privileged to serve and among all of us who serve."

#### **REID HEALTH SERVICE AREA**

Reid Health's service area consists of eight counties — Wayne, Randolph, Fayette, Union, Franklin, and Henry counties in Indiana, and Preble and Darke counties in Ohio as seen in Figure 1.

FIGURE 1: MAP OF REID HEALTH'S SERVICE AREA



#### REID HEALTH COMMUNITY BENEFIT TEAM

The Community Benefit Board Committee is the decision-making entity for Reid Health community benefit activities. The board committee is comprised of:

- Aleasia Stewart, Community Benefit Board Committee Member & Reid Health Governing Board Member
- · Denise Retz, Community Benefit Board Committee Member & Reid Health Governing Board Member
- Jim Tanner, Community Benefit Board Committee Member & Reid Health Governing Board Member
- · Karen Clark, Community Benefit Board Committee Member & Reid Health Governing Board Member
- Kathy Curz-Uribe, Community Benefit Board Committee Member & Reid Health Governing Board Member
- · Mark Harrington, Community Benefit Board Committee Member & Reid Health Governing Board Member
- · Robin Henry, Community Benefit Board Committee Member & Reid Health Governing Board Member
- · Tom Hilkert, Community Benefit Board Committee Member & Reid Health Governing Board Member
- Bob Warfel, Community Benefit Board Committee Member
- Laura Blessing, Community Benefit Board Committee Member
- Porter Miller, Community Benefit Board Committee Member
- William Doering, Community Benefit Board Committee Member
- Billie Kester, Vice President, Continuum of Care
- Angela Cline, Director, Community Benefit
- Judi Willett, Director, Marketing and Community Relations
- Justin Burkhardt, Director, Reid Foundation
- Patrick Ripberger, Community Benefit Specialist

#### **CONSULTANTS**

Reid Health commissioned Conduent Healthy Communities Institute (HCI) to conduct its 2019 Community Health Needs Assessment. HCI works with clients across the nation to drive community health outcomes by assessing needs, developing focused strategies, identifying appropriate intervention programs, establishing monitoring systems, and implementing performance evaluation processes. To learn more about Conduent Healthy Communities Institute, please visit https://www.conduent.com/community-population-health.

Report authors from HCI include:

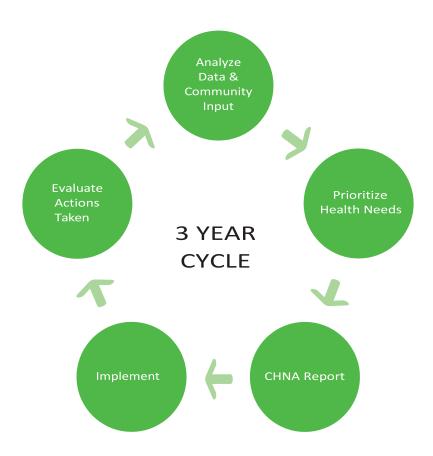
- Ashley Wendt, MPH
- Era Chaudhry, MPH

**SECTION 3** 

# EVALUATION OF PROGRESS SINCE PRIOR CHNA



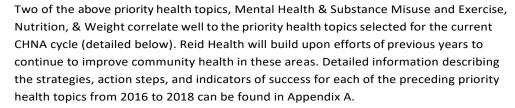
The CHNA process should be viewed as a 3-year cycle. An important piece of that cycle is revisiting the progress made on priority health topics set forth in the preceding CHNA. By reviewing the actions taken to address a priority health issue and evaluating the impact those actions have made in the community, it is possible to better target your resources and efforts during your next round of the CHNA cycle.



#### PRIORITY HEALTH TOPICS FROM PRECEDING CHNA

Reid Health's priority health topics for 2017-2019 were:

- Mental Health & Substance Misuse
- Access to Health Services
- Exercise, Nutrition, & Weight



In addition to the priority areas of Mental Health & Substance Misuse and Physical Activity, Nutrition, and Weight identified in this CHNA cycle, the area of Adverse Childhood Experiences was also identified as a priority health topic. This priority area includes general children's health needs and efforts in this area will support other health-related issues experienced by this vulnerable population.

## COMMUNITY FEEDBACK FROM PRECEDING CHNA & IMPLEMENTATION PLAN

Reid Health's preceding CHNA was made available to the public via the website reidhealth.org/about/community-benefit. In order to collect comments or feedback, a special email address was used: communitybenefit@reidhealth.org. No comments had been received on the preceding CHNA at the time this report was being written.

**SECTION 4** 

## **METHODOLOGY**



#### **OVERVIEW**

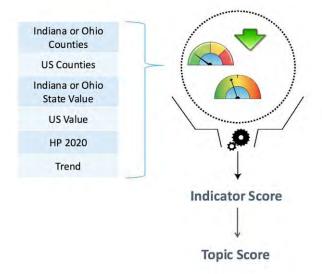
Two types of data were analyzed for this CHNA: primary and secondary data. Each type of data was analyzed using a unique methodology. Findings were organized by health topics. These findings were then synthesized for a comprehensive overview of the health needs in Reid Health's service area.

#### **SECONDARY DATA SOURCES & ANALYSIS**

Secondary data used for this assessment was collected and analyzed with HCI's Community Dashboard — a web-based community health platform developed by Conduent Healthy Communities Institute. The Community Dashboard brings non-biased data, local resources, and a wealth of information to one accessible, user-friendly location. It includes over 100 community indicators covering over 20 topics in the areas of health, determinants of health, and quality of life. The data is primarily derived from state and national public secondary data sources. The value for each of these indicators is compared to other communities, nationally or locally set targets, and to previous time periods.

HCI's Data Scoring Tool was used to systematically summarize multiple comparisons across the Community Dashboard in order to rank indicators based on highest need. For each indicator, the community value was compared to a distribution of Indiana or Ohio counties and US counties, state and national values, Healthy People 2020 and significant trends were noted. These comparison scores range from 0-3, where 0 indicates the best outcome and 3 the worst. Availability of each type of comparison varies by indicator and is dependent upon the data source, comparability with data collected for other communities, and changes in methodology over time. These indicators were grouped into topic areas for a higher-level ranking of community health needs.

FIGURE 3. SUMMARY OF TOPIC SCORING ANALYSIS



#### TABLE 1. COLLATED SCORING RESULTS

#### DATA SCORING RESULTS: REID HEALTH SERVICE AREA

Prevention and Safety

**Heart Disease & Stroke** 

Mental Health & Mental Disorder

Diabetes

Transportation

Maternal, Fetal & Infant Health

Substance Abuse

Older Adults & Aging

Other Chronic Diseases

Cancer

Because Reid Health's service area includes eight counties, data scoring results for each individual county were collated in order to determine the top health needs for the entire service area. Health topics for each county were characterized by frequency of occurrence as a top health issue across the service area, as well as by rank order. Table 1 above shows the health topic scoring results for Reid Health's service area, with Prevention and Safety scoring as the poorest performing health topic for the service area.

Please see Appendix B for further details on the quantitative data scoring methodology.

#### **PRIMARY DATA COLLECTION & ANALYSIS**

To expand upon the information gathered from the secondary data, HCI collected community input. Primary data used in this assessment consists of an English language community survey and qualitative data from key informant interviews and focus groups implemented in Reid Health's service area.

#### **COMMUNITY SURVEY**

One form of community input collected was via an online English language community survey. Survey Monkey was the tool used to distribute and collect responses for the community survey. Paper surveys were also made available. Answers to the paper survey were input into the Survey Monkey tool. The community survey was distributed across Reid Health's entire service area from April 10, 2019 to May 20, 2019. A total of 1,168 responses were collected. Results in this report are based on the eight counties that comprise Reid Health's service area. This was a convenience sample, which means results may be vulnerable to selection bias and make the findings less generalizable. Another limitation to the survey is that it was conducted only in English.

Out of the 1,168 respondents, 88.9% were female and 10.86% were male. They were comprised of 73.16% health professionals. Figure 4 below shows the breakout of race/ethnicities for the respondents.

FIGURE 4. COMMUNITY SURVEY RESPONDENT RACE ETHNICITY

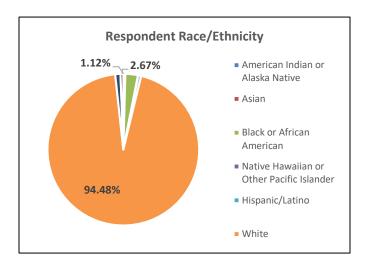
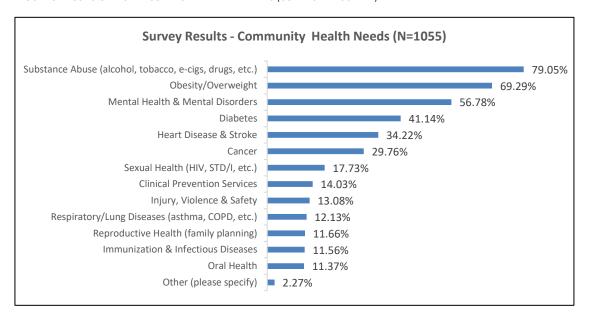


Figure 5 below shows respondents' ranking of the most important health issues from the community survey.

FIGURE 5. MOST SIGNIFICANT COMMUNITY HEALTH NEEDS (COMMUNITY SURVEY)



#### **FOCUS GROUPS & KEY INFORMANT INTERVIEWS**

#### **FOCUS GROUPS**

Another form of community input was collected via five focus groups with thirty-three participants total. These focus groups were held between April 29<sup>th</sup>, 2019 and May 2<sup>nd</sup>, 2019. The focus group discussions lasted between 60-90 minutes in length. Three of the five focus groups were held at Reid Health. Two additional focus groups were held in the communities of Connersville, Indiana (Fayette County) and Eaton, Ohio (Preble County).

During the focus group discussions, questions were asked to learn more about the community's overall health status, health needs, barriers to health, and available community resources. Notes from the focus group discussions were transcribed and uploaded to the web-based qualitative data analysis tool, Dedoose®. Excerpts were coded by relevant topic areas and key health themes. The frequency with which a health topic was discussed was used to assess the relative importance of that health and/or social need to determine the most pressing health needs of the community. The organizations to the right are representative of the individuals who participated in the interviews.

#### **KEY INFORMANT INTERVIEWS**

HCI consultants conducted key informant interviews via a questionnaire in order to collect community input. Interviewees who were asked to participate are recognized as having expertise in public health, special knowledge of community health needs and/or represent the broad interests of the community served by the hospital, and/or could speak to the needs of medically underserved or vulnerable populations. Fourteen individuals agreed to participate as key informants. The organizations to the right are representative of the individuals who participated in the interviews.

The fourteen key informant interviews were held between April 11<sup>th</sup>, 2019 and May 17<sup>th</sup>, 2019 via an email questionnaire. The questionnaire sought to gain information about the interviewee's background and organization, health needs and barriers of concern in the community, as well as the impact of health issues on vulnerable populations. A list of the questions asked on the questionnaire can be found in Appendix C.

#### FOCUS GROUP & KEY INFORMANT INTERVIEW ANALYSIS

The interview notes, along with the focus group notes, were uploaded to the web-based qualitative data analysis tool, Dedoose®. The transcripts were coded according to common themes in health and social determinants of health.

#### **Focus Group Organizations**

- Amigos
- Birth to Five
- CAECI
- Drug Free Wayne County Partnership
- Fayette County Community Voices
- Forward Wayne County
- Hope Center
- House of Ruth
- Independent Living Center
- · Ivy Tech Community College
- JACY House
- Monroe Central School Corp
- NATCO Community Empowerment Center
- Neighborhood Health Center
- Northeastern Middle School
- Preble County Council on Aging
- Wayne County Purdue Extension
- Reid Community Outreach
- Reid Health
- Richmond Farmers Market
- Richmond Senior Center
- Rock Solid Ministries
- Union County Opiate Center (Health Dept)
- United Way of Whitewater Valley
- Wayne County Tobacco Coalition

#### **Key Informant Organizations**

- Boys and Girls Club
- Fayette County Purdue Extension
- Independent Living Center
- Lifestream
- Natco Community Empowerment Center
- Neighborhood Health Center
- Preble County YMCA
- Wayne County Purdue Extension
- Reid Community Outreach
- Richmond Parks Department
- Richmond Senior Center
- Saint Paul United Methodist Church
- Union County Health Department
- Wayne County Foundation

#### **DATA CONSIDERATIONS**

Several limitations of the data should be considered when reviewing the findings presented in this report. Although the topics by which data are organized cover a wide range of health and health-related areas, within each topic there is a varying scope and depth of quantitative data indicators (secondary data) and qualitative findings (primary data). In some topics there is a robust set of quantitative data indicators, but in others there may be a limited number of indicators for which data is collected. The breadth of qualitative data findings is dependent on who was selected to be a key informant, as well as the availability of selected key informants for interviews during the time period of qualitative data collection. The Index of Disparity is also limited by data availability: there is no subpopulation data for some indicators, and for others there are only values for a select number of race/ethnic groups. For both quantitative and qualitative data, efforts were made to include as wide a range of secondary data indicators and key informant expertise areas as possible. It should also be noted that the majority of respondents from the community survey (N=1,168) were primarily white females.

#### **PRIORITIZATION**

In order to better target community issues regarding the most pressing health needs, thirty-three community members participated in a group discussion facilitated by HCI to hone in on the significant health needs presented. Those health needs will be under consideration for the development of an implementation plan that will address some of the community's most pressing health issues.

#### PRIORITIZATION SESSION PARTICIPANTS

- Alicia Criswell, Purdue Extension/Wayne County Food Council
- Angela Cline, Reid Health Community Benefit
- Angie Dickman, Reid Health Administration
- Becky Marvel, Fayette County Purdue Extension/Discover Connersville
- Billie Kester, Reid Health Administration
- Brian Schleeper, Wayne County Cardinal Greenway
- Candace Ridgeway, Wayne County TPC
- Carrie Miles, Neighborhood Health Clinic
- Carrie Williams, NAACP and SLP for Richmond Schools
- Chad Bolser, Ivy Tech Community College
- Chirs Knight, Reid Health Administration
- Craig Kinyon, Reid Health CEO
- Denise Retz, Richmond Parks and Recreation
- Gerard Cyranowski, Meridian Health Services
- Jennifer Ehlers, Reid Health Administration
- Jennifer Young, Hope Center
- Jessica Przybysz, Meridian Health Services
- Judi Willett, Reid Health Marketing and Community Relations
- Justin Burkhardt, Reid Foundation
- Katherine Good, Connersville Parks Department
- Kathryn Cruz-Uribe, Indiana University East
- Kelly Beall, Reid Health Administration
- Lisa Felsman, Centerstone
- Megan Sanders, Forward Wayne County

#### SECTION 4 METHODOLOGY

- Misty Hollis, Richmond YMCA
- Patrick Ripberger, Reid Health Community Benefit
- Porter Miller, Reid Health Community Benefit Board Committee Member
- Randy Kirk, Reid Health Administration
- Robin Henry, West End Bank
- Rylie Joy, Reid Health Foundation
- Tajuan Stoker, Reid Health Wellness
- Tom Hilkert, Reid Health Board President
- · Wendy McDavid, Randolph County Health Department/Reach All Randolph County Coalition

#### PRIORITIZATION PROCESS

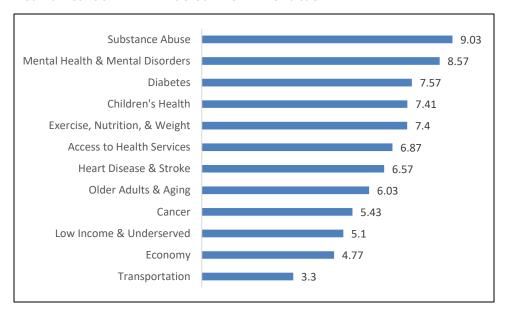
On June 17<sup>th</sup>, 2019 the above participants convened at Reid Health to review and discuss the results of HCl's primary and secondary data analysis leading to the preliminary top twelve significant health needs discussed in detail in Section 7. From there, participants utilized a prioritization toolkit (Appendix D) to examine how well each of the twelve significant health needs met the criteria set forth by Reid Health's project team. Participants scored each health need by the criteria on a scale from 1-3 with 1 meaning it did not meet the criteria to 3 meaning it strongly meets the criteria. The criteria for prioritization can be seen below:

- Propriety
- Economics
- Acceptability
- Magnitude
- Data Tracking

Completion of the prioritization toolkit in Appendix D allowed participants to arrive at numerical scores for each health need that correlated to how well each health need met the criteria for prioritization. Participants then ranked the top twelve health needs according to their topic scores, with the highest scoring health needs receiving the highest priority ranking. Participants were encouraged to use their own judgment and knowledge of their community in the event of a tie score.

After completing their individual ranking of the health needs, participants entered their ranking into an online survey tool to analyze the results. The aggregate ranking can be seen in Figure 6 below.

FIGURE 6. RESULTS OF REID HEALTH'S GROUP PRIORITIZATION SESSION



After consideration, it was decided to combine Substance Abuse and Mental Health & Mental Disorders into the singular category of Mental Health & Substance Misuse. The health topic of Diabetes was also rolled under the larger category of Physical Activity, Nutrition, & Weight. Finally, the category of Children's Health was categorized as Adverse Childhood Experiences. Thus, the final three top health priorities for Reid Healthare:

- Mental Health & Substance Misuse
- Physical Activity, Nutrition, & Weight
- Adverse Childhood Experiences

These three health topics will be broken down in further detail below in order to understand how findings in the secondary data and primary data led to each issue becoming a high priority health need for Reid Health.



The following section explores the demographic profile of Reid Health's service area. The demographics of a community significantly impact its health profile. Different race/ethnicity, age, and socioeconomic groups may have unique needs and require varied approaches to health improvement efforts. All demographic estimates are sourced from the U.S. Census Bureau's 2013-2017 American Community Survey unless otherwise indicated.

#### **POPULATION**

According to the U.S. Census Bureau's 2013-2017 American Community Survey, Reid Health's service area had a population of approximately 285,267. Figure 7 illustrates the population size by county and Figure 8 by zip code. As indicated by the red cross, Reid Health is geographically located in the center of its service area and within the most populated county and zip code.

FIGURE 7. POPULATION BY COUNTY

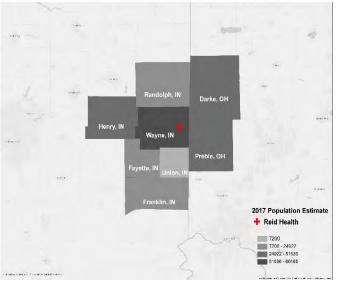
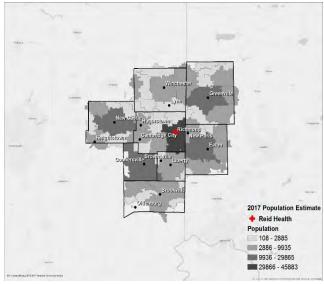


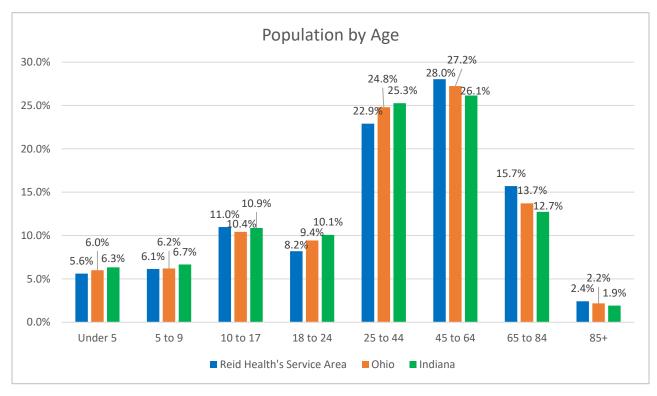
FIGURE 8. POPULATION BY ZIP CODE



#### AGE

Figure 9 shows Reid Health's service area population by age as compared to the age distribution for the state of Ohio and the state of Indiana. The age distribution of Reid Health's service area was similar to both Ohio and Indiana with the exception of some minor differences. Proportionally, there were slightly less persons, ages 18 to 44, in Reid's Health Service area than in both Ohio and Indiana. On the other hand, there were slightly more persons, ages 45 to 64, in Reid's Health Service area than respective state values. Finally, the 65 and over population in Reid's Health Service area was significantly larger when compared to the states of Indiana and Ohio.

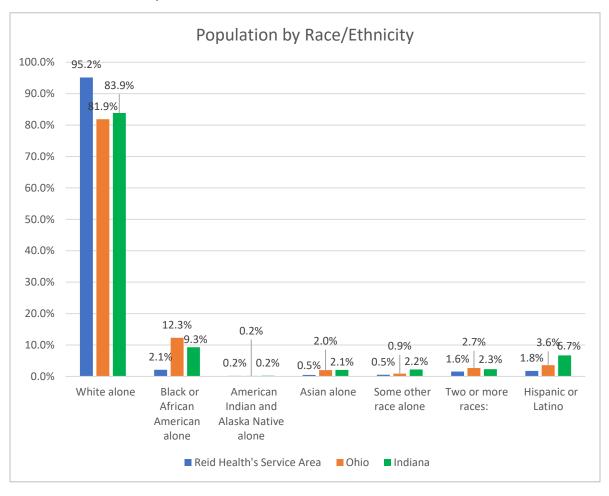
#### FIGURE 9. POPULATION BY AGE



#### RACE/ETHNICITY

The racial and ethnic makeup of Reid Health's service area was more homogenous compared to the state of Indiana and the state of Ohio, with approximately 95.2% of the population identifying as White, as indicated in Figure 10. Compared to Indiana and Ohio, Reid Health's service area had a smaller proportion of Black or African Americans, Asians, those who identify as two or more races, and Hispanic or Latinos. It was estimated that 1.8% of Reid Health's service area population identifies as Hispanic or Latino.

#### FIGURE 10. POPULATION BY RACE/ETHNICITY



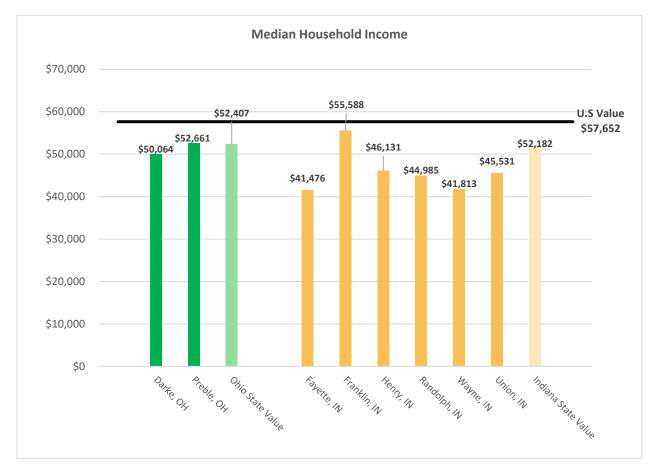
#### SOCIAL AND ECONOMIC DETERMINANTS OF HEALTH

This section explores the economic, environmental, and social determinants of health in Reid Health's service area. Social determinants are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.

#### INCOME

The figure below compares the median household income values for each county in Reid Health's service area to the median household income value for Indiana, Ohio, and the United States. All counties in Reid Health's service area had a median household income below the national value. Franklin County, Indiana had the highest estimated median household income at approximately \$55,588, which was just slightly higher than the median household income for the state of Indiana. Both Fayette County, Indiana and Wayne County, Indiana had the lowest approximate median household income at just below \$42,000; nearly \$15,000 less than the national value.

FIGURE 11. MEDIAN HOUSEHOLD INCOME



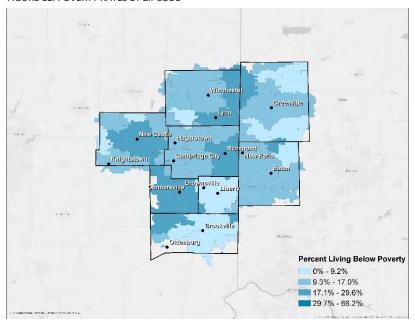
#### **POVERTY**

Out of the eight counties in Reid Health's service area, Fayette and Wayne counties had the highest proportion of the population living below poverty (18.2%). This value is higher than both the Indiana and Ohio poverty rate, 15.2% and 15.8%, respectively. The map below shows the population living below poverty by zip code. There were three zip codes with more than 25% of the population living below poverty, nearly double the Indiana and Ohio state values. Zip code 47035 had approximately 60% of its population living below poverty.

TABLE 2. COUNTY POVERTY RATES

County Results	
Fayette, IN	18.2%
Wayne, IN	18.2%
Randolph, IN	17.0%
Henry, IN	16.1%
Preble, OH	12.4%
Darke, OH	11.6%
Franklin, IN	9.9%
Union, IN	8.2%

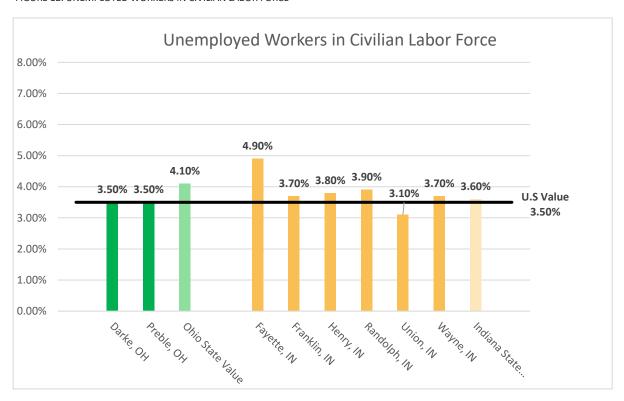
FIGURE 12. POVERTY RATES BY ZIPCODE



#### UNEMPLOYMENT

The unemployment rate in Reid Health's service area ranged from 3.5% in Darke County, Ohio, to 4.9% in Fayette County, Indiana. Additionally, six out of eight counties in Reid Health's service area had higher unemployment rates when compared to the U.S. value for unemployment (3.5%). Figure 12 displays the unemployment rates for each county in Reid Health's service area as of November 2018.

FIGURE 12. UNEMPLOYED WORKERS IN CIVILIAN LABOR FORCE



#### **EDUCATION**

Figure 13 displays the population, age 25+ with a high school degree or higher for each county in Reid Health's service area. High school degree attainment is fairly similar between counties in the service area and compared to the Indiana state value (88.3%), the Ohio state value (89.8%), and the U.S. national value (87.3%).

However, Fayette, Indiana had the lowest high school attainment in Reid Health's service area at approximately 82.0%.

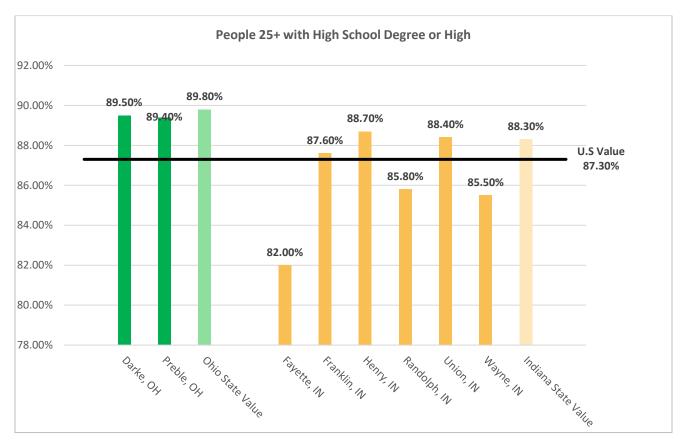


FIGURE 13. POPULATION 25+ WITH A HIGH SCHOOL DEGREE OR HIGHER

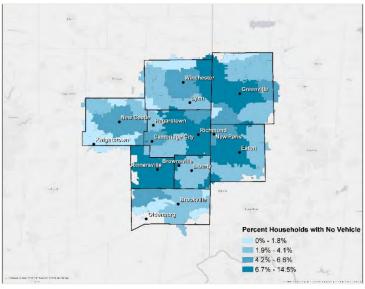
#### **TRANSPORTATION**

The map below shows the percent of households without a vehicle by zip code. The darkest shaded regions on the map indicate zip codes with the highest proportion of households without a vehicle, ranging from 6.7% to 14.5%. Out of the eight counties in Reid Health's service area, Wayne County had the highest proportion of households without a vehicle, at 10.1%. Residents in these impacted locations may be more likely to experience difficulties accessing services provided by Reid Health.

TABLE 3. PERCENT HOUSEHOLDS WITH NO VEHICLE BY COUNTY

County Results	
Wayne, IN	10.1%
Fayette, IN	8.7%
Darke, OH	5.5%
Preble, OH	5.3%
Randolph, IN	4.9%
Henry, IN	4.1%
Union, IN	3.9%
Franklin, IN	3.1%

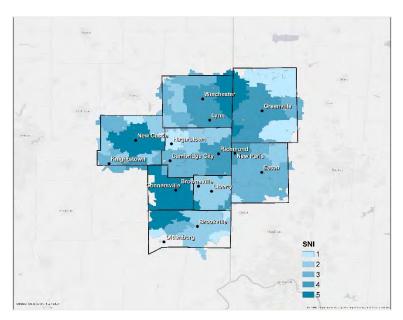
FIGURE 14. PERCENT HOUSEHOLDS WITH NO VEHICLE



#### **SOCIONEEDS INDEX®**

Healthy Communities Institute developed the SocioNeeds Index \*to easily compare multiple socioeconomic factors across geographies. This index incorporates estimates for six different social and economic determinants of health — income, poverty, unemployment, occupation, educational attainment, and linguistic barriers — that are associated with poor health outcomes including preventable hospitalizations and premature death. Within the Reid Health service area, zip codes are ranked based on their index value to identify the relative levels of need, as illustrated by the map (Figure 15). Based on the zip codes comprising each county, Fayette County, Indiana was determined to be the county with the highest level of socioeconomic need in Reid Health's Service Area. Looking at the data more granularly, the following zip codes had the highest level of socioeconomic need (as indicated by the darkest shade blue): 45390, 47024, 47390, 47331, 45332, and 47362.

FIGURE 15. SOCIONEEDS INDEX® FOR REID HEALTH'S SERVICE AREA



Understanding where there are communities with high socioeconomic need is critical to forming prevention and outreach activities.

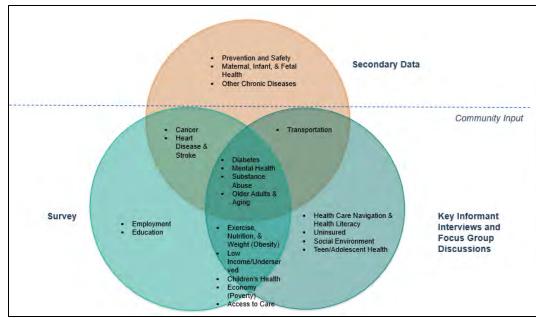
SECTION 6

# DATA SYNTHESIS

As mentioned in the data methodology section of this report, all forms of data have their own strengths and limitations. In order to gain a comprehensive understanding of the significant health needs for Reid Health's service area, the findings from all three data sets were compared and studied together using a Venn diagram.

The secondary data scores, interviews and focus groups, and the community survey were treated as three separate sources of data. The top health needs identified from each data source were analyzed for areas of overlap with the other two data sources. Health needs were determined to be significant if they were cited as a top need in at least two of the three data sources. The identified significant health needs were further used for prioritization.

FIGURE 16. DATA SYNTHESIS RESULTS



REID HEALTH'S SIGNIFICANT HEALTH NEEDS

Access to Health

Cancer

**Diabetes** 

Children's Health

Education

Exercise,
Nutrition &
Weight

Heart Disease & Stroke

Low Income & Underserved

Mental Health & Mental Disorders

Older Adults & Aging

Substance Abuse

Transportation



**SECTION 7** 

# PRIORITIZED SIGNIFICANT HEALTHNEEDS

#### PRIORITIZATION RESULTS

Upon completion of the group prioritization session, three health needs were identified for subsequent implementation planning by Reid Health. These three health needs are: Mental Health & Substance Misuse; Physical Activity, Nutrition and Weight; and Adverse Childhood Experiences. The following section will dive deeper into each of these health topics in order to understand how findings from the secondary and primary data led to each health topic becoming a priority health issue for Reid Health.

#### **MENTAL HEALTH & SUBSTANCE MISUSE**

#### **KEY ISSUES**

- Access to mental health services is limited — especially concerning for children, families, and seniors
- Substance misuse is a financial burden for families and the community
- Untreated past trauma and stigma related to accessing care compounds the issues of substance misuse and mental health

#### SECONDARY DATA

From the secondary data scoring results, both Substance Misuse and Mental Health & Mental Disorders were identified to be a top health need in Reid Health's service area. Mental Health & Mental Disorders was a top health need in seven out of eight counties in the service area, and Substance Misuse was also a top health need in six out of eight counties. Further analysis was done to identify indicators of concern across the service area. If an indicator within a health topic had a resulting data score of 2.0 or higher in at least half of the counties in Reid Health's service area, that indicator was categorized as an indicator of concern.

#### MENTAL HEALTH

#### Mental Health Provider Rate, 2018 (providers/100,000 population)

IN V	IN Value		OH Value		US Value		0 Target
15	150		212		229		_
Darke, OH	Fayette, IN	Franklin, IN	Henry, IN	Preble, OH	Randolph, IN	Union, IN	Wayne, IN
70	69	31	83	73	28	14	471

#### Age- Adjusted Death Rate due to Suicide, 2015-2017 (Deaths per 100,000 population)

IN	l Value	OI	OH Value US Value HP 2020		0 Target		
14			14.3				_
Darke, OH 16.2	Fayette, IN 29.3	Franklin, IN —	Henry, IN 17.9	Preble, OH 20.2	Randolph, IN —	Union, IN —	Wayne, IN 20.8

#### Depression: Medicare Population, 2017 (percent)

11	N Value	OI	H Value	US	Value	HP 202	20 Target
	20.3		19.7		17.9		_
Darke, OH	Fayette, IN	Franklin, IN	Henry, IN	Preble, OH	Randolph, IN	Union, IN	Wayne, IN
17.7	21.9	16.7	19.7	20.3	19.8	20.2	24.7

#### Age-Adjusted Death Rate due to Alzheimer's Disease, 2015-2017 (deaths/100,000 population)

11	N Value	0	H Value	US	Value	HP 202	0 Target
	34.4		32.7	3	30.3		_
Darke, OH 42.5	Fayette, IN 42.5	Franklin, IN 25.8	Henry, IN 36	Preble, OH 34.9	Randolph, IN 18.6	Union, IN 	Wayne, IN 32.7

Access to Mental Health Providers is an indicator of concern for all but one county in Reid Health's service area, and the range in values depicts geographic disparities in the service area. Union County, Indiana has a Mental Health Provider Rate of approximately 14 providers per 100,000 population, while Wayne County, Indiana has a rate of approximately 471 providers per 100,000 population — nearly four times the Indiana state value. The lower rate in Union County demonstrates a gap in mental health services in the rural communities within Reid Health's service area.

Secondary data results also revealed high rates of death due to Alzheimer's in Reid Health's service area counties as they compare to the Indiana and Ohio state values as well as the US value.

#### SUBSTANCE MISUSE

Mothers who Smoked During Pregnancy, 2013, 2	2017 JIN	II, 2010	IOHI	(percent)
----------------------------------------------	----------	----------	------	-----------

IN Valu	IN Value			US Value		HP 202	:0 Target
13.5		17.8		9.2		1	1.4
Darke, OH 19.2	Fayette, IN 21.2	Franklin, IN 15.7	Henry, IN 24.7	Preble, OH 21.3	Randolph, IN 22.6	Union, IN 29.9	Wayne, IN 14.5

#### Adults who Smoke, 2016 (percent)

IN Value			OH Value	US V	'alue	lue HP 2020	
21.1			22.5	1	7	1	
Darke, OH	Fayette, IN	Franklin, IN	Henry, IN	Preble, OH	Randolph, IN	Union, IN	Wayne, IN
19.8	23	18.8	21.3	20.2	20.5	19.8	21.5

#### Death Rate due to Drug Poisoning, 2015-2017 (deaths/100,000 population)

IN Va	IN Value 23.2		alue	US Value		HP 202	0 Target
23.			36.6		19.3		_
Darke, OH 42.5	Fayette, IN 70	Franklin, IN 26.4	Henry, IN 16.4	Preble, OH 53.4	Randolph, IN 43.9	Union, IN 50.9	Wayne, IN 66.6

#### Liquor Store Density, 2016 (stores/100,000 population)

IN Va	IN Value OH Va		Value US Value			HP 2020 Target		
12.	5	6.7		10.5		_		
Darke, OH 9.7	Fayette, IN 8.6	Franklin, IN 17.6	Henry, IN 18.5	Preble, OH 2.4	Randolph, IN 23.9	Union, IN 13.7	Wayne, IN 21	

Substance Misuse is a health topic area with limited secondary data indicators, but was mentioned frequently during primary data collection. In the case of Substance Misuse, secondary data results help to contextualize some of the specifics mentioned in community input.

Secondary data results revealed that the proportion of Mothers who Smoke during Pregnancy is higher in Reid Health's service area when compared to the Indiana and Ohio proportions. The national target for the percent of mothers who report smoking during pregnancy is 1.4%, and no counties in Reid Health's service area have met this target. The range of values in Reid Health's service area is from 15.7% (Franklin, Indiana) to 24.7% (Henry, Indiana). Smoking rates among the general population in Reid Health's service area are similar to the smoking rates for Indiana, Ohio, and the U.S. However, none of the counties in Reid Health's service area have met the Healthy People 2020 national target of 12% for smoking among the adult population.

Other secondary data indicators that further help contextualize the community input regarding Substance Abuse include the Death Rate due to Drug Poisoning and the Community Liquor Store Density. The Death Rates due to Drug Poisoning across counties in Reid Health's service area are higher compared to Indiana (23.2 deaths/100,000 population), Ohio (36.6 deaths/100,000 population), and the national rate (19.3 deaths/100,000 population). Fayette County, Indiana had the highest rate at approximately 70 deaths/100,000 population. Lastly, the Liquor Store Density indicator illustrates the environmental context around substance abuse in which people live. Seven out of eight counties in Reid Health's service area have higher liquor store densities compared to Indiana, Ohio, and the US.

#### PRIMARY DATA

Community survey participants were asked to rank the most pressing health issues in their community. Mental Health & Mental Disorders were ranked as the second most pressing health issue in Reid Health's service area. Substance Misuse was overwhelmingly selected as the number one most pressing health issue for Reid Health's service area.

#### Mental Health

The most pressing issues regarding Mental Health & Mental Disorders, as mentioned by key informants and focus group participants, revolved around gaps in services and the lack of service providers. These findings reinforced secondary data by citing that there are a lack of mental health providers in rural parts of the service area. Respondents specifically mentioned loneliness and isolation, stigma, and untreated past trauma as factors that exacerbate mental health issues in their community. These issues delay or prevent individuals from seeking the care they need.

"I believe that untreated mental health issues lead to many other diseases we see on the rise, predominately drug

#### Substance Misuse

Substance Misuse was one of the most frequently talked about issues during community input gathering. Substance Misuse was also identified as the number one most pressing health issue by survey respondents. Issues mentioned by key informants and focus group participants related to this issue included the financial burden for families and the community brought on by substance misuse as well as the barriers it creates to find gainful employment. Key informants and focus group participants mentioned that because of pre-employment drug testing, many people are not eligible for employment, which creates a cycle of poor mental health, continued drug use, unemployment, and criminal activity. Community members stated that drug use in this community has a broad economic impact of decreasing the available workforce.

The specific impact on senior citizens in Reid Health's service area by Substance Misuse was also mentioned by several key informants and focus group participants. Participants explained that grandparents often took on the responsibility for the care of their grandchildren when parents ran into trouble because of Substance Misuse. The obligation for caring for themselves as well as grandchildren and other extended family creates additional financial strain for many who are already living on fixed incomes.

Findings from the qualitative analysis also emphasized the need for additional prevention programs, specifically those targeting prevention among youth. Many respondents believed that more school-based prevention programs would be beneficial.

"Senior citizens are experiencing the financial burden of caring for family and extended family due to the drug crisis."

#### PHYSICAL ACTIVITY, NUTRITION, & WEIGHT

#### **KEY ISSUES**

- Access and availability of affordable healthy foods (i.e. grocery stores) is a concern for low-income families and older adults in rural areas
- Health literacy should be addressed on topics of healthy eating, healthy lifestyles and disease prevention
- Need for cost effective, accessible exercise options

#### SECONDARY DATA

From the secondary data scoring results Physical Activity, Nutrition, & Weight was identified to be a top health need in Reid Health's service area. The Reid Health Team decided to categorize this prioritized health need area as Physical Activity, Nutrition, & Weight instead of Exercise, Nutrition, & Weight as it was presented during Prioritization. The prioritized health category of Diabetes was also folded within this larger category. Interventions adopted to address Diabetes will all fall within this larger category. Further analysis was done to identify indicators of concern across the service area. If an indicator within a health topic had a resulting data score of 2.0 or higher in at least half of the counties in Reid Health's service area, that indicator was categorized as an indicator of concern.

#### Child Food Insecurity Rate, 2017 (percent)

IN Value C		OH Value US Value			HP 2020 Target			
	17.4		19.6	-	17		_	
Darke, OH 18.9	Fayette, IN 20.4	Franklin, IN 15.1	Henry, IN 19.3	Preble, OH 18.8	Randolph, IN 19.5	Union, IN —	Wayne, IN 19.5	

#### Workers who Walk to Work, 2013-2017 (percent)

	IN Value C		OH Value US Value			HP 2020 Target		
	2.1		2.2	2.7		3	3.1	
Darke, OH 2.2	Fayette, IN 1.3	Franklin, IN 0.6	Henry, IN 1.3	Preble, OH 1.9	Randolph, IN 1.6	Union, IN 1.5	Wayne, IN 3	

#### Access to Exercise Opportunities, 2019 (percent)

11	IN Value 75.3		OH Value 84.1		US Value 83.9		HP 2020 Target	
							_	
Darke, OH	Fayette, IN	Franklin, IN	Henry, IN	Preble, OH	Randolph, IN	Union, IN	Wayne, IN	
53.7	71.3	52.7	68.3	41.8	49.5	69.7	72.2	

#### Adults 20+ who are Sedentary, 2015 (percent)

I	N Value	0	H Value	US V	/alue	HP 202	IP 2020 Target	
	25.1		24.6 22.2		2.2	32.6		
Darke, OH 28.8	Fayette, IN 29.9	Franklin, IN 27.5	Henry, IN 25.3	Preble, OH 31	Randolph, IN 26.3	Union, IN 30.5	Wayne, IN 32	

#### Adults 20+ with Diabetes, 2015 (percent)

IN Value 10.5		OH Value 9.5		US Value —		HP 2020 Target	
							_
	Fayette, IN	Franklin, IN	Henry, IN	Preble, OH	Randolph, IN	Union, IN	Wayne, IN 10.7
		Franklin, IN 10.4		Preble, OH 11.3	Randolph, IN 9.8	_	on, IN .2.1

#### Age Adjusted Death Rate due to Diabetes, 2014-2017 (deaths per 100,000 population)

IN Value		OH Value		US V	/alue	HP 2020 Target		
	26.5		25.0	2	1.2		_	
Darke, OH 20.0	Fayette, IN 39.6	Franklin, IN 28.2	Henry, IN 43.1	Preble, OH 25.9	Randolph, IN 19.4	Union, IN 35.9	Wayne, IN 29.5	

Based on the secondary data results, the indicators of concern represent risk factors, the impact of the built environment, and provide context into the current state of health for many residents in Reid Health's service area.

First, looking at risk factors, the percent of adults who are sedentary ranges from 27.5% (Franklin, Indiana) to 32% (Wayne, Indiana) for counties in Reid Health's service area. Compared to the states of Indiana and Ohio, Reid Health's service area performs similarly. Access to Exercise Opportunities is another indicator illustrating a community's resources for physical activity. The percent of the population with access to exercise opportunities in Reid Health's service area ranged from 41.8% (Preble, Ohio) to 72.2% (Wayne, Indiana). All counties in the service area fall below the Indiana and Ohio state averages.

Additionally, the Child Food Insecurity Rate is a poorly performing indicator for every county in Reid Health's service area. The range of values for the percent of children who are food insecure is from 14.2% (Union, Indiana) to 20.4% (Fayette, Indiana). Between a guarter and a third of all children in Reid Health's service area are food insecure, which, while only slightly higher compared to the values of Indiana or Ohio, is much higher than the US value of 17%. Child food insecurity was further discussed during community input as a main factor in children's ability to be focused and do well in school.

Lastly, Diabetes was a top need in six counties in Reid Health's Service area. Two poorly performing indicators within this topic area were Adults 20+ with Diabetes and Age-Adjusted Death Rate due to Diabetes. The percentage of Adults 20+ with Diabetes ranges from 9.3% (Darke, Ohio) to 12.3% (Henry, Indiana) among Reid Health's service area counties, compared to the states of Indiana and Ohio, Reid Health's service area performs similarly. The Age-Adjusted Death Rate due to Diabetes is highest in Henry County, Indiana (43.1 deaths/100,000 population) and in Fayette County, Indiana (39.6 deaths/100,000 population).

"The issue with Obesity is that it affects a wide range of the community. I feel it is the biggest issue among the youth of our community. They don't see the need to get off the couch, away from their electronics."

#### PRIMARY DATA

Community survey participants were asked to rank the most pressing health issues in their community. Physical Activity, Nutrition, & Weight was ranked as the third most pressing health issue in Reid Health's service area. Diabetes was ranked as the sixth most pressing health issue by community survey respondents.

#### Physical Activity, Nutrition & Weight

Input from key informants and focus group participants focused around the impact of sedentary lifestyles and the need for improved access to affordable, healthy, fresh foods in their community. Community members mentioned that transportation issues, particularly in rural areas across the service area, and the general lack of grocery stores as being barriers to accessing healthy foods. Foods of convenience are often easier options for busy individuals and families but can negatively impact health. Participants also connected the rising rates of obesity in their community to the increased prevalence of other chronic diseases such as high blood pressure and diabetes. Additional data provided by Connect2Help 211 shows that 11% of callers to their help line between 2018 and 2019 indicated issues with food insecurity.

#### Diabetes

Diabetes was the sixth most pressing health issue in Reid Health's service area. As mentioned in key informant interviews and focus group discussions, there is a need for improved access to care and preventative programs and resources. Respondents specifically mentioned the need to address misconceptions related to diabetes, individual's health literacy in understanding the importance of prevention, and appropriate diagnosis and treatment for those living with diabetes. Qualitative findings also indicated a higher prevalence of diabetes among the Hispanic community as well as communities living in poverty. The text bubble to the right is a paraphrased quote gathered from the community input.

"Getting people help with diabetes and high blood pressure is a constant battle."

#### **ADVERSE CHILDHOOD EXPERIENCES**

The priority area of Adverse Childhood Experiences includes general children's health needs and efforts in this area will support other health related issues experienced by this vulnerable population. The Centers for Disease Control and Prevention define Adverse Childhood Experiences (ACEs) as all types of abuse, neglect, and other potentially traumatic experiences that occur to people under the age of 18.

#### **KEY ISSUES**

- Rates of uninsured children
- Rates of child abuse in certain service counties
- The impact of parental drug abuse on youth
- Obesity and sedentary lifestyle among youth

#### SECONDARY DATA

Analysis was done to identify indicators of concern across the service area. If an indicator within a health topic had a resulting data score of 2.0 or higher in at least half of the counties in Reid Health's service area, that indicator was categorized as an indicator of concern.

#### Child Abuse Rate (HP2020), [2015,2016,2017] (cases/1,000 children)

IN Value	IN Value		OH Value		Value	HP 2020 Target	
17.7		7.3		g	9.1	_	
Darke, OH 5.9	Fayette, IN 26.7	Franklin, IN 17.2	Henry, IN 11	Preble, OH 5.6	Randolph, IN 20.9	Union, IN 26.2	Wayne, IN 15.6

#### Children with Health Insurance, 2017 (percent)

IN Value		OH Value		US Value		HP 2020 Target	
93.7		95.4		—		100	
Darke, OH	Fayette, IN	Franklin, IN	Henry, IN	Preble, OH	Randolph, IN	Union, IN	Wayne, IN
94.2	94.4	93.5	94.7	95.1	93.8	93.3	93.5

From the secondary results, the most concerning indicator for counties in Reid Health's service area is the percentage of Children with Health Insurance, which is lowest in Union County, Indiana at 93.3 percent. When comparing the Child Abuse Rate for Reid Health's service area to the states of Indiana and Ohio, we see that four of the eight counties in Reid Health's service area have a higher child abuse rate.

#### PRIMARY DATA

Adverse Childhood Experiences, listed as Children's Health during data analysis and prioritization, ranked as the second most negatively affected population in the community by survey respondents. Forty-six percent (N = 534) of survey respondents reported having children in their home under the age of 18 years old.

The most pressing issues for Adverse Childhood Experiences arising from the primary data analysis are obesity among youth due to the barriers of cost and access to healthy foods and sedentary lifestyle among this group as well as the impact of familial drug use on children.

Key informants and focus group participants shed additional light on marginally impacted groups regarding Adverse Childhood Experiences. Children living in poverty and those living with disabilities were mentioned as having greater health challenges in general and specifically face more issues accessing health services. Respondents also noted the opportunity to positively impact this vulnerable population by increasing the availability of health education opportunities schools. The quote bubble to the right is a paraphrased quote gathered during community input collection that reflects the opportunity to positively impact children though education in schools.

"The only thing I feel confident about is in elementary and middle schools with regards to why it is important to take care of your body and how to do it. They may make better

**SECTION 8** 

# NON-PRIORITIZED SIGNIFICANT **HEALTH NEEDS**

These additional significant health needs emerged from a review of the primary and secondary data. However, Reid Health will not focus on these topics in their Implementation Strategy. See Appendix B for each health topic area's indicator values.

#### **CANCER**

#### SECONDARY DATA

Cancer was among the top ten needs for Reid Health's service area based on the secondary data analysis. There are several warning indicators to consider, including: Age-Adjusted Death Rate due to Lung Cancer, Lung and Bronchus Cancer Incidence Rate, Age-Adjusted Death Rate due to Colorectal Cancer, Colorectal Cancer Incidence Rate, Age-Adjusted Death Rate due to Cancer, Oral Cavity and Pharynx Cancer Incidence Rate, and Mammography Screening: Medicare Population.

#### PRIMARY DATA

Community survey participants were asked to rank the most pressing health issues in their community. Cancer ranked as the fourth most pressing health issue from the community survey.

As mentioned by key informants and focus group participants, individuals who suffer from cancer often delay seeking diagnosis and treatment due to fear of how a cancer diagnosis may impact their families. Both key informants and focus group participants mentioned the need for more preventative screenings and education.

Key informants and focus group participants shed additional light on marginally impacted groups in regards to Cancer. Participants cited that cancers are more prevalent amongst African American and Hispanic populations. The quote bubble to the right is a paraphrased quote gathered during community input collection.

"From a minority health perspective diabetes and hypertension and the 6 major cancers. People will not attend screenings because individuals said they would receive a diagnosis and their families would have to pay for the rest of it."

#### **ECONOMY**

#### SECONDARY DATA

From the secondary data scoring results, Economy was identified to be a top need in three out of eight counties in Reid Health's service area. Indicators of concern include: Child Food Insecurity Rate, Median Housing Unit Value, Per Capita Income, Unemployed Workers in Civilian Labor Force, and People 65+Living Below Poverty Level.

#### PRIMARY DATA

Community survey participants were asked to rank the most pressing health issues in their community. Economy was ranked as the number one most pressing social determinant of health in Reid Health's service area. Discussions by key informants and focus group participants focused on the impact of generational poverty and the inability to pay for health services. Community members also stated that there is a general lack of gainful employment opportunities in the area.

Children and the elderly populations are greatly affected by poverty. Families struggle to cover their basic health needs and health issues often go ignored or care is delayed. The text bubble to the right is a paraphrased quote gathered from the community input.

"A lot of our health problems can be linked to poverty – access to food, substance abuse, and obesity because of lack of access. Poverty causes things to spiral out of control."

#### **OLDER ADULTS AND AGING**

#### SECONDARY DATA

From the secondary data scoring results, Older Adults and Aging ranked as the top need in six out of eight counties. There are several warning indicators to consider, including: Heart failure: Medicare Population, Hypertension: Medicare Population, Ischemic Heart Disease: Medicare Population, Chronic Kidney Disease: Medicare Population, Depression: Medicare Population, and People 65+ Living Below Poverty Level.

#### PRIMARY DATA

Community survey participants identified Older Adults and the Aging population as the third most negatively affected population in their community. Key informants and focus group participants mentioned an increase in kidney failure and need for dialysis among this group that is reflective of the warning indicator of chronic kidney disease that was identified in the secondary data analysis. The qualitative data also emphasized the need for more accessible respite care and that many grandparents were taking on undue burden caring for their grandchildren, family and extended family. Seniors living in poverty or on fixed incomes were identified as being more greatly impacted. The quote bubble to the right is a paraphrased quote gathered during community input collection.

"A lot of elderly people in our community and surrounding communities live on a very fixed income, so the financial burden for the things they need to do to stay healthy are huge."

#### **HEART DISEASE & STROKE**

#### SECONDARY DATA

From the secondary data scoring results, Heart Disease & Stroke was identified as a top need in six out of eight counties in Reid Health's service area. Indicators of concern include: Age-Adjusted Death Rate due to Coronary Heart Disease, Age-Adjusted Death Rate due to Heart Attack, Hypertension: Medicare Population, Heart Failure: Medicare Population, and Ischemic Heart Disease: Medicare Population.

PRIMARY DATA

Community survey participants were asked to rank the most pressing health issues in their community. Heart Disease & Stroke ranked as the fifth most pressing health issue in Reid Health's service area. As mentioned by key informant and focus group participants, there are contributing effects of sedentary lifestyles, concurrent obesity, improper nutrition, and stress on heart disease. There is a need to increase education preventative services and screenings. Community input participants expressed that Heart Disease & Stroke has a higher prevalence among low-income communities. The text bubble to the right is a paraphrased quote gathered from the community input.

""[People] come in with a lot of symptoms, they've have a headache for months and then they realize they have high blood pressure."

#### **TRANSPORTATION**

#### SECONDARY DATA

From the secondary data scoring results, Transportation was identified to be a top need in six out of eight counties in Reid Health's service area. Several warning indicators to consider include: Workers Commuting by Public Transportation, Workers who Walk to Work, Workers who Drive Alone to Work, Solo Drivers with Long Commute, Mean Travel Time to Work, and Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions.

#### PRIMARY DATA

Community survey participants were asked to rank the most pressing health issues in their community. Transportation was ranked as the sixth most pressing social determinant of health in Reid Health's service area. As mentioned by key informants and focus group participants, the limited number of public transportation options has greater impact on low-income and rural communities. The text bubble to the right is a paraphrased quote gathered from the community input.

"Low-income and underserved populations will not seek out information and education unless it is offered in their neighborhoods. They cannot always get a ride to where they need to be to get the information or

### **ACCESS TO HEALTH SERVICES**

### SECONDARY DATA

From the secondary data scoring results, Access to Health Services was identified to be a top need in four out of eight counties in Reid Health's service area. Several warning indicators to consider include: Non-Physician Primary Care Provider Rate, Mental Health Provider Rate, Dentist Rate, and Primary Care Provider Rate.

### PRIMARY DATA

Community survey participants were asked to rank the most pressing health issues in their community. Access to Health Services was ranked as the fourth most pressing social determinant of health in Reid Health's service area. As mentioned by key informants and focus group participants, the cost of health care, especially for those who are uninsured and underinsured, is one of the biggest barriers to health care in the Reid Health service area. Qualitative findings also emphasized the need for addressing health literacy in the community and ensuring individuals who qualify for services can access them. Community members are reluctant to access care due to fear and stigma. There is greater impact of this social determinant of health among poorer communities. The text bubble to the right is a paraphrased quote gathered from the community input.

"There are significant barriers to receiving care including but not limited to: education, transportation, access, affordability, health insurance coverage, language."

### LOW INCOME AND UNDERSERVED POPULATIONS

### SECONDARY DATA

From the secondary data scoring, there were no key indicators of concern for this vulnerable population.

### PRIMARY DATA

Community survey participants were asked to rank the most pressing health issues in their community. Low Income and Underserved Populations were ranked as the number one most negatively affected population in the community. As mentioned by key informants and focus group participants, generational poverty is a factor that greatly impacts this portion of the community. Individuals share medications and are reluctant to access care due to fear and stigma. Qualitative findings also emphasized the need for addressing health literacy and other barriers to health access. The text bubble to the right is a paraphrased quote gathered from the community input.

"The marginalized individuals in our community; the single parents, elderly, those in poverty, minorities, children, those with disabilities, etc. are struggling to make ends meet and this impacts all aspects of one's life."



Critical components in assessing the needs of a community are identifying barriers and disparities in health care. Additionally, the identification of barriers and disparities will help inform and focus strategies for addressing the prioritized health needs for Reid Health's service area. The following section identifies these barriers and disparities as they pertain to Reid Health's service area.

### **BARRIERS TO CARE**

Significant community health barriers for Reid Health's service area were identified as a part of the primary data collection. Key informants, focus group attendees, and community survey participants were asked to identify any barriers to health care that they see or experience in the community.

Survey respondents reported cost and availability of appointments as being specific barriers to health care access in the past year. Twenty-nine percent (N=327) of respondents reported a time in the past year when they did not see a doctor due to cost. Cost was also a barrier for obtaining necessary prescription drugs in the past year for 11.16% (N=126) of respondents. Qualitative data emphasized that cost is a barrier for health care for community members who are uninsured or underinsured. Wait times or limited health provider appointment availability was a specific barrier identified by 40.95% of survey respondents (N=405).

As described in the non-prioritized health needs section (page 41), transportation was also a barrier to care identified during this CHNA process. Survey respondents, key informants and focus group respondents supported this finding. Overall, 36.37% (N=363) of respondents agreed that access to public transportation and other transit opportunities made accessing health services manageable.

Health Literacy among the population in Reid's Health Service area was another key barrier to care identified across primary data sources. Among survey respondents, 37.07% (N=367) disagreed that their community was knowledgeable about health resources available to them. This was supported by focus group and key informant respondents who mentioned health literacy and lack of health education as contributing to the access to healthcare issues in their community. Participants specifically mentioned lack of knowledge and understand of health-related issues as contributing to the stigma and fear that exists in their community.

"There are significant barriers to receiving care in this community including but not limited to: education, transportation, access, affordability, health insurance coverage, language."

### SECTION 8 NON-PRIORITIZED SIGNIFICANT HEALTH NEEDS

### **DISPARITIES**

Significant community health disparities are assessed in both the primary and secondary data collection processes. The table below identifies secondary data health indicators with a race/ethnic disparity for Reid Health's service area.

TABLE 4

Indicators with Significant Race/Ethnic Disparities				
Health Indicator	Group Disparately Impacted			
People 65+ Living Below Poverty Level	Black, American Indian/Alaska Native, Other Races			
Families Living Below Poverty Level	Black, Other Race, Multiple Races, Hispanic/Latino			
Workers Commuting by Public Transportation	Asian, American Indian/Alaska Native, Hispanic/Latino, Other Races			
Workers who Walk to Work	Black, White, American Indian/Alaska Native, Multiple Races			
Young Children Living Below Poverty Level	White, Black, Hispanic/Latino			

Geographic disparities were identified using the SocioNeeds Index\*. Zip codes 45390, 47024, 47390, 47331, 45332, and 47362 were identified as zip codes with the highest socioeconomic need, potentially indicating poorer health outcomes for residents in those areas.

Key informants and focus group participants noted disparities for many of the health needs discussed in this report among impoverished and rural communities within Reid's Health service area. These were particularly impactful among the vulnerable populations of the older adults and aging, children, and the low income and underserved. Diabetes and Heart Disease & Stroke were mentioned as being more common among impoverished communities as well. Access to Health Care including barriers related to cost and transportation were also highlighted. All these contributed to individuals delaying care.



The community health needs assessment for Reid Health utilized a comprehensive set of secondary data indicators measuring the health and quality of life needs for Reid Health's service area. The assessment was further informed with community input from knowledgeable persons representing the broad interests of the community.

The prioritization process identified three focus areas: Mental Health & Substance Misuse; Physical Activity, Nutrition, and Weight; and Adverse Childhood Experiences. From this process, Reid Health will outline how they plan to address these prioritized health needs in their Implementation Strategy.

In addition, we hope to incorporate any feedback on this report into our next Community Health Needs Assessment process. Please send your feedback and/or comments to communitybenefit@reidhealth.org.

# APPENDIX A. REID HEALTH IMPACT STATEMENT

### Reid Health 2017-2019 Impact Statement

Prioritized Health Need	Activities Implemented	Results	Implementation Plan	Applicable Intervention
Access to Health Services				
	Athletic Training Services - Athletic training services offered to high schools in our service area at no cost. The only contribution is from Earlham College and they contribute about 1/4 the cost of the services they receive.		No	
	Baby Care Basics - This class is offered to pregnant families and provides information and resources for newborn care. This class covers newborn appearance, care (diapering/bathing/swaddling), normal behavior, when to call baby's health care provider, safe sleep environments & car seat safety.	This program served 16 people from January 2019 to May 2019	No	
	Better Breathers - This is a series of on-going education sessions for individuals with chronic respiratory conditions such as COPD. These sessions are held monthly, and are opened to the public. A different topic and speaker presents at each monthly session.	This program served 33 people in 2017, 60 people in 2018, and 9 people from January 2019-May 2019	No	
		This program served to 967 people in 2017, 770 people in 2018, and 278 people from January 2019-May 2019	No	
	Blood Pressure Machines - Reid Health provides automated blood pressure machines placed throughout the Reid service area. These machines are accessible to the public in community centers, schools, fitness centers, and government offices.	The blood pressure machines provided 27,638 sessions in 2017, 29,714 sessions in 2018, and 6,886 from January 2019-March 2019 to Reid Health's service area	No	
	Childbirth Classes - Traditional childbirth preparation classes for mothers-to-be and their "coaches". The class includes coping measures, and how a loved one can help the laboring woman. Other topics address relaxation, breathing techniques, and medications.	This program provided services to 157 people in 2017 and 209 people in 2018, and 56 people from January 2019-May 2019	No	

Shared Beginnings - This program is offered free to expectant families. The services offered include lactation support, pregnancy massage	This program provided services to 173 people in 2017 and 170 people in 2018, and 97 people from January 2019-May 2019	No	
and instruction on infant massage.	54.144. y 25.15ay 25.15		
Mammograms - Community Benefit mammograms done at no charge to the patient.	This program provided services to 271 people in 2017 and 219 people in 2018, and 126 people in January 2019-May 2019	No	
Medical Assisting Program - This program through Ivy Tech enhances local medical professionals scope of practice by growing the skills of patient care, venipuncture, electrocardiogram, vital signs, injections, medical coding, electronic charting and medical records. Reid Health provided \$15,000 for a simulation lab.	This donation improved the education experience and quality for 68 students this first year and that number is expected to grow each year.	Yes	Expand healthcare workforce development to target areas of need such as dentistry, primary care, and mental health.
Middle School Career CampThis half day experience provided 8th grade students with an opportunity to learn about different careers offered in a hospital setting. Students chose one of six different pathways. Then within each pathway they participated in 3 different hands on learning experiences. They were provided with information on what education, training, and certifications are required for these careers, and the employability skills needed for each career was also emphasized.	The Middle School Career Camp gave 107 8th grade students the opportunity to learn and experience careers the health care industry.	Yes	Expand healthcare workforce development to target areas of need such as dentistry, primary care, and mental health.
Sports Physicals - this service is offered to children who need physicals for sports and other extracurricular activities. The fee that is charged is donated back to the participating school	This program served 415 children in 2017, 2018, 2019.	Yes	Community Screenings
First Aid, CPR, AED, BLS, and ACLS Classes - These classes are offered to area organizations (when there is a need) and local emergency services and law enforcement.	These classes provided education to 188 people in 2017 and 118 people in 2018, and 106 people from January 2019-May 2019	No	
Flu Shot Donations - Reid Health provided free flu shots to local organizations working with underserved populations	This program donated 550 flu shot doses to local organizations in 2018	No	
balm to a local community organization during the winter months to assist in supply distribution to area children.		No	
Flu Kits - Reid Health provided thermometers to a local early head start center for participating families to monitor the health of their children at home.	This initiative provided 100 flu kits to families.	No	
211 Training - this training focused on how to use the 211 database for locating resources quickly and easily for any county or zip code. This demonstration was free, open to the public, and refreshments were provided.	This training was attended by 22 healthcare workers and community members in 2018.	Yes	Increase awareness events with community agencies offering children's services or with those serving the asset limited, income constrained, employed (ALICE) population to expand the community knowledge of insurance programs that they may apply for.

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First Aid Supplies - Medical supplies in including first aid kits and CPR masks were provided to local organization to assist with first response treatment at rural locations and community events	This initiative provided a total of 126 first aid supplies to the community from 2017-2019	No	
Dental Program - Reid partnered with Mid America Health Professions to provide dental services to those in need one day per week at th Reid Urgent Care Clinic. Mid America is a traveling dental provider that provides routine screenings as well as dental treatments interventions	This program provided services to 1,202 people in 2017 and 658 people in 2018, and 177 people from January 2019-May 2019	Yes	Expand dental clinic to other counties to increase the availability of dental services and increase the screening of individuals without dental coverage to assist them in applying for insurance programs that they may qualify for.
Extended Care Facility (ECF) Coalition - This initiative provided support, education, and supplies to ECFs in Reid Health's service area. The collaboration of local ECFs fostered improved communication and standards among area providers to increase the quality and responsibility of care for their residents.	This initiative provided support, education, and supplies to 455 individuals in 2017 and 458 individuals in 2018	No	
Enrollment AssistanceTime and funds spent helping community members enroll in Medicaid, HIP or other assistance programs. This includes individuals served at the Dental Clinic, and other community events sponsored by Reid Health.	submitting applications for those services. (2017-6,756; 2018-10,941; January 2019 to May 2019-7,833)	Yes	Increase awareness events with community agencies offering children's services or with those serving the asset limited, income constrained, employed (ALICE) population to expand the community knowledge of insurance programs that they may apply for.
IHAMA ConferenceReid hosted the spring 2019 Indiana Healthcare Access Management Association conference. This conference provides education for those working throughout the State of Indiana working on patient access. The focus was state health care legislation and if impact on healthcare for our communities.	Lingle Grand Hall.	Yes	Continued Efforts-Enrollment Assistance
Indiana Medicaid Workshops-Regional Provider TrainingsThese are hosted quarterly at Reid to provide continuing education to professionals who assist people with Medicaid and HIP enrollment.	From 2017-2019, 228 people have attended these trainings.	Yes	Continued Efforts-Enrollment Assistance
National Health Care Decisions Day-Reid provided education and answered questions regarding advanced directives. Staff members were on hand at a booth in the main concourse from 10am-2pm, to complete and file those form for community members.	When this event was held in 2017-45 health care representative forms were completed and 13 living wills were completed.	No	
FQHCReid researched the need for a FQHC with a consulting group in 2016-2017, then opened the Neighborhood Health Clinic in 2018. Community Benefit provides a patient assistance fund to the clinic to help cover incidental costs needed for patients similar to the patient assistance fund utilized at the hospital.	\$506 was spent in 2017 for consulting/legal fees for the feasibility study (most fees were incurreed in 2016). The patients assistance fund that began in late 2018, was set up as \$1,000 fund, but so far, only 1 patient has accessed the funds.	Yes	Continued EffortsFQHC

IU East Nursing Department - Simulation Lat donation to refurbish and update their Simula Lab. Equipment purchased included: four manikins, screens for digital readouts, warra and software for the equipment, and four pel models.	tion to learn, practice and demonstrate skills and knowledge. This allows them the ability to use the most up to date technology. All members of the	Yes	Expand healthcare workforce development to target areas of need such as dentistry, primary care, and mental health.
Expectant Family CPR - Free class to teach to expectant families.	CPR This program provided training to 9 people in 2017, 26 people in 2018, and 13 people from January 2019-May 2019	No	
Grand Rounds - Monthly physician education breakfast series focused on providing up-to-cinformation to area medical professionals. The topics range from new technology and techni within the medical field to best practices in various types of treatments.	ate 2017, 926 people in 2018, and 360 people from January 2019-May 2019	Yes	Expand healthcare workforce development to target areas of need such as dentistry, primary care, and mental health.
Health Care Workforce Development - Proving job shadowing to area students in an engaging program to promote and enhance medical carea outlooks and providers. This also include carea camps (high school), career presentations in variety of community settings (schools, volunteeer groups, youth centers) to advoca healthcare professionals to increase access care.	2017, 1,459 people in 2018, and 98 people from January 2019-May 2019	Yes	Expand healthcare workforce development to target areas of need such as dentistry, primary care, and mental health.
HIP 2.0 Assistance ProgramReid partnered the Trustee's office to provide assistance for those who are struggling to pay their HIP 2.0 copays	with This program benefited to 66 people in 2017, 31 people in 2018, and 21 people from January 2019-May 2019	Yes	Increase awareness events with community agencies offering children's services or with those serving the asset limited, income constrained, employed (ALICE) population to expand the community knowledge of insurance programs that they may apply for.
Hope Pregnancy Center Support - This clinic provides education, and labs for pregnant an parenting women and families in poverty. Reprovides supplies and processes labs for the clinic at no charge to the patient or clinic.	increase access to healthcare services. So far in 2019, labs were provided to 28 people, in 2018-66 people, and in 2017 labs were provided to 113 people. Reid provided supplies totaling \$1,812 since 2017.	Yes	Continued EffortsLab Processing
Medical Mondays-These are monthly health education presentations held at the Central United Methodist Church. Reid Health took to lead for these presentations after the Minority Health Coalition, that initiated this group, disbanded in 2015. A different presenter participates every month to provide education about a specific health topic. Lunch is provided as well.		No	

	This program supported 64 students in 2017, 89 students in 2018, and 34 students from January 2019-May 2019	Yes	Expand healthcare workforce development to target areas of need such as dentistry, primary care, and mental health.
and medication to support mission trips of	Reid Health has provided supplies and medications for Puerto Rico Hurricane Relief in 2017 and a medical/dental mission in Africa in 2018.	No	
Drug Bag ProgramReid Health replenishes the medication and supplies for EMS providers in our	Since 2017, Reid has supplied meds for this program at a cost of \$106,836 (2017-\$34,641; 2018-\$25,961; January 2019 to June 2019-\$20,704)	No	
assistance when no other funds exist to	This program benefited to 1,317 people in 2017, 1,360 people in 2018, and 272 people from January 2019-May 2019	Yes	Continued EffortsPatient Assistance Fund
Reid 24/7 Nurse Call LineReid contracted with Sirona to supply a call center that provides "Ask a 7	This program benefited to 5,379 people in 2017, 7,032 people in 2018, and 1,732 people from January 2019-May 2019	Yes	Continued EffortsReid Nurse Call Line
	There were 3 scholarships granted in 2017 and 4 scholarships granted in 2018.	Yes	Expand healthcare workforce development to target areas of need such as dentistry, primary care, and mental health.
	people in 2018, and 11 people from January 2019-	No	
out of Rock Solid Ministries. They provide medical services to underserved and uninsured people in poverty, as well as provide insurance	The Siloam Clinic has served 683 patients from 2017-2019. Since 2017 Reid has provided lab processing for 19 people totaling \$1,034, and provided \$26,583 in supplies and equipment (2018 the renovation and set up of the mobile clinic).	Yes	Continued Efforts-Lab Processing

	Ceremony. Reid provided financial support for the RV renovation, supplies, and equipment for Siloam Clinic's new mobile medical unit. This unit will be staffed by volunteer physicians, nurses, and NPs, and will run on sat mornings to outlying communities in rural Wayne County.  PSA ScreeningsThese screenings are held 2	In 2018-73 men participated and in 2017-63 men	Yes	Continued Efforts-Lab Processing  Continued Efforts-Lab Processing
	days per year at the Wayne Co Health Dept. These are free and open to the public. Reid Health covers the lab processing cost for these screenings.	particpated.	Yes	
	free and open to the public. This fair provides education and resource information for many free or low cost programs in Reid's service area. Some of the resource booths providing information are: YMCA, WIC, Morrison Reeve Library, Wayne Co Breastfeeding Coalition, EXCEL Ctr, Birth to Five, and Kids at Heart Publising.	In 2017249 people attended, 2018-177 people attended, and in 2019-177 people attended.	No	
	assist individuals/families in discussing end of life issues. Detailed education is provided to the public by community presentations and events regarding end of life care and advanced directives. This initiative included hosting "Being Mortal" and local promotion of Conversation Project media material.	In 2017 1,147 people and in 2018 5,772 people received education and /or materials regarding end of life decisions.	No	
	Being Mortal - Being Mortal is a presentation and	39 community members attended the presentaion and panel; discussion	No	
Mental Health & Mental Disorders				

(DFWCP)/Heroin Is Here - Reid Health supported these local substance misuse initiatives. DFWCP	resources, community events, and collaborative work that benefited 1,561 people from 2017 to May 2019 (2017 - 477; 2018 - 959; January 2019-May 2019 - 125)	Yes	1-Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve overall mental health and reduce the incidence of substance abuse.  2Promote positive stories regarding successful treatment for mental health and/or substance abuse to encourage community members to seek help for mental health issues and substance abuse.  3Conduct a stigma reduction campaign to increase the level of awareness of the importance of mental health and substance abuse as an aspect of overall health management and reduce community biases against those afflicted with mental health or substance abuse issues.
Reducing Stigma: From Disease to Treatment-This event was organized in partnership with the Indiana Rural Opioid Consortium (InROC) to bring awareness and advocacy for people who have an addiction. Speakers included Amnah Anwar from InROC and Dr. Carrie Mier from Indiana University East. There were resource booths from 10 area service providers who provide treatment and services in the community and surround area.	30 community members attended the presentaion.	Yes	1-Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve overall mental health and reduce the incidence of substance abuse.  2Promote positive stories regarding successful treatment for mental health and/or substance abuse to encourage community members to seek help for mental health issues and substance abuse.  3Conduct a stigma reduction campaign to increase the level of awareness of the importance of mental health and substance abuse as an aspect of overall health management and reduce community biases against those afflicted with mental health or substance abuse issues.
Foster the Future Foster Hope of Meridian Health Services held their Fostering the Future event in Reid Heath Lingle Hall and Auditorium. This event connected community members who were interested in becoming foster and adoptive parents to local organizations that can guide them through the process. Foster Hope also offered a forum made up of current foster parents to showcase what it is like to foster and gave the community the opportunity to ask questions to those who have already become foster/adoptive parents. Reid Health supplied lunch and the location for the event.	40 community members attended the resources booths and panel discussion	No	

Dennis Middle School EventThis event was held at Richmond 40 Bowl just weeks after a school shooting at Dennis Middle School. This event was organized to provide healing and support to the students, teachers, and first responders involved in the emotional tragedy that day.	,	No	
County Partnership presented a CBD Oil 101 Lunch and Learn. This presentation was open to the public and focused on the following questions. What is Cannabidiol (CBD) oil & where does it come from? What is the current legal status of CBD oil? What are arguments for and against the use of CBD oil?	55 community memebers attended the lunch and learn presentaion		Provide education and enhance awareness of curent programs among providers and community members to increase the access to mental health and substance abuse services and improve the overall mental health and reduce the incidence of substance abuse.
Overdose Awareness Day Drug Free Wayne County Partnership along with Reid Health, held a	During the day long event 500 community members participated in the purple ribbon distribution, stigma reeducation lunch and learn, and candle light vigil.	Yes	1-Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve overall mental health and reduce the incidence of substance abuse.  2Promote positive stories regarding successful treatment for mental health and/or substance abuse to encourage community members to seek help for mental health issues and substance abuse.  3Conduct a stigma reduction campaign to increase the level of awareness of the importance of mental health and substance abuse as an aspect of overall health management and reduce community biases against those afflicted with mental health or substance abuse issues.
Raw Coping PowerLunch and Learn Drug Free Wayne County Partnership in partnership with Reid Health presented Raw Coping Power an evidence-based workplace substance abuse prevention training to the public. Raw Coping power offers skills to reduce stress and improve mental health in the workplace and at home.	28 community members attended the presentaion.	Yes	Provide education and enhance awareness of curent programs among providers and community members to increase the access to mental health and substance abuse services and improve the overall mental health and reduce the incidence of substance abuse.
Association hosted a series of presentations to	This educational series was attended by to 214 people in 2017 and 252 people in 2018 (the series in 2018 was for caregivers and was held weekly for 12 weeks)	Yes	Continued Efforts-Alzheimer's Education Series

i i i i i i i i i i i i i i i i i i i	Since 2017, 45 woman have received these meds, at a cost of \$3,411	Yes	Continued Efforts-Birth control options for those suffering with addiction.
Adverse Childhood Experiences (ACEs) - Reid Health hosted a screening of the film Resilience	This initiative provided awareness and education to 199 professionals and community members in 2018.	Yes	1-Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve overall mental health and reduce the incidence of substance abuse.  2Promote positive stories regarding successful treatment for mental health and/or substance abuse to encourage community members to seek help for mental health issues and substance abuse.  3Conduct a stigma reduction campaign to increase the level of awareness of the importance of mental health and substance abuse as an aspect of overall health management and reduce community biases against those afflicted with mental health or substance abuse issues.
Mental Health Education - Reid Health team members provided mental health education and materials to local professionals and community members on the topics of mental health diagnosis, mental health in law enforcement, the aging brain, drug endangered children brochures, a prescribing presentation, bullying/self-esteem education, and overdose training.	These resources and trainings reached a total of 3,540 people from 2017 to May 2019.	Yes	Provide education and enhance awareness of curent programs among providers and community members to increase the access to mental health and substance abuse services and improve the overall mental health and reduce the incidence of substance abuse.
maintainied by Reid Health to assist community members in Reid Health's service area in connecting with resources such as food, housing assistance, substance misuse and mental health treatment.	A totlal of 5,000 resources guides were distributed to the community. 3,600 resources guides were given out in 2017 and 1,400 resource guides in 2018.	Yes	Continued Efforts-Addiction Resource Guides
Mental Health First Aid Training Reid Health hosted 2 trainings for Mental Health First Aid.	21 people completed the training held on 8/16/18, and 23 people completed the training held on 10/25/18.	Yes	Provide education and enhance awareness of curent programs among providers and community members to increase the access to mental health and substance abuse services and improve the overall mental health and reduce the incidence of substance abuse.

	38 community members attended the presentaion and panel discussion.	Yes	Provide education and enhance awareness of curent programs among providers and community members to increase the access to mental health and substance abuse services and improve the overall mental health and reduce the incidence of substance abuse.
Town HallReducing the Stigma of Substance	40 community members attended the presentaion and panel discussion.	Yes	Conduct a stigma reduction campaign to increase the level of awareness of the importance of mental health and substance abuse as an aspect of overall health management and reduce community biases against those afflected with the mental health or substance abuse issues.
Opiod Town HallOn 8/3/2017, Reid Health in partnership with Minority Health Coalition, hosted	This event was attended by 95 people including representatives from law enforcement, health care, government representatives, and local schools.	Yes	Provide education and enhance awareness of curent programs among providers and community members to increase the access to mental health and substance abuse services and improve the overall mental health and reduce the incidence of substance abuse.
Lunch & LearnReducing Underage DrinkingReid Community Benefit hosted a program organized by Drug Free Wayne Co Partnership, regarding Reducing Underage Drinking. The presenter was Lisa Hutchison-VP of Policy and Programs for Mental Health America of Indiana, and the director of the Indiana Coalition to Reduce Underage Drinking. This was free, open to the public, and had good community representation by law enforcement, mental health providers, health care providers, and organizations that work with youth.	30 community members attended the presentaion	Yes	Provide education and enhance awareness of curent programs among providers and community members to increase the access to mental health and substance abuse services and improve the overall mental health and reduce the incidence of substance abuse.

Mental Health Awareness Month presentation in Lingle Auditorium focused on mental and social wellness with info and awareness handout table for visitor of Reid Health. Offerings included Mental Health awareness ribbons, statistics handout, stress balls, a resource sheet, along with sample size foods known to improve mental health.	100 commuity memebers participated in the events.	Yes	Provide education and enhance awareness of curent programs among providers and community members to increase the access to mental health and substance abuse services and improve the overall mental health and reduce the incidence of substance abuse.
Team Awareness TrainingReid covered the cos of the "train the trainer" series for 10 community members to be trained on Raw Coping Power and Health Consciousness. With the substance abuse crisis impacting the workforce, employers were in need of trainings for employees to reduce stress and poor mental health days in a prevenative effort to reduce substance misuse.	\$10,000 to Reid. This training has been presented to 119 individuals from January 2018 - June 2019	Yes	Provide education and enhance awareness of curent programs among providers and community members to increase the access to mental health and substance abuse services and improve the overall mental health and reduce the incidence of substance abuse.
Raise Your Hand - Drug Free Wayne County Partnership, the 228 Club, and Reid Health Community Benefit partnered to create and implement the Raise Your Hand campaign during the month of August 2019. This campaign collects hand prints from community members who have been impacted by overdose to assist in reducing stigma and bring awareness. 8 canvases were distributed throughout Wayne county with 211 cards and a description attached to collect hand-prints, all 8 canvases were brought together and displayed on August 31, 2019 (International Overdose Awareness Day) during the Richmond Farmers Market. Volunteers attended the farmers market to bring awareness, and hand out purple ribbons to show support for International Overdose Awareness Day.		Yes	1-Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve overall mental health and reduce the incidence of substance abuse.  2Promote positive stories regarding successful treatment for mental health and/or substance abuse to encourage community members to seek help for mental health issues and substance abuse.  3Conduct a stigma reduction campaign to increase the level of awareness of the importance of mental health and substance abuse as an aspect of overall health management and reduce community biases against those afflicted with mental health or substance abuse issues.
Youth With A Purpose an all-community program/event, focused on educating our community about children's trauma. Community Benefit partnered with Centerstone of Indiana on this youth-driven event that included muisic therapy demonstrations, a youth speaker who was recovering from truama, a local artist presenting resiliance art, and a showing of Never Give Up: A Complex Trauma Film by Youth for Youth. The week leading up to the event Reid hosted a Traveling Art Display that showcased children's trauma educational materials (public materials being provided by National Children's Traumatic Stress Network). The art pieces were from the Wayne county community collected by Centerstone's children patients who had experienced trauma in their lives.	40 community members attended the presentaion	Yes	1-Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve overall mental health and reduce the incidence of substance abuse.  2Promote positive stories regarding successful treatment for mental health and/or substance abuse to encourage community members to seek help for mental health issues and substance abuse.  3Conduct a stigma reduction campaign to increase the level of awareness of the importance of mental health and substance abuse as an aspect of overall health management and reduce community biases against those afflicted with mental health or substance abuse issues.

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and maintenance of the building used for interviewing victims of child abuse. The JACY also provides Speak Up Be Safe to, Darkness to Light Stewards of Children, and a support group	JACY House provided assessment services to 404 children in 2017, 340 children in 2018, and in 2019 to date 168 children, all suspected to be the victims of sexual abuse. In addition, 4,269 children in 2017, 5,208 in 2018, and 7,150 in 2019 have received prevention/education in the Speak Up Be Safe program, which is provided in area schools. Darkness to Light Stewards of Children has benefited 475 individuals since 2013.		
Stigma Reduction Campaign In 2019 Reid launched a media campaign in partnership with WTHR (channel 13) utilizing TV ads and social media to highlight "Reid Leads the Conversation". These 15 and 30 second commercials as well as the social media posts and related stories are educating the community to the stigma surrounding Mental Health /Substance Misuse.	WTHR ReidLeads reached 900,000 individuals in Central Indiana from January 2019-May 2019.	Yes	Conduct a stigma reduction campaign to increase the level of awareness of the importance of mental health and substance abuse as an aspect of overall health management and reduce community biases against those afflected with the mental health or substance abuse issues.
Perinatal Bereavement & Perinatal Loss Support Group- Reid Health's Perinatal & Infant Loss Support Group provides staff specially trained in Resolve Through Sharing® (RTS) bereavement support. The Perinatal Loss Support Group meets monthly and is open to everyone.	This program benefited to 12 people in 2017, 86 people in 2018, and 15 people from January 2019-May 2019.	Yes	Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve the oveall mental health and reduce the incidence of substance abuse
National Child Safety Council - Reid Health supported the Connersville Police Department with their National Child Safety Council Program in 2019. This program focuses on bullying and drug education and is presented by a police officer in Connersville, IN schools.	The National Child Safety Council Program benefited 500 children in 2019.	Yes	Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve the oveall mental health and reduce the incidence of substance abuse
Narcan Program - This program supplies emergency response teams in Reid Health's service area with the over-dose reversing medication (Narcan). This product is provided to police depts., fire depts., ambulance providers, and first responders. This is an effort to combat the high overdose rates in our community by quicker access to a needed medication and as a result, fewer deaths due to overdose	This program benefited 19 individuals in 2017, 200 individuals in 2018, and 396 individuals in 2019.	Yes	Continued Efforts-Narcan Program
Neonatal Abstinence Education - Individual education provided to mothers that are on maintenance drugs. Education is provided regarding infant withdraw, health, and expectations during birth. These classes are often provided off site at the Richmond Treatment Ctr. or Wayne Co Clinic.	This program benefited to 118 people in 2017, 22 people in 2018, and 15 people from January 2019-May 2019	Yes	Continued Efforts-Neonatal Abstinence Program

Reach All Randolph County - this group's goal is to provide citizens of Randolph County with the opportunity to successfully overcome addiction and help educate patients by assisting them with the informational and medical resources they need. Reid Health has assisted this coalitions efforts with support of the "Be The Best You Can Be" book distribution in 2018 and 2019 to area schools. This book discusses substance abuse prevention.	This program benefited 300 children in 2018 and 300 children in 2019.	Yes	Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve the oveall mental health and reduce the incidence of substance abuse
Postpartum Support Group - This group seeks to provide support and information about perinatal mood and anxiety disorders. It is designed to help new moms with the challenges that often come after having a baby.	This program benefited to 169 people in 2018 and 72 people from January 2019-May 2019	Yes	Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve the oveall mental health and reduce the incidence of substance abuse
the recent death of a loved one. The support groups meets twice monthly and is hosted by the Reid Health Chaplains.		Yes	Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve the oveall mental health and reduce the incidence of substance abuse
Look Good, Feel Better - Look Good Feel Better is a non-medical, brand-neutral public service program that teaches beauty techniques to people with cancer to help them manage the appearance-related side effects of cancer treatment. The program includes lessons on skin and nail care, cosmetics, wigs and turbans, accessories and styling, helping people with cancer to find some normalcy in a life that is by no means normal. This program was offered through the Reid Health Cancer Center.	This program benefited to 19 people in 2017 and 17 people in 2018	No	
	This program had 193 participants in 2017, 469 participants in 2018, and 243 participants a from January 2019-May 2019.	Yes	Continued Efforts-Syringe Exchange Program

	It's A Family Thing A partnership between Reid, Centerstone, and WCHD to provided an education series to families struggling to help someone with addiction issues. Reid provided the location, fliers and light breakfast; Centerstone provided 2 staff members to teach the class along with materials, and WCHD provided the book "Baffled by Addiction" for each attendee.	This program impacted 8 at risk families.	Yes	1-Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve overall mental health and reduce the incidence of substance abuse.  2Promote positive stories regarding successful treatment for mental health and/or substance abuse to encourage community members to seek help for mental health issues and substance abuse.  3Conduct a stigma reduction campaign to increase the level of awareness of the importance of mental health and substance abuse as an aspect of overall health management and reduce community biases against those afflicted with mental health or substance abuse issues.
	Overdose Lifeline Training-This training was requested by Lisa Suttle to provide funds for 10 community members of the Heroin Is Here coalition to be trained on this evidenced based curriculum to provide substance abuse prevention education to children and teens.	10 members of the Heroin Is Here coalition were trained on this material to be used in their work with children and teens.	Yes	Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve the oveall mental health and reduce the incidence of substance abuse
Nutrition, Physical Activity & Weight				
	River's Edge Trails Project - Reid Health supported the Fayette County Foundation in phase 1 of their community health driven project. The River's Edge Trails will provide an outdoor stage, a concession stand, picnic area, a walking trail, and a large inclusive playground.	This project will increase access to local exercise opportunities in Fayette County, Indiana. Reid Health provided a \$10,000 donation toward these efforts.	Yes	Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.
	5K Runs/Walks - Reid Health provided supplies and door prizes to local organizations in support of 5K run/walk events.	These health events benefited 480 individuals in 2018 and 350 individuals in 2019.	Yes	2. Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.  3. Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction.
		The WCFC has engaged with 203 community members from 2017 to May of 2019 during events and gatherings held at Reid Health.	No	

2018 Reid Health provided the turkeys used for the holiday meals distributed by the Circle U food pantry in support of the community holiday celebration.	This program benefited 600 individuals in 2017 and 600 individuals in 2018.	Yes	Continued Efforts-Meal donations to community meal sites
of Life Stream Services with the Angel Wish	This program benefited to 1,200 people in 2017 and 1,200 people in 2018. Reid Health provided a shelf stable food item for the bags each year.	No	
Kiwanis Club program the Safety Village in 2018 and 2019. This program provides children with	Reid Health's contribution has benefited 100 individuals in 2018 and 100 individuals in 2019. Overall the Safety Village serves over 5,000 children since 2018.	Yes	Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.
IN County Health Rankings reported Fayette County to be 92/92 for health out of all Indiana counties. In 2018 Reid Health supported the	The Purdue program Enhancing the Value of Public Spaces – Creating Healthy Communities assisted in creating a focus on community health projects that have a positive impact on physical activity rates.	Yes	Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.
	This program was held in 2017 and had a direct benefit to 30 individuals and made a positive impact on food insecurities.	Yes	Host and/or partner with community agencies to provide classes to educate the community on health eating on a budget.
Townsend Summer Program - Reid Health supported nutritional wellness of children	The total number of 1,020 meals were provided and made a positive impact on childhood food insecurity in Wayne County, IN.	Yes	Continued Efforts-Meal donations to community meal sites

Summer Camp for kids. Springhill leads the camp daily (9am-4pm) for a week. The children	bottle of water each day of the camp for each student (200 studentsdonated 1000 bottles of water and fresh fruit). In 2018, Reid provided refillable water bottles for each student (175 water	Yes	Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.
To Go Containers Food Rescue Program - Reid Health donated portioned food containers to assist county trustees in dispersing emergency	In 2017 450 individuals benefited from donations from Reid Health. The portioned food containers assisted in reducing food insecurities among participants of the program.	Yes	Continued Efforts-Food Rescue Program
Purdue Extension Lunch and Learns - Reid Health supported the 2018 Purdue Extension	The lunch and learn benefited 72 individuals in 2018. This program focused on nutrious foods to help in moving the dial obesity rates.	Yes	Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction.
demonstration that introduces new and healthy recipes to the public, in order to promote a	These classes are held monthly at Reid and are free and open to the public. In 250 individuals benefitted from this education in 2017 and 116 benefited in 2018.	Yes	Continued EffortsHealthy Cooking Classes
	Since 2017, we were able to provide information and education to 1500 people at City Fit.	Yes	Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.     Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction.
1	This program benefited 386 individuals in 2017 and 500 individuals in 2018.	Yes	2. Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.  3. Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction.

Get Healthy In Our Parks Series - This was a partnership between Reid Health and Richmond Parks & Rec to provide a variety of programs to promote physical activity and healthy living for the whole family. These programs include: Summer Sports Camp, Kid's Triathlon, Walking Club, Frostbite 5k, and Fit for the Family that included nutrition and cooking lessons, a physical activity component, and introduction to the Farmer's Market.	The events presented by the parks department promoted physical activity, childhood insecurity, and the decrease of sedentary individuals in 2018.	Yes	Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.     Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction.
Lactation Outreach/Milk Matters - Reid Health offers lactation education/instruction to individuals in the community. In addition Reid Health of hosts a mother-to-mother breastfeeding support group, sponsored by Reid Health and the Wayne County breastfeeding Coalition. This is fun group of friendship and breastfeeding support with lactation expertise available.	,	No	
YMCA/Richmond Housing Authority Fitness on the Go - Reid Health provided support to this a program and partnership between the Richmond YMCA and the Richmond Housing Authority to provide free fitness classes in the community buildings of the housing authority.	In 2017 this program brought mobile fitness classes to individuals to reduce sedentary individuals and promote physical activity.	Yes	2. Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.  3. Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction.
Diabetes Support Group - Diabetes affects a large portion of our population. The CDC estimates that 1 in 3 Americans will have Diabetes by 2050. This support group wants diabetics to know they are not alone. Some of the hardest problems diabetics face are diet and medication related. This initiaiitve includes an annual dinner that included healthy cooking information, diabetes diet friendly hors d'oeurvres and recipes, and a presentation from a special guest speake who specializes in diabetes friendly cooking.		Yes	Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction.
I Heart Cooking Program-A monthly cooking program airing on local cable stations, to provide education for eating heathy. In 2017 (3) I Heart Cooking Classes were taped in front of a live audience at Jack Elstro Plaza. Participants of the live event received a set of measuring cups free that read "I Heart CookingCommunity Benefit"	There were 12 different shows produced for the 2017-2018 season. The programs air monthly on WCTV channels 11, 20, 21 and posted on You Tube. This program had the potential to reach 16,234 cable subscribers in this area. The Jack Elstro Event engaged an audience of 150 in healthy cooking lessons and promoted healthy diets.	Yes	Continued EffortsI Heart Cooking

Prenatal Breastfeeding Classes - Classes on breastfeeding that are offered free of charge to community members. This class covers basics of breastfeeding, as well as how to deal with	This program benefited 134 people in 2017, 64 people in 2018, and 36 people from January 2019-May 2019	No	
challenges which may arise.  Reid Healthier Redeem Well - Reid Healthier is a wellness club offered to the public at no charge. This portal is used to engage the public in wellness initiatives/screenings, and educational information to improve the health of the population. Club members can earn points for completing screenings and participating in wellness initiatives. As they earn points they receive incentives such as: t-shirts, water bottles, pedometers, and other items that are non cash equivalent.	This program engaged 3,747 people in 2017, 6,988 people in 2018, and 4,136 people from January 2019-May 2019 in promoting healthy diet and physical activity.	Yes	Continued EffortsReid Healthier Club
Rock Solid MinistriesThis organization is a meal site each Sunday. The meal is donated by different organziations each week. Reid provides the meal and the staff to serve the meal once each month.	Ministries in Oct 2014, 7,984 hot, healthy meals	Yes	Continued Efforts-Meal donations to community meal sites
Westview Walk A Thon - Reid Health supported a day long event at Westview Elementary located in Richmond, Indiana. This event promoted physical activity for students and their families.		Yes	Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.
preschoolers that focused on physical activity and healthy eating. Dr. Honaker provided a reading of her book about Glen Miller Park, and families were encouraged to use the book as a map to find those sites on future visits to the park, encouraging physical activity for the whole family. At this event children walked through a course of nutrition tips and activity stations. Reid provided apples, granola bars, bottled water, as well as recipe boxes with healthy recipes for parents and Reid Wellness Club info.	the families they work with that were not able to attend. They will be encouraged to use the book as a guide to visit Glen Miller Park with their children, and find each of the sites highlighted in the book that are landmarks in the park.	Yes	Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.     Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction.
Fayette Moonlight/Daytime Walk Event Reid Health supported Fayette County's Purdue Extension, Downtown Walkability Event. This event was held during their Saturday farmers market in downtown Connersville, IN. This event's goal is to advertise (3) identified walking paths in downtown Connersville, IN to promote physical activity within the community.	128 community members participated in the walking activity on the day of the event.	Yes	<ol> <li>Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.</li> <li>Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction.</li> </ol>

	350 community members participated in this event each year (2017, 2018, 2019)	Yes	Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.     Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction.
LifestreamHEED and ALED classes These are a classes provided by Lifestream services instructor, Lori Joseph, RN. Healthy Eating Every Day (HEED) is a nutrition classes that teaches the importance of healthy eating while also working toward weight loss. The Active Living Every Day (ALED) is an exercise class individualized to each person's needs.	29 community members participated in the class.	Yes	Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve the oveall mental health and reduce the incidence of substance abuse
End Hunger Now Provided 60 box lunches to the staff that worked the event the entire day.  Also provided 200 granola bars and 200 bottles of water for the event participants during the day.  There were 150 people that participated, packing	water for the event participants during the day.	No	
partnership with Purdue Extension to provide classes for healthy eating on a budget. The series was called "Small Steps to Health".  Participants learned about healthy food and	This program was provided in Fayette, Henry, and Randolph counties because they had the highest need when analyzing obesity, diabetes, and poverty rates. Unfortunately these classes had lower than anticipated turn out, and because of that, were only held in 2017.	Yes	Host and/or partner with community agencies to provide classes to education the community on healthy eating on a budget.     Incentivize community participation in events which promote physical activity, healthy eating, and weight reduction

# **2019 Grants**

## Mental Health & Substance Abuse

Organization	Awarded	Summary of Need
A Better Life-Brianna's Hope	\$2,500	Funding for supplies for recovery groups and initiatives.
Birth to Five (Healthy Families)	\$11,700	Funding to help support the Healthy Families program.
Boys & Girls Club	\$18,400	Funding to help support Prevention Plus programming.
Cross Road Christian Recovery Center	\$12,000	Funding to help support the Transitional Living program.
Genesis of Richmond Inc.	\$8,580	Funding to cover the personnel cost for a part time residential manager.
Independent Living Center	\$5,600	Funding for staff and material costs for reusable residential wheelchair ramps.
JACY House	\$9,876	Funding to support Speak Up Be Safe
Monroe Central School Corporation	\$900	Funding for "Your Life Speaks" presentation for students and staff.
Northeastern Elementary School	\$6,700	Training costs for "Leader In Me" program for all teachers.
Northeastern Middle School	\$1,925	Funding for the purchase of (1) set of substance simulation goggles for use in health education.
SAWS (Servants at Work)		Funding for material cost of wooden wheelchair ramps.
Senior Opportunity Services	\$3,000	Funding of homemaker/handyman services to 40 people.
Two Twenty Eight Club INC	\$2,000	Funding for sober events and materials for two new classes.
Unchained Praises	\$9,368	Funding for WRAP (Wellness Recovery Action Plan), SMART library, and group/workshop material costs
Union County Health Department	\$5,000	Funding for the liability insurance of the clinic.
Whole Family Community Initiative-House of Ruth	\$18,200	Funding for partial personnel costs of executive director, office manager, and counselor.
	\$121,349	

# Nutrition, Physical Activity, and Weight

Boys & Girls Clubs of Wayne County  Circle U Help Center  Selection of Line of	Organization	Awarded	Summary of Need
Boys & Girls Clubs of Wayne County  S11,800 Funding to support Clubfit programming expenses. Funding to support the healthy shelf stable food program at \$2,000 the Circle U food pantry. Funding to purpose playground equipment and to create an area encouraging increased physical activity in a rural an area encouraging increased physical activity in a rural stable food program at \$2,000 the Circle U food pantry.  Communities In Schools of Wayne County  Connersville Parks & Recreation (Tennis & Pickleball Court)  Connersville Parks & Recreation (Tennis & Pickleball Court)  Funding for renovate and establish tennis and Pickleball courts in Roberts Park to increase access to exercise \$35,000 opportunities.  Cope Environmental Center  Cope Environmental Center  Council on Rural Service Programs, Inc.  Council on Rural Service Programs, Inc.  Council on Rural Service Programs, Inc.  Gateway Hunger Relief Center  Gleaners Food Bank of Indiana  Funding to support he healthy food supplies for Gateway's child box program.  Funding to support the Produce Hope program in multiple sounties in Reid's service area.  Funding to support the Healthy with Hope program in multiple counties in Reid's service area.  Funding to support the Healthy with Hope program in multiple counties in Reid's service area.  Funding to support the Healthy with Hope program in multiple counties in Reid's service area.  Funding to support the Healthy with Hope program that educates clients on good food choices and provides healthy recipe kits that includes the shelf stable items for that \$2,000 challenge during the summer.  Funding to support the Healthy You, Healthy Me) that will educate adults and children about nutrition, \$3,000 physical activity and weight.  Funding to support the Richmond Farmer's Market SNAP Double Dollars Program which matches SNAP dollars 1-to-1 at the Farmers Market.	Amigos Latino Center	\$1,400	Funding for Annual Amigos Health Fair.
County  \$11,800   Funding to support Clubfit programming expenses. Funding to support the healthy shelf stable food program at \$2,000 the Circle U food pantry.  Funding to purchase playground equipment and to create an area encouraging increased physical activity in a rural \$2,225 setting.  Communities In Schools of Wayne County  \$2,000   Wayne county schools  Connersville Parks & Recreation (Tennis & Pickleball Court)  Cope Environmental Center  Cope Environmental Center  Cope Environmental Center  Council on Rural Service Programs, Inc.  Gateway Hunger Relief Center  Gleaners Food Bank of Indiana  Funding to support healthy food supplies for Gateway's \$2,000   Funding to support healthy food supplies for Gateway's School counties in Reid's service area.  Funding to support the Healthy with Hope program that educates clients on good food choices and provides healthy recipe kits that includes the shelf stable items for that School recipe  Funding to support the Richmond Farmer's Market  Plumbard Friends School  Funding to support the Richmond Farmer's Market  Funding to support the Richmond Farmer's Market  Funding to support the Richmond Farmer's Market  Funding to support the Richmond Farmer's Market-SNAP Double Dollars Program which matches SNAP dollars 1-to- 1 tat the Farmers Market  Funding to support in the back outdoor	Birth To Five	\$10,775	Funding to support the Parents as Teachers program.
Circle U Help Center  \$2,000 the Circle U food partry.  Funding to support the healthy shelf stable food program at \$2,000 the Circle U food partry.  Funding to purchase playground equipment and to create an area encouraging increased physical activity in a rural \$2,255 setting.  Communities In Schools of \$2,000 Wayne county schools.  Funding for supplies for physical activity programming at \$2,000 Wayne county schools.  Funding to renovate and establish tennis and Pickleball courts in Roberts Park to increase access to exercise courts in Roberts Park to increase access to exercise opportunities.  Cope Environmental Center  Cope Environmental Center  Funding for the Hike Yourself Healthy and Get Outside-Play program, A 10-week long community health initiative that \$2,115 provide incentives for active time spent outdoors.  Funding for provide Darke county youth with access to fitness opportunities consisting of yoga classes for students, a running program, and an overall fitness challenge during the summer.  Gateway Hunger Relief Center  Gleaners Food Bank of Indiana  Funding to support healthy food supplies for Gateway's child box program.  Funding to support the Produce Hope program in multiple counties in Reid's service area.  Funding to support the Healthy with Hope program that educates clients on good food choices and provides healthy recipe kits that includes the shelf stable items for that \$2,000 recipe  Punding to support a 3 event series (Healthy You, Healthy Me) that will educate adults and children about nutrition, physical activity and weight.  Funding to support the Richmond Farmer's Market SNAP Double Dollars Program which matches SNAP dollars 1-to-stable program which match	Boys & Girls Clubs of Wayne		
Columbia Community Center, Inc.  Columbia Community Center, Inc.  Communities In Schools of #2,205 setting.  Communities In Schools of #2,000 Wayne county schools  Connersville Parks & Recreation (Tennis & Pickleball Court)  Cope Environmental Center  Council on Rural Service  Programs, Inc.  Gleaners Food Bank of Indiana  Gleaners Food Bank of Indiana  Hope Center  Conter - Love Makes Cents, Inc.  \$2,000 the Circle U food pantry.  Funding to provide parks playground equipment and to create an area encouraging increased physical activity in a rural service program, and provide incentives for active time spent outdoors.  Funding for the Hike Yourself Healthy and Get Outside-Play program, A 10-week long community health initiative that provide incentives for active time spent outdoors.  Funding to provide Darke county youth with access to fitness opportunities consisting of yoga classes for students, a running program, and an overall fitness challenge during the summer.  Gleaners Food Bank of Indiana  Funding to support healthy food supplies for Gateway's challenge during the summer.  Funding to support the Produce Hope program in multiple sounded to support the Healthy with Hope program from the ducates clients on good food choices and provides healthy recipe kits that includes the shelf stable items for that seducates clients on good food choices and provides healthy feetper funding to support the Richmond Farmer's Market ShAP Double Dollars Program which matches SNAP dollars 1-to-spend Friender School  Pickmond Farmers Market  Pickmond Farmers Market  Pickmond Farmers Market  Funding for spayground equipment in the back outdoor	County	\$11,800	
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Columbia Community Center, Inc. \$2,225 setting.  Communities In Schools of Wayne County  Connersville Parks & Recreation (Tennis & Pickleball Court)  Cope Environmental Center  Council on Rural Service Programs, Inc.  Gateway Hunger Relief Center  Gleaners Food Bank of Indiana  Hope Center  Center  Natco Community Empowerment Center  Natco Community Empowerment Center  Natco Community Empowerment Center  Community Center, Inc.  \$2,200  Satisfands	Circle o Fielp Ceriter	\$2,000	
\$2,225 setting.  Communities In Schools of Wayne County  Connersville Parks & Recreation (Tennis & Pickleball Court)  Cope Environmental Center  Cope Environmental Center  Council on Rural Service  Programs, Inc.  Cateway Hunger Relief Center  Gleaners Food Bank of Indiana  Celeaners Food Bank of Indiana  Hope Center  Natco Community Empowerment Center  \$2,000 telescope in the Community Empowerment Center  \$2,000 telescope in the Center (Sa,000 telescope in the Center)  \$2,000 telescope in the Relief Center (Sa,000 telescope in Reliefs service area.  Funding to support the Healthy with Hope program in multiple second for the thick shall be support the Healthy with Hope program that educates clients on good food choices and provides healthy recipe kits that includes the shelf stable items for that \$2,000 physical activity and weight.  Funding to support the Richmond Farmer's Market  Pickmond Farmers School  Pickmond Farmers Market  Funding for playground equipment in the back outdoor			Funding to purchase playground equipment and to create
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Council on Rural Service Programs, Inc.  fitness opportunities consisting of yoga classes for students, a running program, and an overall fitness \$2,100 challenge during the summer.  Funding to support healthy food supplies for Gateway's \$2,000 child box program.  Gleaners Food Bank of Indiana  Funding to support the Produce Hope program in multiple \$5,000 counties in Reid's service area.  Funding to support the Healthy with Hope program that educates clients on good food choices and provides healthy recipe kits that includes the shelf stable items for that \$2,000 recipe  Natco Community Empowerment Center - Love Makes Cents, Inc.  Richmond Farmers Market  Richmond Farmers Market  Pichmond Farmers Market  Funding to support a 3 event series (Healthy You, Healthy Me) that will educate adults and children about nutrition, \$3,000 physical activity and weight.  Funding to support the Richmond Farmer's Market- SNAP Double Dollars Program which matches SNAP dollars 1-to- \$12,300 1 at the Farmers Market.  Funding for playground equipment in the back outdoor		\$2,115	provide incentives for active time spent outdoors.
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Hope Center  educates clients on good food choices and provides healthy recipe kits that includes the shelf stable items for that \$2,000 recipe  Natco Community Empowerment Center - Love Makes Cents, Inc.  Richmond Farmers Market  Pichmond Friends School  educates clients on good food choices and provides healthy recipe kits that includes the shelf stable items for that \$2,000 recipe  Funding to support a 3 event series (Healthy You, Healthy Me) that will educate adults and children about nutrition, physical activity and weight.  Funding to support the Richmond Farmer's Market- SNAP Double Dollars Program which matches SNAP dollars 1-to-\$12,300 1 at the Farmers Market.  Funding for playground equipment in the back outdoor	Gleaners Food Bank of Indiana	\$5,000	counties in Reid's service area.
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Center - Love Makes Cents, Inc.  \$3,000 physical activity and weight.  Funding to support the Richmond Farmer's Market- SNAP Double Dollars Program which matches SNAP dollars 1-to- \$12,300 1 at the Farmers Market.  Funding for playground equipment in the back outdoor	Notes Community Employeement		Funding to support a 3 event series (Healthy You, Healthy
Richmond Farmers Market  Richmond Farmers Market  Richmond Farmers Market  Richmond Farmers Market  Standard Friends School  Funding for playground equipment in the back outdoor			Me) that will educate adults and children about nutrition,
Funding to support the Richmond Farmer's Market-SNAP Double Dollars Program which matches SNAP dollars 1-to- \$12,300 1 at the Farmers Market.  Pichmond Friends School  Richmond Friends School	Center - Love Makes Cents, Inc.	\$3,000	physical activity and weight.
\$12,300 1 at the Farmers Market.  Pichmond Friends School  Funding for playground equipment in the back outdoor			
\$12,300 1 at the Farmers Market.  Pichmond Friends School  Funding for playground equipment in the back outdoor	Richmond Farmers Market		Double Dollars Program which matches SNAP dollars 1-to-
Pichmond Friends School		\$12,300	
RICHHODO FUEDOS SCHOOL	Diahmand Frianda Cahaal		Funding for playground equipment in the back outdoor
\$4,804 classroom at Richmond Friends School.	Kichimona Friends School	\$4,804	classroom at Richmond Friends School.

Richmond Parks and Recreation		Funding for the walking club and kids triathlon which are
(Get Healthy Series)	\$2,729	part of the "Get Healthy in our Parks Series".
Richmond Parks and Recreation		Funding to support the JUKO (Just Us Kids Outdoors)
(JUKO)	\$3,475	series.
Richmond Parks and Recreation		Funds to revitilize Middlefork Reservoir including a boat
(Middlefork Reservoir)		fleet to create a new exercise opportunities in the
(Middlefork Reservoir)	\$13,365	community.
Pichmond Vouth Football Loague		Funding for the purchase of 33 new helmets in compliance
Richmond Youth Football League	\$3,300	with concussion safety standards for youth.
Wayne County Cardinal		Funding to support the walking/running training program
Greenway	\$11,692	and the free bike rental program.
VMCA of Darko County		Funding to support the Diabetes Education and Weight
YMCA of Darke County	\$2,500	Loss programs.
Young Men's Christian		Funding to support the Diabetes Prevention and Livestrong
Association of Greater Dayton	\$11,450	Program.
	\$147,030	

# 2018 Grants

Organization	Awarded	Summary of Need
A Better Life-Brianna's Hope		Funding for the program materials needed for A Better Life-
	\$4,500	Brianna's Hope
Achieva Resources	\$10,000	Partial funding for staffing the guardianship program.
Birth to Five (Healthy Families)		Funding to support Healthy Families programming with a
	\$12,900	focus on smoking cessation for mothers and mental health.
Boys & Girls Club		Partial funding for an additional prevention coordinator and
	\$18,950	Life Skills training curriculum/supplies
		Funding to support a pilot program to address depression
Centerstone		among Medicare beneficiaries using Problem Solving
	\$6,000	Therapy and Life Skills Training
Cross Road Christian Recovery		Funding to support the Successful Transition in Recovery
Center	\$15,000	program
Hillcrest Baptist Church		Funding to support Calabrata Daggyany
(Celebrate Recovery)	\$750	Funding to support Celebrate Recovery
Home Is The Foundation	\$2,000	Funding to support the Senior Home Repair program

IU East \$7,500 p  JACY House \$12,000 F	Randolph counties for resource referrals  Partial funding for the student advocate position that provides support to at-risk students
JACY House \$7,500 p	provides support to at-risk students
JACY House \$12,000 F	
	E !
l Ir	Funding to support Speak Up Be Safe
	Funding to support enhancement of residential treatment
\$5,600 p	
	Funding to support organization becoming a DAWN (Death
Pantry \$10,000 A	Avoided with Naloxone) project training center
II INAN Arme Minietriae	Funding to provide emergency assistance for families in
\$2,675 r	need related to drug related incarceration or treatment
9	Funding to purchase one Fatal Vision goggle kit
	Funding to help support salaries and expenses for the
\$5,000 r	homemaker program
Whole Family Community	Funding to support expansion of services and staff to a
Initiative (House of Ruth)	fourth house that will serve as transitional living space for
\$27,500 v	women and children
YWCA Genesis \$10,700 F	Funds to support staffing for counseling services
\$155,075	·

Nutrition, Physical Activity, and V
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Organization	Awarded	Summary of Need
Amigos, The Richmond Latino		Funds to support the Amigos health fair
Center		
Birth to Five	\$17,600	Funds to support Parents as Teachers
Boys & Girls Clubs of Wayne		Support for Club Fit umbrella of fitness and nutrition
County	\$15,000	programs
City of Richmond Parks and		Cupport for kida aummar aama
Recreation Department (Juko)	\$4,600	Support for kids summer camp
Cope Environmental Center		Funding to support Hike Yourself Healthy and Get Outside
	\$4,040	and Play programs
Council on Rural Service		Introduction of a fitness component to an alternative school
Programs, Inc.	\$4,500	and after-school program in Darke County
DIPLOMAS		Provide financial support for teen parenting childcare and
	\$3,476	parenting resources
Discover Connersville - Fayette		Support for Fresh Up Bucks for SNAP or Senior WIC
County Farmers Market	\$2,500	purchases
Fayette County Community		Support the outdoor experience camp in Favotte County
Voices, INC	\$21,000	Support the outdoor experience camp in Fayette County

Fayette County Foundation	\$7,000	Funds to support adult exercise zone at River's Edge Park
Gateway Hunger Relief Center	Ψ1,000	Increase the availability of fresh produce to pantry patrons
Cateway Fluriger Relief Certier	\$5,000	twice per month
Girls Inc. Wayne County	ψ0,000	Weekly healthy snacks and nutritional education on a
ono me. wayne county	\$3.700	monthly basis
Gleaners Food Bank of Indiana,	* - /	Support for fresh produce for Healthy Food for Families
Inc.	\$7,500	program in Wayne County
Hope Center	. ,	Support for nutrition and exercise component of their
·	\$17,080	Healthy with Hope program
Interfaith Mission Center dba Community Food Pantry		Funds to support food for pantry patrons under 18
Richmond Family YMCA	\$2,960	Expand Fitness on the Go classes to Housing Authority
Richmond Farmers Market		Support for Double Dollars program
Richmond Parks and Recreation	* - /	Funds to support the expansion of the Get Healthy in our
	\$3,500	Parks series
Richmond Parks and Recreation		Support for Reservoir project, which begins with new Super Park playground
Richmond Thump Jumpers		Funds to support expanding and continuing the Thump
	\$7,500	Jumpers program
Wayne County Cardinal		Funds to support bike loaner program and the
Greenway	\$11,780	running/walking club
YMCA of Darke County	\$5,700	Support for start-up of YMCA weight loss program
YMCA of Greater Dayton		Funding for Diabetes Prevention Program and Livestrong
	\$11,450	Program
	\$178,250	

# **2017 Grants**

Mental Health & Substance Abuse		
Organization	Amount Awarded	Summary of Need
		Funding to support substance abuse treatment and
A Better Life-Brianna's Hope		detoxification for individuals who would not otherwise be
	\$7,00	00 able to afford assistance
Birth to Five	\$10,00	Polypurport Healthy Families program

		Funding to support Guiding Good Choices, Too Good for
Boys & Girls Club		Drugs, and Project Alert which are all programs under their
	\$15,900	Prevention Plus initiative
		Funding to support certification in Mental Health First Aid
Centerstone		and to provide resource education to veterans, their
	\$6,573	families, and the community
Hope Center	\$1,000	Funding to support Guiding Good Choices at that site
Independent Living Center		Funding to provide ramps to individuals in need throughout
independent Living Center	\$14,000	the service area
Information & Referrral Network		Funding to support 211 services to counties in Reid's
(Connect2Help211)	\$2,500	service area
JACY House		Funding to support Speak Up Be Safe prevention program
	\$12,000	in area schools
Open Arms Ministries		Funding to support emergent needs of families and
	\$8,275	individuals in crisis related to substance abuse
Unchained Praises		Funding to support additional staff hours and resources for
Officialitied Fraises	\$16,200	substance abuse recovery planning
	\$93,448	

# Nutrition, Physical Activity, and Weight

Organization	Amount Awarded	Summary of Need
Birth to Five	\$14,000	Funds to help support the Parents As Teachers Program
Boys & Girls Club	\$19,100	Support for Club Fit-specifically new CATCH curriculum and Fitnessgram.
Christian Chariteis	\$3,500	Funds to purchase half of the Uncrustable sandwiches needed for 1 year of Back Pack Blessings.
Diplomas	\$3,600	Support to help provide in school childcare for 34 infants/toddlers and 68 teen parents each semester at RHS.
Gateway Food Pantry	\$4,900	Funds to help support a mobile pantry with stops in Wayne and Randolph counties.
Girls, Inc	\$6,250	Playground equipment, turf, and borders at their new location
Gleaner's Food Bank of Indiana	\$10,500	Funds to help support the mobile pantries they already provide in addition to market-style pantries at RCS
Red Line EMS & Rescue	\$3,850	Funds to purchase fitness equipment for Wayne Co area 911 providers

Richmond Parks-Farmer's Market	\$8,900	Funds to help support the Double Dollars program
Richmond Parks-JUKO	\$7,750	Supplies, and program costs for JUKO
Richmond Parks-Playground	\$25,000	Funds to cover the poured-in-place fall surface for a new playground designed for children with autism, sensory disorders, and physicial disabilities.
YMCA of Darke Co		Funds for a Diabetes Prevention and Education Program which will include an exercise component in addition to the education
Wayne Co Cardinal Greenway		Funds to support a new walking/running training group, and for the creation of a bike loaner program, where participants could borrow a bike at no cost to ride on the cardinal greenway.
	\$126,550	

# Reid Health Community Benefit Implementation Plan Update: 2019



### **MENTAL HEALTH AND SUBSTANCE ABUSE**

Reid Health will attempt to make improvements in the community needs related to mental health and substance abuse through use of internal resources such as psych services, emergency services, community outreach, marketing and community relations. Reid will work with community agencies identified through the group sessions for implementation planning to implement the strategic interventions and continue efforts already in progress to address these needs.

### **GOAL**

Promote mental, emotional, and behavioral well-being within the communities we serve by improving mental health and reducing substance abuse

### **OBJECTIVES**

- 1. Increase access to mental health services
- 2. Improve overall mental health within the community
- 3. Reduce the incidence and complications of substance abuse

### **INTERVENTIONS**

- Provide education and enhance awareness of current programs among providers and community members to increase the access to mental health and substance abuse services and improve the overall mental health and reduce the incidence of substance abuse.
- Promote positive stories regarding successful treatment for mental health and/ or substance abuse to encourage community members to seek help for mental health issues and substance abuse.
- 3. Conduct a stigma reduction campaign to increase the level of awareness of the importance of mental health and substance abuse as an aspect of overall health management and reduce community biases against those afflicted with mental health or substance abuse issues.

### **CONTINUED EFFORTS**

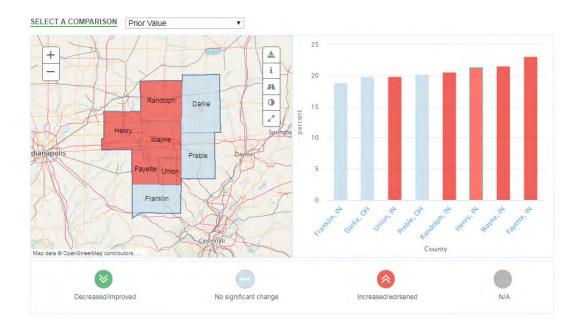
Addiction Resource Guide
Alzheimer's Education Series
Birth Control Options for Those Suffering with Addiction
Call Us First/Signs of Heroin Use Cards
Heroin is Here
JACY House
Mental Health and Substance Abuse Symposium
Narcan Program
Neonatal Abstinence Program
Opioid Education Flyers
Prescription Drug Safety Awareness Education
Reid Health Community Benefit Grant Program
Syringe Exchange Program

### INDICATORS TO MEASURE IMPROVEMENT

### **ADULTS WHO SMOKE**

### This indicator shows the percentage of adults who currently smoke cigarettes.

With this indicator we see an unfortunate increase in the percentage of adults currently smoking cigarettes in five of the eight counties in Reid's service area. The other three counties remained the same or had no significant change since the last measurement.



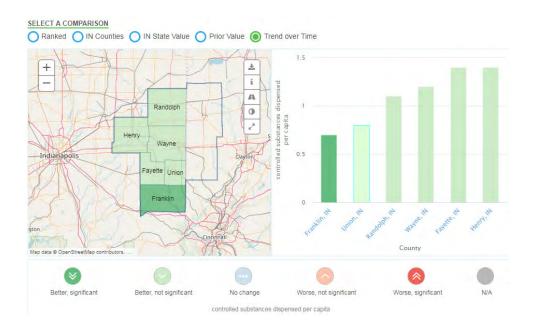
As compared to the U.S. value, all of the counties in the service area remain higher for rates of smoking among adults than the current national average.



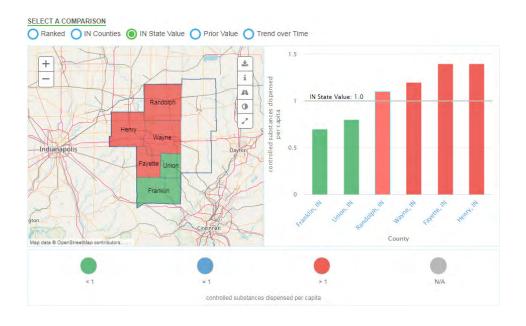
### **CONTROLLED SUBSTANCES DISPENSED**

This indicator shows the number of controlled substances dispensed by a licensed pharmacist or physician per capita.

This is a metric only measured in the Indiana counties that are served by Reid. For this indicator, all of the counties show a positive trend of improvement through a decrease in the amount of controlled substances dispensed.



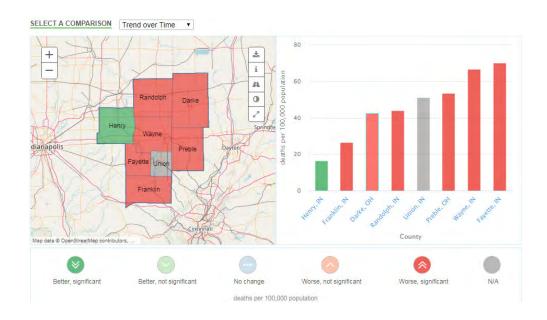
We do not have a national average for this indicator. As compared to the state value, 4 of the 6 Indiana counties within the service area remain higher than the state rate of controlled substances dispensed per capita.



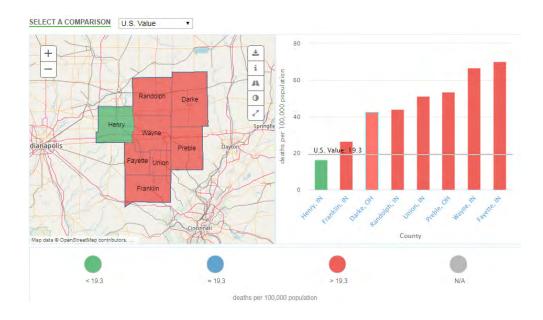
### **DEATH RATE DUE TO DRUG POISONING**

### This indicator shows the death rate per 100,000 people due to drug poisoning.

For this indicator, all of the counties within the service area have a negative trend for death rate due to drug poisoning with the exception of Henry County which has shown significant improvement. Union County does not provide reporting for this indicator.



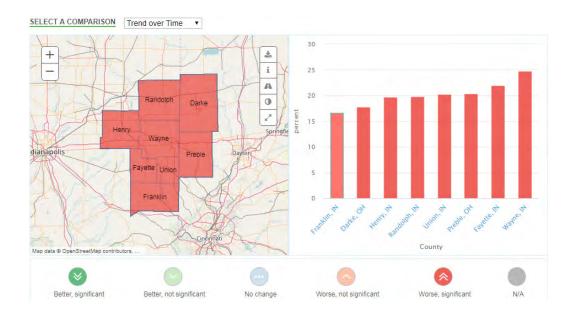
All counties reporting for the indicator remain worse than the U.S. value of 19.3 deaths per 100,000 people, with the exception of Henry County.



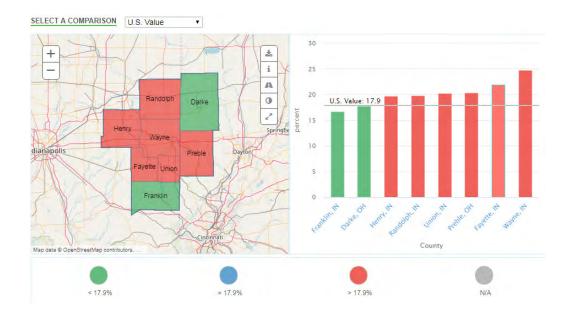
### **DEPRESSION: MEDICARE POPULATION**

This indicator shows the percentage of Medicare beneficiaries who were treated for depression.

For this indicator, all of the counties in the service area show a negative trend for Medicare beneficiaries who were treated for depression.



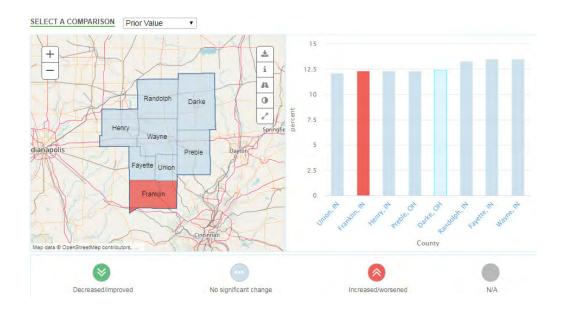
As compared to the U.S. value, six of the eight counties in Reid's service are rank higher than the national average. Darke and Franklin Counties rank lower than the national average for Medicare recipients being treated for depression.



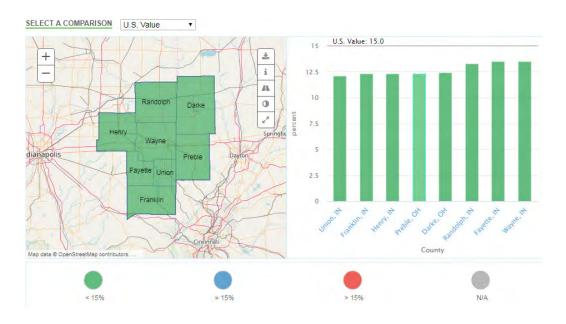
#### FREQUENT MENTAL DISTRESS

This indicator shows the percentage of adults who stated that their mental health, which includes stress, depression, and problems with emotions, was not good for 14 or more of the past 30 days.

As compared to the prior measurement period, 7 counties demonstrated no significant change, but Franklin County has seen an increase.



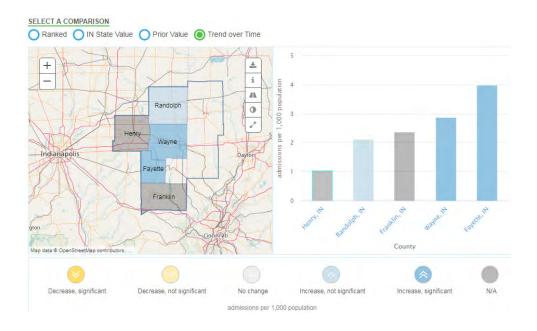
In comparison to the U.S. value, all 8 of the counties in Reid's service area rank better than the national average.



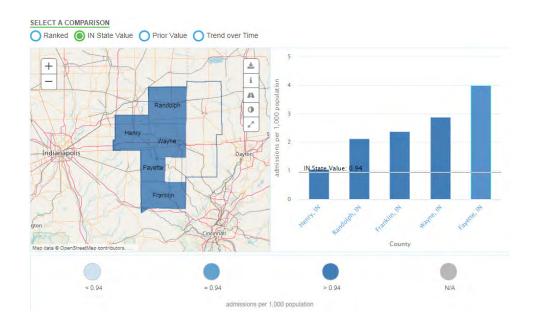
## HEROIN TREATMENT RATE

This indicator shows the number of treatment admissions for heroin use per 1,000 population based on claims data.

This indicator is only measured for Indiana counties within the service area and Union county does not report the Heroin Treatment rate. Henry and Franklin Counties have not reported long enough to indicate a trend. Wayne and Fayette have shown a significant increase, and Randolph, an insignificant increase.



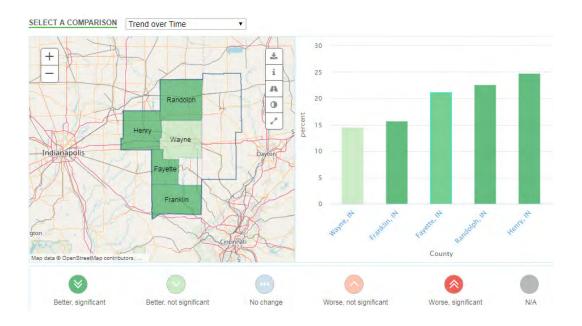
We do not have a national average for this indicator. As compared to the state value, all of the counties with prior reporting history were higher than the state average.



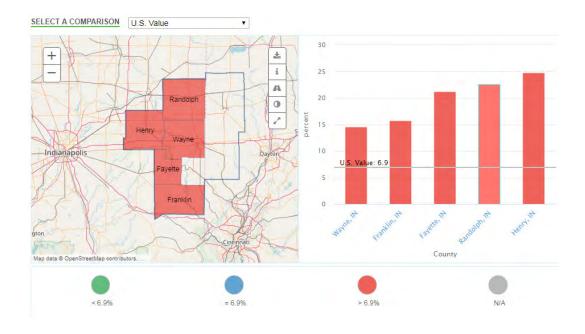
#### MOTHERS WHO SMOKE DURING PREGNANCY

This indicator shows the percentage of births that were to mothers who smoked and/or used tobacco during pregnancy.

This indicator is only measured for our Indiana counties, with Union County not reporting long enough to indicate trend. Four of the five counties with data demonstrate a significant positive trend, with Wayne showing an insignificant, but positive trend in the decrease of mothers who smoke during pregnancy.



All of the counties measured within the service area remain higher than the U.S. value for this indicator.



# **ACCESS TO CARE**

Reid Health will attempt to make improvements in the community needs related to access to care through use of internal resources such as Claim Aid, psych services, emergency services, Reid Health Physician Associates (RHPA), continuum of care, community outreach, recruiting, marketing and community relations. Reid will work with community agencies identified through the group sessions for implementation planning to implement the strategic interventions and continue efforts already in progress to address these needs.

## **GOAL**

Improve access to care for the Reid service area by reducing barriers to care through addressing the shortage of providers, closing the insurance coverage gaps, and improving overall health literacy

#### **OBJECTIVES**

- 1. Improve availability of services
- 2. Reduce barriers to receiving services
- 3. Inform, educate, and empower community members to utilize the appropriate care setting for their healthcare needs

#### **INTERVENTIONS**

- 1. Expand dental clinic to other counties to increase the availability of dental services and increase the screening of individuals without dental coverage to assist them in applying for insurance programs that they may qualify for.
- 2. Expand healthcare workforce development to target areas of need such as dentistry, primary care, and mental health.
- 3. Increase awareness events with community agencies offering children's services or with those serving the asset limited, income constrained, employed (ALICE) population to expand the community knowledge of insurance programs that they may apply for.

#### **CONTINUED EFFORTS**

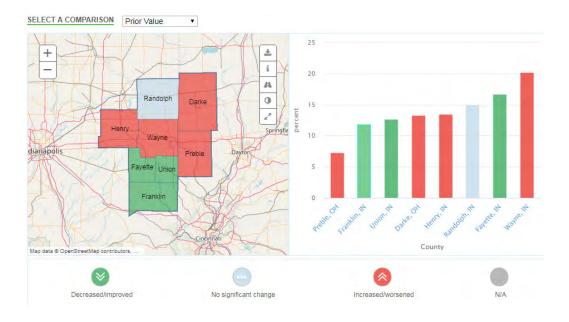
Community Screenings **Dental Clinic Enrollment Assistance** Health Career Camp Healthcare Workforce Development HIP 2.0 Assistance Program Lab Processing **Medical Students** Patient Assistance Fund Pursuit of Federally Qualified Health Center (FQHC) Reid Nurse Call Line Scholarships

## INDICATORS TO MEASURE IMPROVEMENT

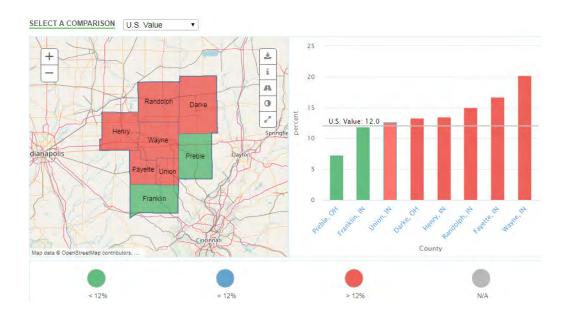
## ADULTS UNABLE TO AFFORD TO SEE A DOCTOR

This indicator shows the percentage of adults that report having a time in the past 12 months when they were unable to afford to see a doctor.

Three counties, Franklin, Union, and Fayette, demonstrated improvement in this indicator from the prior measurement period while four counties worsened. Randolph County did not have any significant change over the measurement period.



As compared to the U.S. value, Preble and Franklin have fewer adults unable to afford to see a doctor than the national average, but the other 6 counties in Reid's service area are higher than the national average for this indicator.



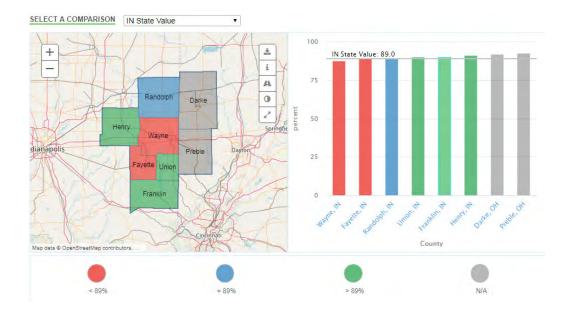
## **ADULTS WITH HEALTH INSURANCE**

This indicator shows the percentage of adults aged 18-64 years that have any type of health insurance coverage.

All of the counties within the service area have shown a positive trend over time for adults with health insurance.



We do not have a national average for this indicator. As compared to the IN state value, Union, Henry, and Franklin are better than the state value. Wayne and Fayette are lower than the state value, and Randolph is right at the state value.



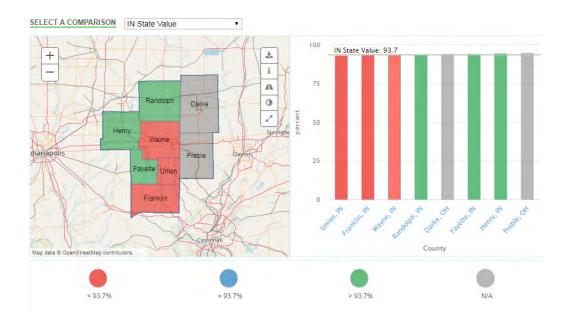
## CHILDREN WITH HEALTH INSURANCE

This indicator shows the percentage of children under 19 that have any type of health insurance coverage.

All of the counties within the service area demonstrate a positive trend for the percentage of children that have any type of health insurance.



We do not have a national average for this indicator. As compared to the Indiana state value, Wayne, Union, and Franklin are worse than average, but Randolph, Fayette, and Henry counties above the state average.



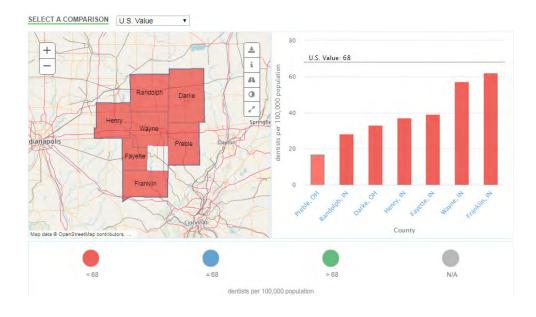
#### **DENTIST RATE**

## This indicator shows the rate of dentists per 100,000 population.

This indicator demonstrates a significant positive trend in the rate of dentists in six of eight counties in our service area, and shows a positive, but insignificant improvement in Preble County. Union County does not have data to indicate trend, but we are aware from community engagement that Union County does not currently have any dentists providing services in that county.



Compared to the U.S. value, all of the counties in Reid's service area fall below the national rate for number of dentists per 100,000 people, with the exception of Union, that does not report.



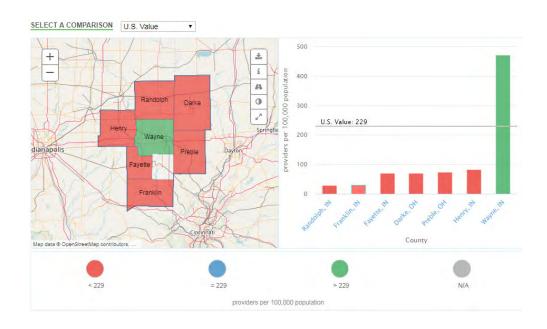
## **MENTAL HEALTH PROVIDER RATE**

# This indicator shows the mental health provider rate in providers per 100,000 population.

This indicator has seen a significant, positive trend in four counties, a better but insignificant trend in two counties, and just Wayne County showing a slight, but insignificant decrease in the mental health provider rate. Union county does not report for this indicator.



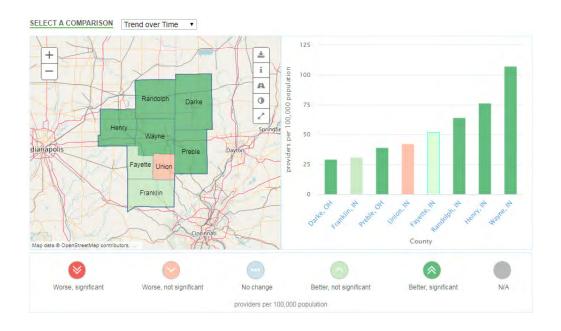
Wayne County remains the only county within the service area to be above average for the number of mental health providers when compared to other US counties.



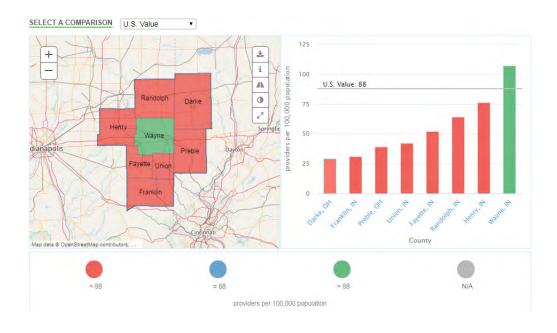
#### NON-PHYSICIAN PRIMARY CARE PROVIDER RATE

This indicator shows the non-physician primary care provider rate per 100,000 population. Primary care providers who are not physicians include nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists.

This indicator demonstrates a significant positive trend for five counties, a better, but insignificant improvement in two counties, and just Union County showing a slight, but insignificant decrease in the non-physician primary care provider rate.



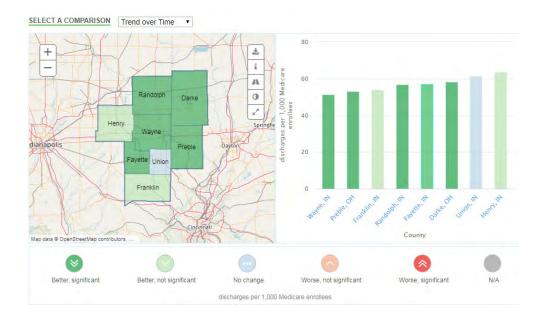
We are lower than the U.S. value in all counties except Wayne.



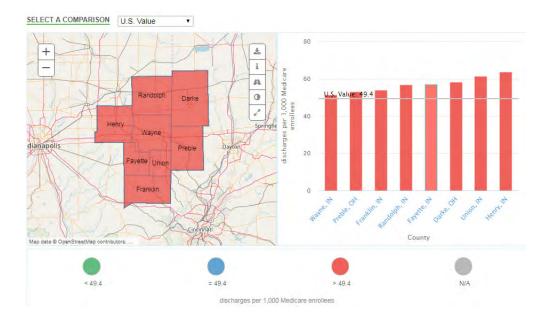
## PREVENTABLE HOSPITAL STAYS

This indicator shows the hospital discharge rate for ambulatory care-sensitive conditions (ACSC) per 1,000 Medicare enrollees.

This indicator has seen a significant, positive trend in five counties and a better, but insignificant positive trend in two counties. Union County had no change.



We remained higher than the national rate in all of the counties within the service area for this indicator signaling an over use of hospital level of care when a lesser level of care would be more appropriate.



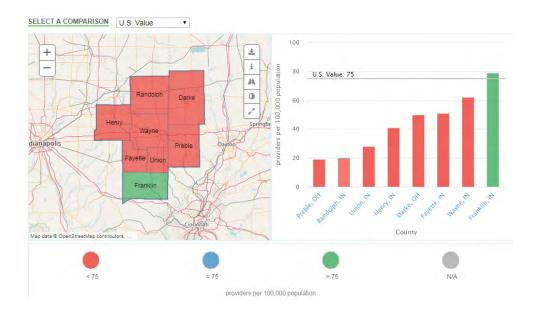
#### PRIMARY CARE PROVIDER RATE

This indicator shows the primary care provider rate per 100,000 population. Primary care providers include practicing physicians specializing in general practice medicine, family medicine, internal medicine, and pediatrics.

This indicator demonstrates a significant positive trend in the number of primary care providers in two counties, better but insignificant improvement in three counties, a slight but insignificant decrease in two counties, and just one county with a significant decrease.



Franklin County was the only county within the service area that is above the national average for this indicator.



# PHYSICAL ACTIVITY, NUTRITION & WEIGHT

Reid Health will attempt to make improvements in the community needs related to physical activity, nutrition, and weight through use of internal resources such as food and nutrition services, wellness, community outreach, marketing and community relations. Reid will work with community agencies identified through the group sessions for implementation planning to implement the strategic interventions and continue efforts already in progress to address these needs.

#### **GOAL**

Improve the health of the community by encouraging healthy choices and reducing the disparities related to activity and nutrition

#### **OBJECTIVES**

- 1. Increase physical activity and reduce obesity
- 2. Increase the availability of healthy foods within the community

#### **INTERVENTIONS**

- 1. Host and/or partner with community agencies to provide classes to educate the community on healthy eating on a budget.
- 2. Host and/or partner with community agencies to provide family fitness events and/or education to community members to encourage engagement in physical activity for the whole family.
- 3. Incentivize community participation for participation in events which promote physical activity, healthy eating, and weight reduction.
- 4. Expand corporate wellness programs and/or challenges in the community to further engage individuals in physical activity, healthy eating, and weight reduction.

#### **CONTINUED EFFORTS**

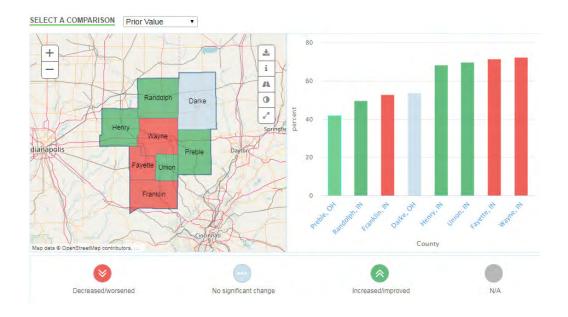
**End Hunger Now Event** Food Rescue Collaborative Healthy Cooking Classes I Heart Cooking Meal donations to Community Meal Sites Reid Health Community Benefit Grant Program Reid Healthier Steps to End Hunger Subsidized meals for Community Programs

## INDICATORS TO MEASURE IMPROVEMENT

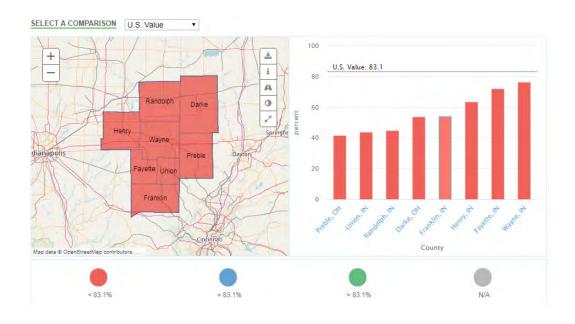
## ACCESS TO EXERCISE OPPORTUNITIES

This indicator measures the percentage of individuals who live reasonably close to a park or recreational facility.

Based on the prior value, four of the eight counties in our service area improved, and one had no change in this indicator. Three counties showed a slight decrease Wayne (-4.3%), Fayette (-0.8%), Franklin (-1.5%) from the previous value.



As compared to the U.S. value, all of our counties within the service area are well below average.



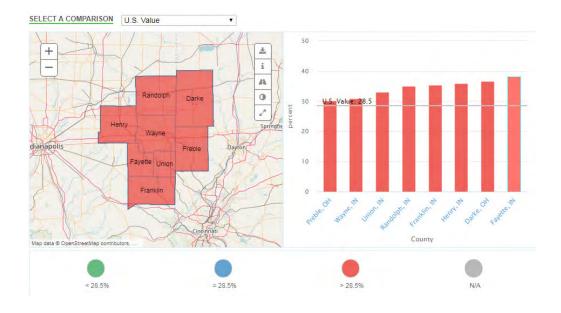
#### **ADULTS 20+ WHO ARE OBESE**

This indicator shows the percentage of adults aged 20 and older who are obese according to the Body Mass Index (BMI). The BMI is calculated by taking a person's weight and dividing it by their height squared in metric units (BMI = Weight (Kg)/ [Height (m) ^ 2]). A BMI >=30 is considered obese.

This indicator demonstrates a negative trend in the number of adults 20+ who are obese. There is a negative, but insignificant decrease in four counties, and a slight but insignificant positive movement in two counties.



In comparison to the U.S. value, all of the counties in Reid's service area demonstrated a higher rate of adult obesity.



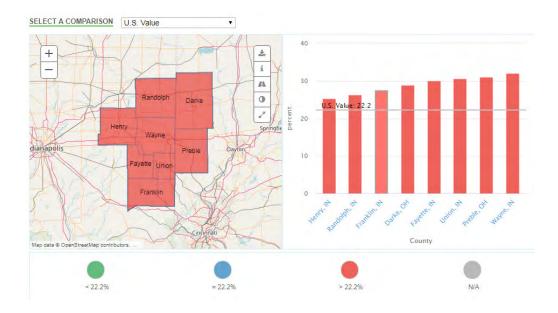
#### **ADULTS 20+ WHO ARE SEDENTARY**

This indicator shows the percentage of adults (ages 20 and up) who did not participate in any leisure-time activities (physical activities other than their regular job) during the past month.

This indicator demonstrates a significant positive trend in Randolph and Henry, a better but insignificant change in Darke and Fayette, a slightly negative but insignificant downturn in Wayne, Franklin, and Preble, but a significantly worse downturn in Union County, in the percentage of adults who are sedentary.



All of the counties in Reid's service area demonstrate a higher rate of adults 20+ who are sedentary than the U.S. value.



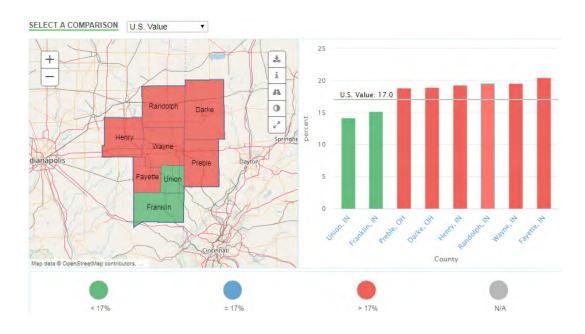
#### CHILD FOOD INSECURITY RATE

This indicator shows the percentage of children (under 18 years of age) living in households that experienced food insecurity at some point during the year.

This indicator demonstrates a significant positive trend of improvement in six counties and a better, but insignificant improvement in two counties in our service area for combatting the percentage of children experiencing food insecurity.



In comparison the U.S. value, all of the counties within the service area with the exception of Franklin and Union, have a higher childhood food insecurity rate than the national average.



## APPENDIX B. SECONDARY DATA METHODOLOGY

#### SECONDARY DATA SOURCES

The main source for the secondary data, or data that has been previously collected, is <u>Reid Healthier Communities</u>, a publicly available data platform that is maintained by Reid Health and the Healthy Communities Institute.

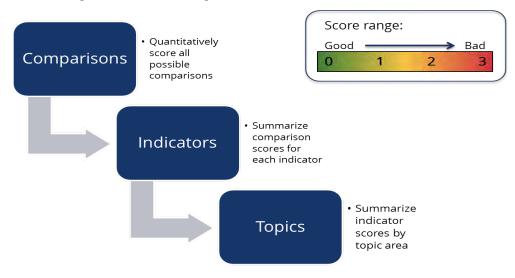
The following is a list of both local and national sources for which data is maintained for Reid Health's service area on Reid Healthier Communities community dashboard.

- American Community Survey
- · Annie E. Casey Foundation
- Centers for Disease Control and Prevention
- Centers for Medicare & Medicaid Services
- County Health Rankings
- · Feeding America
- Indiana Secretary of State
- Indiana State Department of Health
- Indiana University Center for Health Policy
- Institute for Health Metrics and Evaluation
- National Cancer Institute
- National Center for Education Statistics
- National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
- National Environment Public Health Tracking Network
- Ohio Department of Education
- · Ohio Department of Health
- Ohio Department of Health, Infectious Diseases
- Ohio Department of Health, Vital statistics
- Ohio Department of Public Safety, Office of Criminal Justice Services
- · Ohio Secretary of State
- Small Area Health Insurance Estimates
- The Dartmouth Atlas of Health Care
- U.S. Bureau of Labor Statistics
- U.S. Department of Agriculture Food Environment Atlas
- U.S. Environmental Protection Agency

#### SECONDARY DATA SCORING

## Secondary Data Scoring Detailed Methodology

Data Scoring is done in three stages:



For each indicator, each county in Reid Health's service area is assigned a score based on its comparison to other communities, whether health targets have been met, and the trend of the indicator value over time. These comparison scores range from 0-3, where 0 indicates the best outcome and 3 the worst. Availability of each type of comparison varies by indicator and is dependent upon the data source, comparability with data collected for other communities, and changes in methodology over time.

Indicators are categorized into topic areas and each topic area receives a score. Indicators may be categorized in more than one topic area. Topic scores are determined by the comparisons of all indicators within the topic. Topic scores for each of the eight counties in Reid Health's service area were then collated by ranking order and frequency of appearance in order to systematically capture a comprehensive list of the top ten health topics for Reid Health's service area.

### Comparison to a Distribution of County Values: Within State and Nation

For ease of interpretation and analysis, indicator data on the Community Dashboard is visually represented as a green-yellow-red gauge showing how the community is faring against a distribution of counties in the state or the United States. A distribution is created by taking all county values within the state or nation, ordering them from low to high, and dividing them into three groups (green, yellow, red) based on their order. Indicators with the poorest comparisons ("in the red") scored high, whereas indicators with good comparisons ("in the green") scored low.

## Comparison to Values: State, National, and Targets

Your county is compared to the state value, the national value, and target values. Targets values include the nation-wide Healthy People 2020 (HP2020) goals as well as locally set goals. Healthy People 2020 goals are national objectives for improving the health of the nation set by the Department of Health and Human Services'

(DHHS) Healthy People Initiative. For all value comparisons, the scoring depends on whether the county value is better or worse than the comparison value, as well as how close the county value is to the target value.

#### **Trend Over Time**

The Mann-Kendall statistical test for trend was used to assess whether the county value is increasing over time or decreasing over time, and whether the trend is statistically significant. The trend comparison uses the four most recent comparable values for the county, and statistical significance is determined at the 90% confidence level. For each indicator with values available for four time periods, scoring was determined by direction of the trend and statistical significance.

### Missing Values

Indicator scores are calculated using the comparison scores, availability of which depends on the data source. If the comparison type is possible for an adequate proportion of indicators on the community dashboard, it will be included in the indicator score. After exclusion of comparison types with inadequate availability, all missing comparisons are substituted with a neutral score for the purposes of calculating the indicator's weighted average. When information is unknown due to lack of comparable data, the neutral value assumes that the missing comparison score is neither good nor bad.

### **Indicator Scoring**

Indicator scores are calculated as a weighted average of all included comparison scores. If none of the included comparison types are possible for an indicator, no score is calculated and the indicator is excluded from the data scoring results.

#### **Topic Scoring**

Indicator scores are averaged by topic area to calculate topic scores. Each indicator may be included in up to three topic areas if appropriate. Resulting scores range from 0-3, where a higher score indicates a greater level of need as evidenced by the data. A topic score is only calculated if it includes at least three indicators.

### **DATA SCORING RESULTS**

The following tables list each indicator by topic area for each of the eight counties in Reid Health's service area. Secondary data for this report is up to date as of May 16th, 2019.

# DARKE COUNTY, OHIO

			DARKE				MEASUREMENT	
SCORE	ACCESS TO HEALTH SERVICES	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
	Non-Physician Primary Care	providers/ 100,000						
2.17	Provider Rate	population	29.1		86.2	88.2	2018	5
2.00	Mental Health Provider Rate	providers/100,000 population	69.9		212.3	228.7	2018	5
		· ·		100		220.7		
1.86	Children with Health Insurance	percent	94.2	100	95.4		2017	16
1.83	Dentist Rate	dentists/ 100,000 population	33		61.6	68.4	2017	5
1.72	Primary Care Provider Rate	providers/ 100,000 population	50.2		76.7	75.4	2016	5
1.50	Preventable Hospital Stays: Medicare Population	discharges/ 1,000 Medicare enrollees	58.3		57	49.4	2015	17
1.42	Clinical Care Ranking	ranking	45				2019	5
1.36	Persons with Health Insurance	percent	92.6	100	92.9		2017	16
1.19	Adults with Health Insurance: 18-64	percent	91.9	100	91.9		2017	16
SCORE	CANCER	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.78	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/ 100,000 population	20.3	14.5	15.9	14.5	2011-2015	7
2.50	Age-Adjusted Death Rate due to Cancer	deaths/ 100,000 population	183.3	161.4	179.3	163.5	2011-2015	7
2.33	Colorectal Cancer Incidence Rate	cases/ 100,000 population	51.9	39.9	41.7	39.2	2011-2015	7
1.94	All Cancer Incidence Rate	cases/ 100,000 population	458.2		456.3	441.2	2011-2015	7
1.83	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	50.6	45.5	51.7	43.4	2011-2015	7
1.67	Age-Adjusted Death Rate due to Prostate Cancer	deaths/ 100,000 males	20.7	21.8	19.5	19.5	2011-2015	7

1.44	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	21.9	20.7	22.9	20.9	2011-2015	7
1.28	Breast Cancer Incidence Rate	cases/ 100,000 females	114.5		126.2	124.7	2011-2015	7
1.11	Oral Cavity and Pharynx Cancer Incidence Rate	cases/ 100,000 population	10.6		11.7	11.6	2011-2015	7
1.00	Cancer: Medicare Population	percent	7		8.3	8.2	2017	4
0.89	Lung and Bronchus Cancer Incidence Rate	cases/ 100,000 population	62.2		69.3	60.2	2011-2015	7
0.89	Mammography Screening: Medicare Population	percent	65.2		62.4	63.2	2015	17
0.72	Prostate Cancer Incidence Rate	cases/ 100,000 males	92.4		108	109	2011-2015	7
			DARKE				MEASUREMENT	
SCORE	CHILDREN'S HEALTH	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
1.86	Children with Health Insurance	percent	94.2	100	95.4		2017	16
1.50	Child Abuse Rate (HP2020)	cases/ 1,000 children	5.9		7.3		2017	2
1.25	Children who are Overweight or Obese: 3rd Graders	percent	24.1				2009-2010	11
1.00	Child Food Insecurity Rate	percent	19.5		20.3	17.9	2016	6
1.00	Children with Low Access to a Grocery Store	percent	1.3				2015	20
0.89	Food Insecure Children Likely Ineligible for Assistance	percent	21		34	20	2016	6
SCORE	COUNTY HEALTH RANKINGS	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
1.75	Physical Environment Ranking	ranking	82				2019	5
1.58	Health Behaviors Ranking	ranking	47				2019	5
1.58	Mortality Ranking	ranking	52				2019	5
1.42	Clinical Care Ranking	ranking	45				2019	5
1.25	Morbidity Ranking	ranking	15				2019	5

	Social and Economic Factors							
1.25	Ranking	ranking	17				2019	5
			DARKE				MEASUREMENT	
SCORE	DIABETES	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
1.28	Diabetes: Medicare Population	percent	27.2		27.7	27.2	2017	4
1.22	Adults 20+ with Diabetes	percent	11.5		11.7	10.2	2015	5
	Diabetic Monitoring: Medicare							
0.83	Population	percent	89.6		85.4	85.7	2015	17
	Age-Adjusted Death Rate due							
0.72	to Diabetes	deaths/ 100,000 population	20		25	21.2	2015-2017	3
			DARKE				MEASUREMENT	
SCORE	ECONOMY	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
2.44	Total Employment Change	percent	-1.1		1.5	2.1	2015-2016	19
2.11	SNAP Certified Stores	stores/ 1,000 population	0.4				2016	20
						1935		
1.97	Median Housing Unit Value	dollars	113200		135100	00	2013-2017	1
						3117		
1.83	Per Capita Income	dollars	24768		29011	7	2013-2017	1
4.64	Unemployed Workers in		4.4		4.7	4.4	5-h	10
1.61	Civilian Labor Force	percent	4.4		4.7	4.1	February 2019	18
	Persons with Disability Living in							
1.42	Poverty (5-year)	percent	29		30.4	27.1	2013-2017	1
1 20	People Living 200% Above		C7 1		C7 F	67.2	2012 2017	1
1.39	Poverty Level	percent	67.1		67.5	67.2 5765	2013-2017	1
1.33	Median Household Income	dollars	50064		52407	2	2013-2017	1
1.25	Median Household Gross Rent	dollars	645		764	982	2013-2017	1
1.25	Social and Economic Factors	uoliuis	045		704	902	2013-2017	<b>L</b>
1.25	Ranking	ranking	17				2019	5
_,	Ţ.		_,					
1.22	Female Population 16+ in Civilian Labor Force	norcont	58.2		58.9	58.2	2013-2017	1
1.22	כועווומוו במטטו דטוכפ	percent	JØ.2		58.9	Jŏ.Z	2015-2017	

1.17	Homeowner Vacancy Rate	percent	1.5	1.7	1.7	2013-2017	1
1.11	Severe Housing Problems	percent	12.5	14.5	18.4	2011-2015	5
1.06	Population 16+ in Civilian Labor Force	percent	63.6	63.1	63	2013-2017	1
1.03	Median Monthly Owner Costs for Households without a Mortgage	dollars	392	458	474	2013-2017	1
1.00	Child Food Insecurity Rate	percent	19.5	20.3	17.9	2016	6
1.00	Low-Income and Low Access to a Grocery Store	percent	2.4			2015	20
0.89	Food Insecure Children Likely Ineligible for Assistance	percent	21	34	20	2016	6
0.81	Mortgaged Owners Median Monthly Household Costs	dollars	1056	1247	1515	2013-2017	1
0.78	Homeownership	percent	66.1	59.1	56	2013-2017	1
0.72	Households with Cash Public Assistance Income	percent	2.1	3.1	2.6	2013-2017	1
0.72	Renters Spending 30% or More of Household Income on Rent	percent	41.3	46.7	50.6	2013-2017	1
0.67	Food Insecurity Rate	percent	12.1	15.1	12.9	2016	6
0.50	Children Living Below Poverty Level	percent	17.5	21.3	20.3	2013-2017	1
0.50	Income Inequality		0.4	0.5	0.5	2013-2017	1
0.50	People Living Below Poverty Level	percent	11.6	14.9	14.6	2013-2017	1
0.39	People 65+ Living Below Poverty Level	percent	5.2	8	9.3	2013-2017	1
0.39	Students Eligible for the Free Lunch Program	percent	26.9	40.2	42.6	2015-2016	8
0.33	Young Children Living Below Poverty Level	percent	17.3	25.1	22.5	2013-2017	1
0.17	Families Living Below Poverty Level	percent	7.6	10.8	10.5	2013-2017	1

SCORE	EDUCATION	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.00	People 25+ with a Bachelor's Degree or Higher	percent	14.2		27.2	30.9	2013-2017	1
1.94	Student-to-Teacher Ratio	students/ teacher	17.5		17.6	16.5	2016-2017	8
1.17	4th Grade Students Proficient in Math	percent	82.4		47.7		2016-2017	10
1.17	4th Grade Students Proficient in Reading	percent	69.7		38.7		2016-2017	10
1.00	8th Grade Students Proficient in Math	percent	60.9		22.3		2016-2017	10
1.00	8th Grade Students Proficient in Reading	percent	69		25.7		2016-2017	10
1.00	People 25+ with a High School Degree or Higher	percent	89.5		89.8	87.3	2013-2017	1
0.64	High School Graduation	percent	96.7	87	90.6	84.6	2016-2017	10
SCORE	ENVIRONMENT	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.39	Houses Built Prior to 1950	percent	41.5		26.8	18	2013-2017	1
2.33	Access to Exercise Opportunities	percent	53.7		84.1	83.9	2019	5
2.11	SNAP Certified Stores	stores/ 1,000 population	0.4				2016	20
1.94	Liquor Store Density	stores/ 100,000 population	9.7		6.7	10.5	2016	19
1.83	Farmers Market Density	markets/ 1,000 population	0				2016	20
1.75	Physical Environment Ranking	ranking	82				2019	5
1.61	Months of Mild Drought or Worse	months per year	9				2016	9
1.61	Number of Extreme Heat Days	days	45				2016	9
1.61	Recognized Carcinogens Released into Air	pounds	542				2017	21

	Number of Extreme Heat							
1.39	Events	events	5				2016	9
1.39	Number of Extreme Precipitation Days	days	137				2016	9
1.39	PBT Released	pounds	1.2				2017	21
1.33	Households with No Car and Low Access to a Grocery Store	percent	2.3				2015	20
1.33	Recreation and Fitness Facilities	facilities/ 1,000 population	0.1				2014	20
1.22	Daily Dose of UV Irradiance	Joule per square meter	2298		2351		2015	9
1.17	Fast Food Restaurant Density	restaurants/ 1,000 population	0.6				2014	20
1.17	Grocery Store Density	stores/ 1,000 population	0.2				2014	20
1.11	Severe Housing Problems	percent	12.5		14.5	18.4	2011-2015	5
1.00	Children with Low Access to a Grocery Store	percent	1.3				2015	20
1.00	Low-Income and Low Access to a Grocery Store	percent	2.4				2015	20
1.00	People 65+ with Low Access to a Grocery Store	percent	1.2				2015	20
1.00	People with Low Access to a Grocery Store	percent	5.9				2015	20
0.33	Food Environment Index		8.3		6.7	7.7	2019	5
SCORE	EXERCISE, NUTRITION, & WEIGHT	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
3.00	Adults 20+ who are Obese	percent	36.5	30.5	31.8	28.5	2015	5
2.33	Access to Exercise Opportunities	percent	53.7	23.0	84.1	83.9	2019	5
2.11	SNAP Certified Stores	stores/ 1,000 population	0.4				2016	20
1.89	Adults 20+ who are Sedentary	percent	28.8	32.6	24.6	22.2	2015	5
1.83	Farmers Market Density	markets/ 1,000 population	0				2016	20
1.72	Workers who Walk to Work	percent	2.2	3.1	2.2	2.7	2013-2017	1

1.58	Health Behaviors Ranking	ranking	47				2019	5
1.33	Households with No Car and Low Access to a Grocery Store	percent	2.3				2015	20
1.33	Recreation and Fitness Facilities	facilities/ 1,000 population	0.1				2014	20
1.25	Children who are Overweight or Obese: 3rd Graders	percent	24.1				2009-2010	11
1.17	Fast Food Restaurant Density	restaurants/ 1,000 population	0.6				2014	20
1.17	Grocery Store Density	stores/ 1,000 population	0.2				2014	20
1.00	Child Food Insecurity Rate	percent	19.5		20.3	17.9	2016	6
1.00	Children with Low Access to a Grocery Store	percent	1.3				2015	20
1.00	Low-Income and Low Access to a Grocery Store	percent	2.4				2015	20
1.00	People 65+ with Low Access to a Grocery Store	percent	1.2				2015	20
1.00	People with Low Access to a Grocery Store	percent	5.9				2015	20
0.89	Food Insecure Children Likely Ineligible for Assistance	percent	21		34	20	2016	6
0.67	Food Insecurity Rate	percent	12.1		15.1	12.9	2016	6
0.33	Food Environment Index		8.3		6.7	7.7	2019	5
SCORE	HEART DISEASE & STROKE	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
JCOKL	Heart Failure: Medicare	OITIIS	COOMIT	111 2020	01110	0.5.	i Litiob	Jource
2.83	Population	percent	16.5		14.8	13.9	2017	4
	Atrial Fibrillation: Medicare	·						
2.61	Population	percent	10.4		8.9	8.4	2017	4
2.50	Hypertension: Medicare Population	percent	62.7		59.8	57.1	2017	4

		1						
2.39	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/ 100,000 population	126.4	103.4	104.8	94.8	2015-2017	3
2.11	Age-Adjusted Death Rate due to Heart Attack	deaths/ 100,000 population 35+ years	87.1		67		2015	9
2.00	Ischemic Heart Disease: Medicare Population	percent	29.7		27.9	26.9	2017	4
1.56	Hyperlipidemia: Medicare Population	percent	42.9		42.5	40.7	2017	4
1.50	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/ 100,000 population	38.7	34.8	41.4	37.5	2015-2017	3
0.78	Stroke: Medicare Population	percent	3.3		3.8	3.8	2017	4
SCORE	IMMUNIZATIONS & INFECTIOUS DISEASES	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.83	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/ 100,000 population	23.2		15.5	14.3	2015-2017	3
1.44	Gonorrhea Incidence Rate	cases/ 100,000 population	67.6		206.6		2017	12
0.89	Chlamydia Incidence Rate	cases/ 100,000 population	191.2		528.9		2017	12
0.58	Tuberculosis Incidence Rate	cases/ 100,000 population	0	1	1.3	2.8	2017	12
0.50	Salmonella Infection Incidence Rate	cases/ 100,000 population	7.7	11.4	11.8		2016	12
SCORE	MATERNAL, FETAL & INFANT HEALTH	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.08	Infant Mortality Rate	deaths/ 1,000 live births	8.2	6	7.5	6	2012	13
1.81	Mothers who Smoked During Pregnancy	percent live births/ 1,000 females	19.2	1.4	17.8	9.2	2010	13
1.31	Teen Birth Rate: 15-17	aged 15-17	7.3 7				2017	13
1.11	Babies with Low Birth Weight	percent		7.8		8.3	2017	13

	Babies with Very Low Birth							
1.08	Weight	percent	0.1	1.4	0.1	1.4	2017	13
0.83	Preterm Births	percent	8.9	9.4	10.4		2017	13
	Mothers who Received Early							
0.81	Prenatal Care	percent	80.9	77.9	73	73.1	2010	13
		pregnancies/ 1,000 females						
0.72	Teen Pregnancy Rate	aged 15-17	13.3	36.2	19.5		2016	13
	MENTAL HEALTH & MENTAL		DARKE				MEASUREMENT	
SCORE	DISORDERS	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
	Age-Adjusted Death Rate due							
2.44	to Alzheimer's Disease	deaths/ 100,000 population	42.5		32.7	30.3	2015-2017	3
	Age-Adjusted Death Rate due							
2.28	to Suicide	deaths/ 100,000 population	16.2	10.2	14.3	13.6	2015-2017	3
2.00		providers/ 100,000	60.0		242.2	222 7	2010	_
2.00	Mental Health Provider Rate	population	69.9		212.3	228.7	2018	5
	Poor Mental Health: Average							
1.67	Number of Days	days	4.1		4.3	3.8	2016	5
1.33	Frequent Mental Distress	percent	12.4		13.5	15	2016	5
	Depression: Medicare							
1.11	Population	percent	17.7		19.7	17.9	2017	4
	Alzheimer's Disease or							
0.78	Dementia: Medicare Population	percent	9.3		10.5	10.9	2017	4
0.78	Population	регсепс	3.3		10.5	10.9	2017	4
			DARKE				MEASUREMENT	
SCORE	MORTALITY DATA	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
	Age-Adjusted Death Rate due							
3.00	to Unintentional Injuries	deaths/ 100,000 population	93.2	36.4	65.9	46.7	2015-2017	3
	Age-Adjusted Death Rate due							
2.83	to Influenza and Pneumonia	deaths/ 100,000 population	23.2		15.5	14.3	2015-2017	3
	Death Rate due to Drug							
2.83	Poisoning	deaths/ 100,000 population	42.5		36.6	19.2	2015-2017	5

				1				
	Age-Adjusted Death Rate due							
2.78	to Colorectal Cancer	deaths/ 100,000 population	20.3	14.5	15.9	14.5	2011-2015	7
	Age-Adjusted Death Rate due							
2.67	to Falls	deaths/ 100,000 population	16.1	7.2	10	9.2	2015-2017	3
	Age-Adjusted Death Rate due							
2.50	to Cancer	deaths/ 100,000 population	183.3	161.4	179.3	163.5	2011-2015	7
	Age-Adjusted Death Rate due							
	to Motor Vehicle Traffic		40.0				2245 2245	
2.50	Collisions	deaths/ 100,000 population	16.6	12.4	10.4	11.4	2015-2017	3
	Age-Adjusted Death Rate due							
2.44	to Alzheimer's Disease	deaths/ 100,000 population	42.5		32.7	30.3	2015-2017	3
	Age-Adjusted Death Rate due							
2.39	to Coronary Heart Disease	deaths/ 100,000 population	126.4	103.4	104.8	94.8	2015-2017	3
						6900.		
2.33	Premature Death	years/ 100,000 population	8799.5		8491.6	6	2015-2017	5
	Age-Adjusted Death Rate due							
2.28	to Suicide	deaths/ 100,000 population	16.2	10.2	14.3	13.6	2015-2017	3
	Age-Adjusted Death Rate due	deaths/ 100,000 population						
2.11	to Heart Attack	35+ years	87.1		67		2015	9
	Alcohol-Impaired Driving							
2.11	Deaths	percent	35.1		33.1	28.6	2013-2017	5
2.08	Infant Mortality Rate	deaths/ 1,000 live births	8.2	6	7.5	6	2012	13
	Age-Adjusted Death Rate due							
1.94	to Unintentional Poisonings	deaths/ 100,000 population	26.5		38.5	19.3	2015-2017	3
	Age-Adjusted Death Rate due							
1.83	to Lung Cancer	deaths/ 100,000 population	50.6	45.5	51.7	43.4	2011-2015	7
2.00		acatile, 100,000 population	30.0	13.3	32.7	1011	2011 2010	•
1.67	Age-Adjusted Death Rate due to Prostate Cancer	deaths/ 100,000 males	20.7	21.8	19.5	19.5	2011-2015	7
		i i		21.0				-
1.67	Life Expectancy	years	77		77	79.1	2015-2017	5
1.58	Mortality Ranking	ranking	52				2019	5
	Age-Adjusted Death Rate due							
1 50	to Cerebrovascular Disease	docths / 100 000 nonulation	20.7	24.0	41.4	27.5	2015 2017	,
1.50	(Stroke)	deaths/ 100,000 population	38.7	34.8	41.4	37.5	2015-2017	3

## APPENDIX B

1.44	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	21.9	20.7	22.9	20.9	2011-2015	7
0.94	Age-Adjusted Death Rate due to Kidney Disease	deaths/ 100,000 population	12.4		14.9	13.2	2015-2017	3
0.72	Age-Adjusted Death Rate due to Diabetes	deaths/ 100,000 population	20		25	21.2	2015-2017	3
0.56	Age-Adjusted Death Rate due to Chronic Lower Respiratory	dogths / 100,000 nonviction	39.6		48.5	41	2015-2017	3
0.56	Diseases	deaths/ 100,000 population	39.6		48.5	41	2015-2017	3
SCORE	OLDER ADULTS & AGING	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
	Heart Failure: Medicare							_
2.83	Population Age-Adjusted Death Rate due	percent	16.5		14.8	13.9	2017	4
2.67	to Falls	deaths/ 100,000 population	16.1	7.2	10	9.2	2015-2017	3
2.61	Atrial Fibrillation: Medicare Population	percent	10.4		8.9	8.4	2017	4
2.50	Hypertension: Medicare Population	percent	62.7		59.8	57.1	2017	4
2.44	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/ 100,000 population	42.5		32.7	30.3	2015-2017	3
2.00	Ischemic Heart Disease: Medicare Population	percent	29.7		27.9	26.9	2017	4
1.83	Chronic Kidney Disease: Medicare Population	percent	24.9		24.9	24	2017	4
1.56	Hyperlipidemia: Medicare Population	percent	42.9		42.5	40.7	2017	4
1.44	COPD: Medicare Population	percent	12.7		13.6	11.7	2017	4
1.33	People 65+ Living Alone	percent	27.5		28.8	26.2	2013-2017	1
1.28	Diabetes: Medicare Population	percent	27.2		27.7	27.2	2017	4

	Rheumatoid Arthritis or							
4.47	Osteoarthritis: Medicare		24.5		25.7	22.4	2017	4
1.17	Population	percent	31.5		35.7	33.1	2017	4
1.11	Depression: Medicare Population	percent	17.7		19.7	17.9	2017	4
1.00	Cancer: Medicare Population	percent	7		8.3	8.2	2017	4
1.00	People 65+ with Low Access to a Grocery Store	percent	1.2				2015	20
0.89	Mammography Screening: Medicare Population	percent	65.2		62.4	63.2	2015	17
0.83	Diabetic Monitoring: Medicare Population	percent	89.6		85.4	85.7	2015	17
0.78	Alzheimer's Disease or Dementia: Medicare Population	percent	9.3		10.5	10.9	2017	4
0.78	Asthma: Medicare Population	percent	4.3		5.2	5.1	2017	4
0.78	Stroke: Medicare Population	percent	3.3		3.8	3.8	2017	4
	Osteoporosis: Medicare	•						
0.72	Population	percent	5		6	6.4	2017	4
	People 65+ Living Below							
0.39	Poverty Level	percent	5.2		8	9.3	2013-2017	1
SCORE	OTHER CHRONIC DISEASES	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
1.83	Chronic Kidney Disease: Medicare Population	percent	24.9		24.9	24	2017	4
1.17	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	31.5		35.7	33.1	2017	4
0.94	Age-Adjusted Death Rate due to Kidney Disease	deaths/ 100,000 population	12.4		14.9	13.2	2015-2017	3
0.72	Osteoporosis: Medicare Population	percent	5		6	6.4	2017	4

SCORE	PREVENTION & SAFETY	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
3.00	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/ 100,000 population	93.2	36.4	65.9	46.7	2015-2017	3
2.83	Death Rate due to Drug Poisoning	deaths/ 100,000 population	42.5		36.6	19.2	2015-2017	5
2.67	Age-Adjusted Death Rate due to Falls	deaths/ 100,000 population	16.1	7.2	10	9.2	2015-2017	3
1.94	Age-Adjusted Death Rate due to Unintentional Poisonings	deaths/ 100,000 population	26.5		38.5	19.3	2015-2017	3
1.11	Severe Housing Problems	percent	12.5		14.5	18.4	2011-2015	5
SCORE	PUBLIC SAFETY	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.50	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions	deaths/ 100,000 population	16.6	12.4	10.4	11.4	2015-2017	3
2.11	Alcohol-Impaired Driving Deaths	percent	35.1		33.1	28.6	2013-2017	5
1.50	Child Abuse Rate (HP2020)	cases/ 1,000 children	5.9		7.3		2017	2
0.81	Violent Crime Rate	crimes/ 100,000 population	89.7		291.4	373.7	2015	14
SCORE	RESPIRATORY DISEASES	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.83	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/ 100,000 population	23.2		15.5	14.3	2015-2017	3
1.83	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	50.6	45.5	51.7	43.4	2011-2015	7
1.44	COPD: Medicare Population	percent	12.7		13.6	11.7	2017	4
0.89	Lung and Bronchus Cancer Incidence Rate	cases/ 100,000 population	62.2		69.3	60.2	2011-2015	7

0.78	Asthma: Medicare Population	percent	4.3		5.2	5.1	2017	4
0.58	Tuberculosis Incidence Rate	cases/ 100,000 population	0	1	1.3	2.8	2017	12
0.56	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/ 100,000 population	39.6		48.5	41	2015-2017	3
SCORE	SOCIAL ENVIRONMENT	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.44	Total Employment Change	percent	-1.1		1.5	2.1	2015-2016	19
2.00	People 25+ with a Bachelor's Degree or Higher	percent	14.2		27.2	30.9	2013-2017	1
1.97	Median Housing Unit Value	dollars	113200		135100	1935	2013-2017	1
1.83	Per Capita Income	dollars	24768		29011	3117 7	2013-2017	1
1.75	Households with an Internet Subscription	percent	73.3		77.8	78.7	2013-2017	1
1.75	Households with One or More Types of Computing Devices	percent	82.5		85.8	87.2	2013-2017	1
1.50	Child Abuse Rate (HP2020)	cases/ 1,000 children	5.9		7.3		2017	2
1.36	Persons with Health Insurance	percent	92.6	100	92.9		2017	16
1.33	Median Household Income	dollars	50064		52407	5765 2	2013-2017	1
1.33	People 65+ Living Alone	percent	27.5		28.8	26.2	2013-2017	1
1.28	Mean Travel Time to Work	minutes	23.2		23.4	26.4	2013-2017	1
1.25	Median Household Gross Rent	dollars	645		764	982	2013-2017	1
1.25	Social and Economic Factors Ranking	ranking	17				2019	5
1.22	Female Population 16+ in Civilian Labor Force	percent	58.2		58.9	58.2	2013-2017	1
1.17	Single-Parent Households	percent	29		35.7	33.3	2013-2017	1
1.17	Voter Turnout: Presidential Election	percent	75.8		71.3		2016	15

1.06	Population 16+ in Civilian Labor Force	percent	63.6		63.1	63	2013-2017	1
1.03	Median Monthly Owner Costs for Households without a Mortgage	dollars	392		458	474	2013-2017	1
1.00	People 25+ with a High School Degree or Higher	percent	89.5		89.8	87.3	2013-2017	1
0.81	Mortgaged Owners Median Monthly Household Costs	dollars	1056		1247	1515	2013-2017	1
0.78	Homeownership	percent	66.1		59.1	56	2013-2017	1
0.61	Linguistic Isolation	percent	0.1		1.4	4.5	2013-2017	1
0.50	Children Living Below Poverty Level	percent	17.5		21.3	20.3	2013-2017	1
0.50	People Living Below Poverty Level	percent	11.6		14.9	14.6	2013-2017	1
0.39	Social Associations	membership associations/ 10,000 population	17.4		11.2	9.3	2016	5
0.33	Young Children Living Below Poverty Level	percent	17.3		25.1	22.5	2013-2017	1
SCORE	SUBSTANCE ABUSE	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.83	Death Rate due to Drug Poisoning	deaths/100,000 population	42.5		36.6	19.2	2015-2017	5
2.11	Alcohol-Impaired Driving Deaths	percent	35.1		33.1	28.6	2013-2017	5
1.94	Liquor Store Density	stores/ 100,000 population	9.7		6.7	10.5	2016	19
1.81	Mothers who Smoked During Pregnancy	percent	19.2	1.4	17.8	9.2	2010	13
1.67	Adults who Smoke	percent	19.8	12	22.5	17	2016	5
1.58	Health Behaviors Ranking	ranking	47				2019	5
1.17	Adults who Drink Excessively	percent	17.8	25.4	19.1	18	2016	5

SCORE	TRANSPORTATION	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.50	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions	deaths/ 100,000 population	16.6	12.4	10.4	11.4	2015-2017	3
2.28	Workers who Drive Alone to Work	percent	84.8		83.4	76.4	2013-2017	1
2.11	Workers Commuting by Public Transportation	percent	0.6	5.5	1.6	5.1	2013-2017	1
1.72	Workers who Walk to Work	percent	2.2	3.1	2.2	2.7	2013-2017	1
1.61	Solo Drivers with a Long Commute	percent	31.7		30.3	35.2	2013-2017	5
1.33	Households with No Car and Low Access to a Grocery Store	percent	2.3				2015	20
1.28	Mean Travel Time to Work	minutes	23.2		23.4	26.4	2013-2017	1
0.72	Households without a Vehicle	percent	5.5		8.3	8.8	2013-2017	1
SCORE	WELLNESS & LIFESTYLE	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
1.67	Life Expectancy	years	77		77	79.1	2015-2017	5
1.33	Poor Physical Health: Average Number of Days	days	3.7		4	3.7	2016	5
1.25	Morbidity Ranking	ranking	15				2019	5
1.17	Insufficient Sleep	percent	35.4		38	38	2016	5
1.17	Self-Reported General Health Assessment: Poor or Fair	percent	15.8		17	16	2016	5
1.00	Frequent Physical Distress	percent	11.4		12.5	15	2016	5
SCORE	WOMEN'S HEALTH	UNITS	DARKE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
1.44	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	21.9	20.7	22.9	20.9	2011-2015	7

1.28	Breast Cancer Incidence Rate	cases/ 100,000 females	114.5	126.2	124.7	2011-2015	7
	Mammography Screening:						
0.89	Medicare Population	percent	65.2	62.4	63.2	2015	17

SCORE	ACCESS TO HEALTH SERVICES	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.28	Non-Physician Primary Care Provider Rate	providers/ 100,000 population	51.7		80.3	88.2	2018	5
2.06	Dentist Rate	dentists/ 100,000 population	38.8		55.2	68.4	2017	5
2.06	Mental Health Provider Rate	providers/ 100,000 population	68.9		149.5	228. 7	2018	5
1.72	Primary Care Provider Rate	providers/ 100,000 population	51.4		66.9	75.4	2016	5
1.58	Clinical Care Ranking	ranking	57				2019	5
1.50	Preventable Hospital Stays: Medicare Population	discharges/ 1,000 Medicare enrollees	57		56.8	49.4	2015	15
1.42	Adults with Health Insurance: 18-64	percent	88.9	100	89		2017	14
1.14	Children with Health Insurance	percent	94.4	100	93.7		2017	14
1.14	Persons with Health Insurance	percent	90.4	100	90.4		2017	14
SCORE	CANCER	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.33	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	25.5	20.7	21.4	20.9	2011-2015	10
2.33	Age-Adjusted Death Rate due to Cancer	deaths/ 100,000 population	204.6	161.4	181	163. 5	2011-2015	10
2.33		deaths/ 100,000 population deaths/ 100,000 population	204.6	161.4 45.5	181 53.4		2011-2015 2011-2015	10 10
	Cancer Age-Adjusted Death Rate due to					5		
2.33	Cancer Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to	deaths/ 100,000 population	64.8	45.5	53.4	5 43.4	2011-2015	10
2.33	Cancer Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Prostate Cancer Lung and Bronchus Cancer	deaths/ 100,000 population  deaths/ 100,000 males	64.8	45.5	53.4	5 43.4 19.5	2011-2015 2011-2015	10
2.33 2.11 1.89	Cancer Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Prostate Cancer Lung and Bronchus Cancer Incidence Rate Mammography Screening:	deaths/ 100,000 population  deaths/ 100,000 males  cases/ 100,000 population	64.8 22.9 77.4	45.5	53.4 20.4 72.8	5 43.4 19.5 60.2	2011-2015 2011-2015 2011-2015	10 10 10

	ALL FINDIN D							1
0.72	All Cancer Incidence Rate	cases/ 100,000 population	404		447	441. 2	2011-2015	10
			-					
0.50	Oral Cavity and Pharynx Cancer Incidence Rate	cases/ 100,000 population	10.1		12	11.6	2011-2015	10
0.50	modernee Nate	cusesy 100,000 population	10.1		12	124.	2011 2013	10
0.39	Breast Cancer Incidence Rate	cases/ 100,000 females	73.5		121.7	7	2011-2015	10
0.39	Cancer: Medicare Population	percent	6.2		7.8	8.2	2017	4
0.17	Prostate Cancer Incidence Rate	cases/ 100,000 males	75		92.7	109	2011-2015	10
SCORE	CHILDREN'S HEALTH	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.11	Child Abuse Rate	cases/ 1,000 children	26.7		17.1		2015	2
2.00	Child Food Insecurity Rate	percent	21.6		17.7	17.9	2016	6
4.63	Children with Low Access to a						2015	40
1.67	Grocery Store	percent	5.1				2015	18
1.14	Children with Health Insurance	percent	94.4	100	93.7		2017	14
0.50	Food Insecure Children Likely Ineligible for Assistance	percent	15		29	20	2016	6
SCORE	COUNTY HEALTH RANKINGS	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
1.75	Health Behaviors Ranking	ranking	88			<u> </u>	2019	5
1.75	Morbidity Ranking	ranking	83				2019	5
1.75	Mortality Ranking	ranking	92				2019	5
1.75	Social and Economic Factors	ranking	J2				2013	J
1.75	Ranking	ranking	89				2019	5
1.58	Clinical Care Ranking	ranking	57				2019	5
1.58	Physical Environment Ranking	ranking	62				2019	5
SCORE	<b>DIABETES</b> Age-Adjusted Death Rate due to	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.39	Diabetes	deaths/ 100,000 population	39.6		26.5	21.2	2015-2017	3
2.28	Adults 20+ with Diabetes	percent	13.1		11.5	10.2	2015	5

1.94	Diabetes: Medicare Population	percent	28.3		28.1	27.2	2017	4
	Diabetic Monitoring: Medicare							
1.89	Population	percent	83.9		86.1	85.7	2015	15
			FAYETTE				MEASUREMENT	
SCORE	ECONOMY	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Female Population 16+ in Civilian							
2.61	Labor Force	percent	49.1		58.9	58.2	2013-2017	1
	Households with Cash Public							
2.61	Assistance Income	percent	3.1		1.8	2.6	2013-2017	1
	Families Living Below Poverty							
2.50	Level	percent	15.2		10.3	10.5	2013-2017	1
	People 65+ Living Below Poverty					0.0	2012 2017	
2.44	Level	percent	11		7.5	9.3	2013-2017	1
2.44	Unemployed Workers in Civilian Labor Force	percent	5.2		4.1	4.1	February 2019	16
		·					,	
2.39	Homeowner Vacancy Rate	percent	4.2		1.8	1.7 1935	2013-2017	1
2.25	Median Housing Unit Value	dollars	81400		130200	00	2013-2017	1
2.23		donars	01400		130200	- 00	2013 2017	_
2.25	Persons with Disability Living in	norcont	36.9		27	27.1	2012 2017	1
2.25	Poverty (5-year) Children Living Below Poverty	percent	30.9		21	27.1	2013-2017	1
2.22	Level	percent	24.1		20.4	20.3	2013-2017	1
	People Living Below Poverty	percent	27.1		20.4	20.5	2013 2017	_
2.22	Level	percent	18.2		14.6	14.6	2013-2017	1
	Population 16+ in Civilian Labor	•						
2.22	Force	percent	55.5		63.8	63	2013-2017	1
	Renters Spending 30% or More of							
2.22	Household Income on Rent	percent	54.8		47.9	50.6	2013-2017	1
	Students Eligible for the Free							
2.22	Lunch Program	percent	52.1		39.6	40.4	2016-2017	11
	Young Children Living Below							
2.22	Poverty Level	percent	30.1		23.7	22.5	2013-2017	1
2.00	Child Food Insecurity Rate	percent	21.6		17.7	17.9	2016	6
2.00	Food Insecurity Rate	percent	15.6		13.7	12.9	2016	6
						5765		
2.00	Median Household Income	dollars	41476		52182	2	2013-2017	1

	People Living 200% Above							
2.00	Poverty Level	percent	58.1		66.5	67.2	2013-2017	1
2.00	Per Capita Income	dollars	22428		27305	3117 7	2013-2017	1
1.83	Low-Income and Low Access to a Grocery Store	percent	8.3				2015	18
1.78	SNAP Certified Stores	stores/ 1,000 population	0.8				2016	18
1.75	Social and Economic Factors Ranking	ranking	89				2019	5
1.67	Homeownership	percent	59.7		61.2	56	2013-2017	1
1.50	Income Inequality		0.4		0.5	0.5	2013-2017	1
1.50	Severe Housing Problems	percent	15.9		13.7	18.4	2011-2015	5
1.25	Median Household Gross Rent	dollars	680		782	982	2013-2017	1
1.14	Median Monthly Owner Costs for Households without a Mortgage	dollars	368		389	474	2013-2017	1
0.64	Mortgaged Owners Median Monthly Household Costs	dollars	902		1109	1515	2013-2017	1
0.50	Food Insecure Children Likely Ineligible for Assistance	percent	15		29	20	2016	6
0.39	Total Employment Change	percent	5.8		2.2	2.1	2015-2016	17
SCORE	EDUCATION	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.39	People 25+ with a Bachelor's Degree or Higher	percent	11.1		25.3	30.9	2013-2017	1
1.83	People 25+ with a High School Degree or Higher	percent	82		88.3	87.3	2013-2017	1
1.72	Student-to-Teacher Ratio	students/ teacher	17.1		17.4	16.5	2016-2017	11
1.44	8th Grade Students Proficient in English/Language Arts	percent	62.4		60.7		2017	2
1.44	8th Grade Students Proficient in Math	percent	59.4		54.4		2017	2
1.36	High School Graduation	percent	91.8	87	88.7	84.6	2017	2
1.50	o seriosi sidadation	percent	71.0		55.7	O 1.0	2017	

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	4th Grade Students Proficient in							
1.11	English/Language Arts	percent	72.7		64.9		2017	2
1.00	4th Grade Students Proficient in	nouse at	70.1		C1 3		2017	2
1.00	Math	percent	70.1		61.2		2017	2
			FAYETTE				MEASUREMENT	
SCORE	ENVIRONMENT	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.00	Fast Food Restaurant Density	restaurants/ 1,000 population	1				2014	18
2.00	Houses Built Prior to 1950	percent	32.1		23.4	18	2013-2017	1
1.94	Grocery Store Density	stores/ 1,000 population	0.1				2014	18
	Households with No Car and Low							
1.83	Access to a Grocery Store	percent	3.2				2015	18
	Low-Income and Low Access to a							
1.83	Grocery Store	percent	8.3				2015	18
	People 65+ with Low Access to a							
1.83	Grocery Store	percent	4				2015	18
1.78	SNAP Certified Stores	stores/ 1,000 population	0.8				2016	18
1.67	Access to Exercise Opportunities	percent	71.3		75.3	83.9	2019	5
	Children with Low Access to a	·						
1.67	Grocery Store	percent	5.1				2015	18
	People with Low Access to a							
1.67	Grocery Store	percent	21.4				2015	18
1 61	Months of Mild Drought or Worse	months nor year					2016	13
1.61		months per year	5					
1.61	Number of Extreme Heat Events	events	7				2016	13
1.61	PBT Released	pounds	10714.1				2017	19
1.61	Recognized Carcinogens Released into Air	pounds	452				2017	19
1.58	Physical Environment Ranking	ranking	62				2019	5
	,	runking	7.2		7.1	7.7		
1.50	Food Environment Index Severe Housing Problems	narcant	15.9		13.7	18.4	2019 2011-2015	5 5
1.50	_	percent			13./	16.4		
1.39	Number of Extreme Heat Days	days	25		2427		2016	13
1.33	Daily Dose of UV Irradiance	Joule per square meter	2427		2427		2015	13
1.33	Farmers Market Density	markets/ 1,000 population	0				2016	18

1.33	Recreation and Fitness Facilities	facilities/ 1,000 population	0.1				2014	18
	Number of Extreme Precipitation							
1.17	Days	days	133				2016	13
0.78	Liquor Store Density	stores/ 100,000 population	8.6		12.5	10.5	2016	17
	EXERCISE, NUTRITION, &		FAYETTE				MEASUREMENT	
SCORE	WEIGHT	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
3.00	Adults 20+ who are Obese	percent	38.1	30.5	32.8	28.5	2015	5
2.61	Workers who Walk to Work	percent	1.3	3.1	2.1	2.7	2013-2017	1
2.11	Adults 20+ who are Sedentary	percent	29.9	32.6	25.1	22.2	2015	5
2.00	Child Food Insecurity Rate	percent	21.6		17.7	17.9	2016	6
2.00	Fast Food Restaurant Density	restaurants/ 1,000 population	1				2014	18
2.00	Food Insecurity Rate	percent	15.6		13.7	12.9	2016	6
1.94	Grocery Store Density	stores/ 1,000 population	0.1				2014	18
1.83	Households with No Car and Low Access to a Grocery Store	percent	3.2				2015	18
1.83	Low-Income and Low Access to a Grocery Store	percent	8.3				2015	18
1.83	People 65+ with Low Access to a Grocery Store	percent	4				2015	18
1.78	SNAP Certified Stores	stores/ 1,000 population	0.8				2016	18
1.75	Health Behaviors Ranking	ranking	88				2019	5
1.67	Access to Exercise Opportunities	percent	71.3		75.3	83.9	2019	5
1.67	Children with Low Access to a Grocery Store	percent	5.1				2015	18
1.67	People with Low Access to a Grocery Store	percent	21.4				2015	18
1.50	Food Environment Index		7.2		7.1	7.7	2019	5
1.33	Farmers Market Density	markets/ 1,000 population	0				2016	18
1.33	Recreation and Fitness Facilities	facilities/ 1,000 population	0.1				2014	18
0.50	Food Insecure Children Likely Ineligible for Assistance	percent	15		29	20	2016	6

SCORE	HEART DISEASE & STROKE	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
SCORE	Heart Failure: Medicare	OMIS	COOM	111 2020	maiana	0.5.	1 LINIOD	Jource
2.83	Population	percent	19.9		15	13.9	2017	4
2.67	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/ 100,000 population	155.1	103.4	101.9	94.8	2015-2017	3
2.61	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke) Ischemic Heart Disease: Medicare	deaths/ 100,000 population	46.6	34.8	39.6	37.5	2015-2017	3
2.61	Population	percent	33.7		28.3	26.9	2017	4
2.44	Hypertension: Medicare Population	percent	63.2		59.4	57.1	2017	4
1.89	Age-Adjusted Death Rate due to Heart Attack	deaths/ 100,000 population 35+ years	127.5		75.6		2015	13
1.00	Atrial Fibrillation: Medicare Population	percent	7.7		8.4	8.4	2017	4
1.00	Hyperlipidemia: Medicare Population	percent	40.5		41.3	40.7	2017	4
0.72	Stroke: Medicare Population	percent	3.1		3.7	3.8	2017	4
SCORE	IMMUNIZATIONS & INFECTIOUS DISEASES	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.11	Hepatitis C Prevalence	Rate per 100,000 population	452.4		126.1		2017	8
0.94	Chlamydia Incidence Rate	cases/ 100,000 population	264.6		466	497. 3	2016	12
0.83	Salmonella Infection Incidence Rate	cases/ 100,000 population	0	11.4	11.1		2017	8
0.67	Gonorrhea Incidence Rate	cases/ 100,000 population	21.3		142.8	145. 8	2016	12
SCORE	MATERNAL, FETAL & INFANT HEALTH	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.19	Mothers who Received Early Prenatal Care	percent	68	77.9	68.6	77.3	2017	8
2.14	Mothers who Smoked During Pregnancy	percent	21.2	1.4	13.5	6.9	2017	8

	7.1.7.2.7.2	live births/ 1,000 females aged						
1.89	Teen Birth Rate: 15-19	15-19	44.6		22.8		2017	8
1.81	Preterm Births (OE)	percent	10.4	9.4	9.9	9.9	2017	8
1.47	Babies with Low Birth Weight	percent	7.9	7.8	8.3	8.3	2017	8
SCORE	MENTAL HEALTH & MENTAL DISORDERS	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.50	Alzheimer's Disease or Dementia: Medicare Population	percent	11.8		11.1	10.9	2017	4
2.44	Depression: Medicare Population	percent	21.9		20.3	17.9	2017	4
2.42	Age-Adjusted Death Rate due to Suicide	deaths/ 100,000 population	29.3	10.2	14	12.5	2011-2013	3
2.33	Poor Mental Health: Average Number of Days	days	4.5		4.3	3.8	2016	5
2.28	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/ 100,000 population	42.5		34.4	30.3	2015-2017	3
2.06	Mental Health Provider Rate	providers/ 100,000 population	68.9		149.5	228. 7	2018	5
1.67	Frequent Mental Distress	percent	13.5		13.3	15	2016	5
SCORE	MORTALITY DATA	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
3.00	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/ 100,000 population	117.1	36.4	52.7	46.7	2015-2017	3
2.83	Death Rate due to Drug Poisoning	deaths/ 100,000 population	70		23.2	19.2	2015-2017	5
2.83	Premature Death	years/ 100,000 population	14605.5		8237.6	6900 .6	2015-2017	5
2.67	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/ 100,000 population	155.1	103.4	101.9	94.8	2015-2017	3
2.61	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/ 100,000 population	46.6	34.8	39.6	37.5	2015-2017	3
2.61	Age-Adjusted Death Rate due to Kidney Disease	deaths/ 100,000 population	26.1		18.6	13.2	2015-2017	3

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2.42	Age-Adjusted Death Rate due to Suicide	deaths/ 100,000 population	29.3	10.2	14	12.5	2011-2013	3
2.72	Age-Adjusted Death Rate due to	acatris, 100,000 population	25.5	10.2		12.5	2011 2013	J
2.39	Diabetes	deaths/ 100,000 population	39.6		26.5	21.2	2015-2017	3
2.36	Age-Adjusted Death Rate due to Unintentional Poisonings	deaths/ 100,000 population	49.4		24.3	19.3	2015-2017	3
2.33	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	25.5	20.7	21.4	20.9	2011-2015	10
2.33	Age-Adjusted Death Rate due to Cancer	deaths/ 100,000 population	204.6	161.4	181	163. 5	2011-2015	10
2.33	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	64.8	45.5	53.4	43.4	2011-2015	10
2.28	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/ 100,000 population	42.5		34.4	30.3	2015-2017	3
2.17	Life Expectancy	years	72		77.1	79.1	2015-2017	5
2.11	Age-Adjusted Death Rate due to Prostate Cancer	deaths/ 100,000 males	22.9	21.8	20.4	19.5	2011-2015	10
1.89	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/ 100,000 population	59.7		55	41	2015-2017	3
1.03	Age-Adjusted Death Rate due to	deaths/ 100,000 population 35+	33.7		33	71	2013 2017	3
1.89	Heart Attack	years	127.5		75.6		2015	13
1.75	Mortality Ranking	ranking	92				2019	5
1.06	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/ 100,000 population	15.2	14.5	15.9	14.5	2011-2015	10
0.50	Alcohol-Impaired Driving Deaths	percent	13.3		20.8	28.6	2013-2017	5
	·							
00000			FAYETTE	LIBOSS			MEASUREMENT	
SCORE	OLDER ADULTS & AGING	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.83	Chronic Kidney Disease: Medicare Population	percent	28.7		25.1	24	2017	4
	Heart Failure: Medicare							
2.83	Population	percent	19.9		15	13.9	2017	4
2.61	Ischemic Heart Disease: Medicare Population	percent	33.7		28.3	26.9	2017	4

2.51	Osteoporosis: Medicare				6.3	6.4	2047	
2.61	Population	percent	7.7		6.2	6.4	2017	4
	Alzheimer's Disease or Dementia:							
2.50	Medicare Population	percent	11.8		11.1	10.9	2017	4
2.44	COPD: Medicare Population	percent	16.2		14.4	11.7	2017	4
2.44	Depression: Medicare Population	percent	21.9		20.3	17.9	2017	4
2.44	Hypertension: Medicare Population	percent	63.2		59.4	57.1	2017	4
2.44	People 65+ Living Below Poverty Level	percent	11		7.5	9.3	2013-2017	1
2.28	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/ 100,000 population	42.5		34.4	30.3	2015-2017	3
1.94	Diabetes: Medicare Population	percent	28.3		28.1	27.2	2017	4
1.89	Diabetic Monitoring: Medicare Population	percent	83.9		86.1	85.7	2015	15
1.83	People 65+ with Low Access to a Grocery Store	percent	4				2015	18
1.78	Mammography Screening: Medicare Population	percent	61.4		62.3	63.2	2015	15
1.06	People 65+ Living Alone	percent	26		27.7	26.2	2013-2017	1
1.00	Atrial Fibrillation: Medicare Population	percent	7.7		8.4	8.4	2017	4
1.00	Hyperlipidemia: Medicare Population	percent	40.5		41.3	40.7	2017	4
0.89	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	31.5		34.5	33.1	2017	4
0.83	Asthma: Medicare Population	percent	4.1		5.2	5.1	2017	4
0.72	Stroke: Medicare Population	•	3.1		3.7	3.8	2017	4
	·	percent						
0.39	Cancer: Medicare Population	percent	6.2		7.8	8.2	2017	4
SCORE	OTHER CHRONIC DISEASES	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Chronic Kidney Disease:							
2.83	Medicare Population	percent	28.7		25.1	24	2017	4

	Age-Adjusted Death Rate due to							
2.61	Kidney Disease	deaths/ 100,000 population	26.1		18.6	13.2	2015-2017	3
	Osteoporosis: Medicare							
2.61	Population	percent	7.7		6.2	6.4	2017	4
	Rheumatoid Arthritis or							
	Osteoarthritis: Medicare							
0.89	Population	percent	31.5		34.5	33.1	2017	4
			FAYETTE				MEASUREMENT	
SCORE	PREVENTION & SAFETY	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
SCORE	PREVENTION & SAFETY	UNITS	COUNTY	HPZUZU	mulana	0.3.	PERIOD	Source
	Age-Adjusted Death Rate due to							
3.00	Unintentional Injuries	deaths/ 100,000 population	117.1	36.4	52.7	46.7	2015-2017	3
	Death Rate due to Drug							
2.83	Poisoning	deaths/ 100,000 population	70		23.2	19.2	2015-2017	5
	Age-Adjusted Death Rate due to							
2.36	Unintentional Poisonings	deaths/ 100,000 population	49.4		24.3	19.3	2015-2017	3
1.50	Severe Housing Problems	percent	15.9		13.7	18.4	2011-2015	5
1.50	Severe riousing rioblems	percent	13.5		15.7	10.4	2011-2013	3
			E A METTE					
			FAYETTE				MEASUREMENT	
SCORE	RESPIRATORY DISEASES	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD PERIOD	Source
SCORE 2.44	RESPIRATORY DISEASES COPD: Medicare Population	UNITS percent		HP2020	Indiana 14.4	<b>U.S.</b> 11.7		Source 4
	COPD: Medicare Population		COUNTY	HP2020			PERIOD	
	COPD: Medicare Population Age-Adjusted Death Rate due to		COUNTY	<b>HP2020</b> 45.5			PERIOD	
2.44	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer	percent	16.2		14.4	11.7	<b>PERIOD</b> 2017	4
2.44	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to	percent	16.2		14.4	11.7	<b>PERIOD</b> 2017	4
2.44	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer	percent	16.2		14.4	11.7	<b>PERIOD</b> 2017	4
2.44	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	percent deaths/ 100,000 population	16.2 64.8		14.4 53.4	11.7 43.4	PERIOD 2017 2011-2015	10
2.44	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Chronic Lower Respiratory	percent deaths/ 100,000 population	16.2 64.8		14.4 53.4	11.7 43.4	PERIOD 2017 2011-2015	10
2.44 2.33	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases Lung and Bronchus Cancer Incidence Rate	percent  deaths/ 100,000 population  deaths/ 100,000 population  cases/ 100,000 population	16.2 64.8 59.7		14.4 53.4 55 72.8	11.7 43.4 41 60.2	PERIOD  2017  2011-2015  2015-2017	10
2.44 2.33 1.89	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases Lung and Bronchus Cancer	percent  deaths/ 100,000 population  deaths/ 100,000 population	16.2 64.8 59.7		14.4 53.4 55	11.7 43.4 41	PERIOD  2017  2011-2015  2015-2017  2011-2015	4 10 3 10
2.44 2.33 1.89	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases Lung and Bronchus Cancer Incidence Rate	percent  deaths/ 100,000 population  deaths/ 100,000 population  cases/ 100,000 population	64.8 59.7 77.4 4.1		14.4 53.4 55 72.8	11.7 43.4 41 60.2	PERIOD 2017 2011-2015 2015-2017 2011-2015 2017	4 10 3 10
2.44 2.33 1.89 1.89 0.83	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases Lung and Bronchus Cancer Incidence Rate Asthma: Medicare Population	percent  deaths/ 100,000 population  deaths/ 100,000 population  cases/ 100,000 population  percent	16.2 64.8 59.7 77.4 4.1	45.5	14.4 53.4 55 72.8 5.2	11.7 43.4 41 60.2 5.1	PERIOD  2017  2011-2015  2015-2017  2011-2015  2017  MEASUREMENT	4 10 3 10 4
2.44 2.33 1.89	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases Lung and Bronchus Cancer Incidence Rate Asthma: Medicare Population	percent  deaths/ 100,000 population  deaths/ 100,000 population  cases/ 100,000 population	64.8 59.7 77.4 4.1		14.4 53.4 55 72.8	11.7 43.4 41 60.2	PERIOD 2017 2011-2015 2015-2017 2011-2015 2017	4 10 3 10
2.44 2.33 1.89 1.89 0.83	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases Lung and Bronchus Cancer Incidence Rate Asthma: Medicare Population  SOCIAL ENVIRONMENT Female Population 16+ in Civilian	percent  deaths/ 100,000 population  deaths/ 100,000 population  cases/ 100,000 population  percent  UNITS	64.8 59.7 77.4 4.1 FAYETTE COUNTY	45.5	14.4 53.4 55 72.8 5.2	11.7 43.4 41 60.2 5.1	PERIOD  2017  2011-2015  2015-2017  2011-2015  2017  MEASUREMENT PERIOD	4 10 3 10 4
2.44 2.33 1.89 1.89 0.83	COPD: Medicare Population Age-Adjusted Death Rate due to Lung Cancer Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases Lung and Bronchus Cancer Incidence Rate Asthma: Medicare Population	percent  deaths/ 100,000 population  deaths/ 100,000 population  cases/ 100,000 population  percent	16.2 64.8 59.7 77.4 4.1	45.5	14.4 53.4 55 72.8 5.2	11.7 43.4 41 60.2 5.1	PERIOD  2017  2011-2015  2015-2017  2011-2015  2017  MEASUREMENT	4 10 3 10 4

	APPENDIA D				1			
	People 25+ with a Bachelor's							
2.39	Degree or Higher	percent	11.1		25.3	30.9	2013-2017	1
	Households with an Internet							
2.25	Subscription	percent	62.8		75.9	78.7	2013-2017	1
						1935		
2.25	Median Housing Unit Value	dollars	81400		130200	00	2013-2017	1
	Children Living Below Poverty							
2.22	Level	percent	24.1		20.4	20.3	2013-2017	1
2.22	People Living Below Poverty		40.2		146	11.6	2042 2047	
2.22	Level	percent	18.2		14.6	14.6	2013-2017	1
2.22	Population 16+ in Civilian Labor Force	percent	55.5		63.8	63	2013-2017	1
2.22	Young Children Living Below	регсепс	33.3		05.6	03	2013-2017	<u> </u>
2.22	Poverty Level	percent	30.1		23.7	22.5	2013-2017	1
2.11	Child Abuse Rate	cases/ 1,000 children	26.7		17.1	22.5	2015	2
2.11	Ciliu Abuse Rate	cases/ 1,000 critiaren	20.7		17.1	5765	2015	
2.00	Median Household Income	dollars	41476		52182	2	2013-2017	1
2.00	Wicdian Household meonic	uonars	41470		32102	3117	2013 2017	
2.00	Per Capita Income	dollars	22428		27305	7	2013-2017	1
1.94	Mean Travel Time to Work	minutes	26.1		23.4	26.4	2013-2017	1
2.5		······································	20.1		20	2011	2010 2017	_
4.02	Households with One or More		70.2		05.5	07.2	2042 2047	
1.92	Types of Computing Devices	percent	79.3		85.5	87.2	2013-2017	1
	People 25+ with a High School							
1.83	Degree or Higher	percent	82		88.3	87.3	2013-2017	1
	Social and Economic Factors							
1.75	Ranking	ranking	89				2019	5
1.67	Homeownership	percent	59.7		61.2	56	2013-2017	1
	Voter Turnout: Presidential							
1.67	Election	percent	56		58		2016	7
1.25	Median Household Gross Rent	dollars	680		782	982	2013-2017	1
	Median Monthly Owner Costs for							
1.14	Households without a Mortgage	dollars	368		389	474	2013-2017	1
1.14	Persons with Health Insurance	percent	90.4	100	90.4		2017	14
1.06	People 65+ Living Alone	percent	26		27.7	26.2	2013-2017	1
		p 5. 50110			_,,,			-
0.64	Mortbly Household Costs	dollara	003		1100	1515	2012 2017	4
0.64	Monthly Household Costs	dollars	902		1109	1515	2013-2017	1

	ALL FINDIV D		1					
0.61	Linguistic Isolation	percent	0.2		1.7	4.5	2013-2017	1
		membership associations/						
0.39	Social Associations	10,000 population	17.6		12.3	9.3	2016	5
0.39	Total Employment Change	percent	5.8		2.2	2.1	2015-2016	17
			FAYETTE				MEASUREMENT	
SCORE	SUBSTANCE ABUSE	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Death Rate due to Drug							
2.83	Poisoning	deaths/ 100,000 population	70		23.2	19.2	2015-2017	5
2.50	Adults who Smoke	percent	23	12	21.1	17	2016	5
	Mothers who Smoked During							
2.14	Pregnancy	percent	21.2	1.4	13.5	6.9	2017	8
	Non-Fatal Emergency							
2.11	Department Visits due to Opioid	B. L	207.0		422.5		2017	
2.11	Overdoses	Rate per 100,000 population	387.8		122.5		2017	8
1.75	Health Behaviors Ranking	ranking	88				2019	5
4.50	Substance Abuse Treatment	D. L	272.4		407.4		2045	
1.50	Rate: Alcohol	Rate per 100,000 population	273.1		197.1		2015	8
0.78	Liquor Store Density	stores/ 100,000 population	8.6		12.5	10.5	2016	17
0.50	Adults who Drink Excessively	percent	15.2	25.4	18.6	18	2016	5
0.50	Alcohol-Impaired Driving Deaths	percent	13.3		20.8	28.6	2013-2017	5
			FAYETTE				MEASUREMENT	
SCORE	TRANSPORTATION	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.61	Workers who Walk to Work	percent	1.3	3.1	2.1	2.7	2013-2017	1
	Solo Drivers with a Long							
2.33	Commute	percent	37.2		30.7	35.2	2013-2017	5
	Workers who Drive Alone to							
2.28	Work	percent	84.8		83	76.4	2013-2017	1
2.06	Households without a Vehicle	percent	8.7		6.7	8.8	2013-2017	1
1.94	Mean Travel Time to Work	minutes	26.1		23.4	26.4	2013-2017	1
	Workers Commuting by Public							
1.89	Transportation	percent	0.4	5.5	1	5.1	2013-2017	1
	Households with No Car and Low							
1.83	Access to a Grocery Store	percent	3.2				2015	18

			FAYETTE				MEASUREMENT	
SCORE	WELLNESS & LIFESTYLE	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.50	Poor Physical Health: Average Number of Days	days	4.4		3.9	3.7	2016	5
2.33	Self-Reported General Health Assessment: Poor or Fair	percent	20.2		17.7	16	2016	5
2.17	Life Expectancy	years	72		77.1	79.1	2015-2017	5
1.83	Frequent Physical Distress	percent	13.4		11.9	15	2016	5
1.75	Morbidity Ranking	ranking	83				2019	5
1.50	Insufficient Sleep	percent	34.5		36	38	2016	5
SCORE	WOMEN'S HEALTH	UNITS	FAYETTE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.33	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	25.5	20.7	21.4	20.9	2011-2015	10
1.78	Mammography Screening: Medicare Population	percent	61.4		62.3	63.2	2015	15
0.39	Breast Cancer Incidence Rate	cases/ 100,000 females	73.5		121.7	124. 7	2011-2015	10

# FRANKLIN COUNTY, INDIANA

SCORE	ACCESS TO HEALTH SERVICES	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Non-Physician Primary Care							
2.39	Provider Rate	providers/ 100,000 population	31		80.3	88.2	2018	5
2.17	Mental Health Provider Rate	providers/ 100,000 population	31		149.5	228.7	2018	5
1.47	Children with Health Insurance	percent	93.5	100	93.7		2017	14
1.25	Clinical Care Ranking	ranking	10				2019	5
1.22	Preventable Hospital Stays: Medicare Population Adults with Health	discharges/ 1,000 Medicare enrollees	54		56.8	49.4	2015	15
1.19	Insurance: 18-64	percent	90.1	100	89		2017	14
0.97	Persons with Health Insurance	percent	91.1	100	90.4		2017	14
0.56	Primary Care Provider Rate	providers/ 100,000 population	79.2		66.9	75.4	2016	5
0.50	Dentist Rate	dentists/ 100,000 population	61.9		55.2	68.4	2017	5
SCORE	CANCER	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.67	Age-Adjusted Death Rate due to Prostate Cancer	deaths/ 100,000 males	28.8	21.8	20.4	19.5	2011-2015	10
2.61	Mammography Screening: Medicare Population	percent	52.5		62.3	63.2	2015	15
2.33	Lung and Bronchus Cancer Incidence Rate	cases/ 100,000 population	76.5		72.8	60.2	2011-2015	10
2.28	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	23.4	20.7	21.8	21.2	2010-2014	10
2.17	Oral Cavity and Pharynx Cancer Incidence Rate	cases/ 100,000 population	13.8		12	11.6	2011-2015	10
1.89	Age-Adjusted Death Rate due to Cancer	deaths/ 100,000 population	182.6	161.4	181	163.5	2011-2015	10
1.83	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	54.6	45.5	53.4	43.4	2011-2015	10

	Colorectal Cancer							
1.72	Incidence Rate	cases/ 100,000 population	40.7	39.9	42.9	39.2	2011-2015	10
1.50	All Cancer Incidence Rate	cases/ 100,000 population	440.8		447	441.2	2011-2015	10
1.28	Breast Cancer Incidence Rate	cases/ 100,000 females	114.5		121.7	124.7	2011-2015	10
	Cancer: Medicare							
1.11	Population	percent	7.2		7.8	8.2	2017	4
0.72	Prostate Cancer Incidence Rate	cases/ 100,000 males	85.9		92.7	109	2011-2015	10
0.28	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/ 100,000 population	13.1	14.5	15.9	14.5	2011-2015	10
SCORE	CHILDREN'S HEALTH	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Food Insecure Children	2•						
	Likely Ineligible for							
2.61	Assistance	percent	39		29	20	2016	6
1.61	Child Abuse Rate	cases/ 1,000 children	17.2		17.1		2015	2
1.47	Children with Health Insurance	percent	93.5	100	93.7		2017	14
1.33	Children with Low Access to a Grocery Store	percent	2.6				2015	18
0.33	Child Food Insecurity Rate	percent	16.1		17.7	17.9	2016	6
SCORE	COUNTY HEALTH RANKINGS	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Physical Environment							
1.58	Ranking	ranking	48				2019	5
1.42	Health Behaviors Ranking	ranking	37				2019	5
1.42	Morbidity Ranking	ranking	33				2019	5
1.42	Social and Economic Factors Ranking	ranking	25				2019	5
1.25	Clinical Care Ranking	ranking	10				2019	5
1.25	Mortality Ranking	ranking	12				2019	5
	_	-						

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SCORE	DIABETES	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
1.94	Adults 20+ with Diabetes	percent	12.3		11.5	10.2	2015	5
	Diabetic Monitoring:							
1.94	Medicare Population	percent	84.9		86.1	85.7	2015	15
	Age-Adjusted Death Rate							
1.67	due to Diabetes	deaths/ 100,000 population	28.2		25.8	21.1	2013-2015	3
0.04	Diabetes: Medicare	novemb	24.7		20.1	27.2	2017	4
0.94	Population	percent	24.7		28.1	27.2	2017	4
			FRANKLIN				MEASUREMENT	
SCORE	ECONOMY	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Food Insecure Children							
2.64	Likely Ineligible for		20		20	20	2016	
2.61	Assistance	percent	39		29	20	2016	6
2.61	Homeowner Vacancy Rate	percent	2.9		1.8	1.7	2013-2017	1
2.61	Total Employment Change	percent	-24.1		2.2	2.1	2015-2016	17
	Unemployed Workers in							
2.44	Civilian Labor Force	percent	4.8		4.1	4.1	February 2019	16
	People 65+ Living Below							
2.33	Poverty Level	percent	11.1		7.5	9.3	2013-2017	1
	Median Monthly Owner							
4.50	Costs for Households	de Herre	204		200	474	2012 2017	4
1.58	without a Mortgage	dollars	381		389	474	2013-2017	1
	Households with Cash							
1.56	Public Assistance Income	percent	2.2		1.8	2.6	2013-2017	1
	Mortgaged Owners Median							
1.47	Monthly Household Costs	dollars	1161		1109	1515	2013-2017	1
	Social and Economic							
1.42	Factors Ranking	ranking	25				2019	5
1.39	SNAP Certified Stores	stores/ 1,000 population	0.9				2016	18
	Low-Income and Low							
1.33	Access to a Grocery Store	percent	4.5				2015	18
1.33	Per Capita Income	dollars	26267		27305	31177	2013-2017	1
1.14	Median Housing Unit Value	dollars	152200		130200	193500	2013-2017	1

4.00	Median Household Gross		660		700	000	2042 2047	_
1.03	Rent	dollars	668		782	982	2013-2017	1
	Female Population 16+ in							
0.94	Civilian Labor Force	percent	59.3		58.9	58.2	2013-2017	1
	Population 16+ in Civilian							
0.94	Labor Force	percent	64.6		63.8	63	2013-2017	1
	Persons with Disability							
0.92	Living in Poverty (5-year)	percent	22.8		27	27.1	2013-2017	1
0.83	Median Household Income	dollars	55588		52182	57652	2013-2017	1
	Students Eligible for the							
0.83	Free Lunch Program	percent	32.8		39.6	40.4	2016-2017	11
	People Living 200% Above	·						
0.72	Poverty Level	percent	73.1		66.5	67.2	2013-2017	1
0.67	Income Inequality		0.4		0.5	0.5	2013-2017	1
0.50	Food Insecurity Rate	percent	11.5		13.7	12.9	2016	6
0.50	Homeownership	percent	73.4		61.2	56	2013-2017	1
	Children Living Below	·						
0.39	Poverty Level	percent	10.6		20.4	20.3	2013-2017	1
	Families Living Below							
0.39	Poverty Level	percent	6.8		10.3	10.5	2013-2017	1
	People Living Below							
0.39	Poverty Level	percent	9.9		14.6	14.6	2013-2017	1
	Renters Spending 30% or							
	More of Household Income							
0.39	on Rent	percent	38.2		47.9	50.6	2013-2017	1
0.39	Severe Housing Problems	percent	9.3		13.7	18.4	2011-2015	5
	Young Children Living							
0.39	Below Poverty Level	percent	10.3		23.7	22.5	2013-2017	1
0.33	Child Food Insecurity Rate	percent	16.1		17.7	17.9	2016	6
SCORE	EDUCATION	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	8th Grade Students	<del>-</del>				_		
2.11	Proficient in Math	percent	44.5		54.4		2017	2

	APPENDIX D							
	8th Grade Students Proficient in							
1.94	English/Language Arts	percent	55		60.7		2017	2
	People 25+ with a Bachelor's Degree or							
1.72	Higher	percent	19.7		25.3	30.9	2013-2017	1
1.72	Student-to-Teacher Ratio	students/ teacher	16.7		17.4	16.5	2016-2017	11
1.44	4th Grade Students Proficient in English/Language Arts	percent	66.8		64.9		2017	2
1.17	People 25+ with a High School Degree or Higher	percent	87.6		88.3	87.3	2013-2017	1
0.89	4th Grade Students Proficient in Math	percent	77.6		61.2		2017	2
0.75	High School Graduation	percent	96.9	87	88.7	84.6	2017	2
SCORE	ENVIRONMENT	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.33	Liquor Store Density	stores/ 100,000 population	17.6		12.5	10.5	2016	17
	Access to Exercise							
2.17	Opportunities	percent	52.7		75.3	83.9	2019	5
2.00	Houses Built Prior to 1950	percent	26		23.4	18	2013-2017	1
1.78	Fast Food Restaurant Density	restaurants/ 1,000 population	0.7				2014	18
1.61	Months of Mild Drought or Worse	months per year	5				2016	13
1.61	Number of Extreme Heat Events	events	7				2016	13
1.61	PBT Released	pounds	93.8				2017	19
1.61	Recognized Carcinogens Released into Air	pounds	96.7				2017	19
1.58	Physical Environment Ranking	ranking	48				2019	5
1.56	Daily Dose of UV Irradiance	Joule per square meter	2438		2427		2015	13
	Number of Extreme Heat							

Number of Extreme  1.39 Precipitation Days days 14  1.39 SNAP Certified Stores stores/ 1,000 population 0.  Children with Low Access to a Grocery Store percent 2.	
1.39 SNAP Certified Stores stores/ 1,000 population 0. Children with Low Access	
Children with Low Access	.9 2010 18
<b>1.33</b> to a Grocery Store percent 2.	
1.33 Farmers Market Density markets/ 1,000 population	2016 18
Households with No Car and Low Access to a	
1.33 Grocery Store percent 2.	.2 2015 18
Low-Income and Low Access to a Grocery Store percent 4.	.5 2015 18
People 65+ with Low Access to a Grocery Store percent	1 2015 18
People with Low Access to a Grocery Store percent 9.	.1 2015 18
<b>1.11</b> Grocery Store Density stores/ 1,000 population 0.	.3 2014 18
Recreation and Fitness  0.89 Facilities facilities/ 1,000 population 0.	.2 2014 18
<b>0.72</b> Food Environment Index 8.	.2 7.1 7.7 2019 5
	.3 13.7 18.4 2011-2015 5
Severe measing measures percent	1011 2011 2010 3
EXERCISE, NUTRITION, & FRAN SCORE WEIGHT UNITS COU	
Food Insecure Children Likely Ineligible for	5.3 30.5 32.8 28.5 2015 5
2.61 Assistance percent 3	9 29 20 2016 6
·	2.7 75.3 83.9 2019 5
·	7.5 32.6 25.1 22.2 <i>2015</i> 5
Fast Food Restaurant  Density restaurants/ 1,000 population 0.	.7 2014 18
1.42 Health Behaviors Ranking ranking 3	7 2019 5
1.39 SNAP Certified Stores stores/ 1,000 population 0.	.9 2016 18

	APPENDIX B							
	Children with Low Access							
1.33	to a Grocery Store	percent	2.6				2015	18
1.33	Farmers Market Density	markets/ 1,000 population	0				2016	18
1.33	Households with No Car and Low Access to a Grocery Store	percent	2.2				2015	18
1.33	Low-Income and Low Access to a Grocery Store	percent	4.5				2015	18
1.17	People 65+ with Low Access to a Grocery Store	percent	1				2015	18
1.17	People with Low Access to a Grocery Store	percent	9.1				2015	18
1.11	Grocery Store Density	stores/ 1,000 population	0.3				2014	18
0.89	Recreation and Fitness Facilities	facilities/ 1,000 population	0.2				2014	18
0.72	Food Environment Index		8.2		7.1	7.7	2019	5
0.50	Food Insecurity Rate	percent	11.5		13.7	12.9	2016	6
0.33	Child Food Insecurity Rate	percent	16.1		17.7	17.9	2016	6
SCORE		UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Heart Failure: Medicare							
1.83	Population	percent	14.3		15	13.9	2017	4
1.56	Age-Adjusted Death Rate due to Heart Attack	deaths/ 100,000 population 35+ years	76.2		75.6		2015	13
1.44	Atrial Fibrillation: Medicare Population	percent	8.3		8.4	8.4	2017	4
1.44	Hypertension: Medicare Population	percent	58.1		59.4	57.1	2017	4
1.33	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/ 100,000 population	102.4	103.4	101.9	94.8	2015-2017	3
1.17	Ischemic Heart Disease: Medicare Population	percent	24.7		28.3	26.9	2017	4
0.72	Stroke: Medicare Population	percent	3.3		3.7	3.8	2017	4

	APPENDIX B							
0.00	Hyperlipidemia: Medicare	_	25.0		44.0	40.7	2017	
0.33	Population Age-Adjusted Death Rate	percent	35.9		41.3	40.7	2017	4
	due to Cerebrovascular							
0.00	Disease (Stroke)	deaths/ 100,000 population	27.5	34.8	39.6	37.5	2015-2017	3
		account, 200,000 population						_
	IMMUNIZATIONS &		FRANKLIN				MEASUREMENT	
SCORE	INFECTIOUS DISEASES	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Salmonella Infection						_	
2.17	Incidence Rate	cases/ 100,000 population	30.9	11.4	11.1		2017	8
1.28	Hepatitis C Prevalence	Rate per 100,000 population	106.1		126.1		2017	8
0.50	Chlamydia Incidence Rate	cases/ 100,000 population	100.6		466	497.3	2016	12
0.50	Gonorrhea Incidence Rate	cases/ 100,000 population	4.4		142.8	145.8	2016	12
	MATERNAL, FETAL &		FRANKLIN				MEASUREMENT	
SCORE	INFANT HEALTH	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Babies with Low Birth							
2.42	Weight	percent	9.3	7.8	8.3	8.3	2017	8
2.10	Mothers who Received	n august	CC 0	77.0	CO C	77.0	2017	8
2.19	Early Prenatal Care	percent live births/ 1,000 females aged	66.9	77.9	68.6	77.3	2017	0
2.11	Teen Birth Rate: 15-19	15-19	35.7		22.8		2017	8
	Mothers who Smoked							_
1.97	During Pregnancy	percent	15.7	1.4	13.5	6.9	2017	8
0.64	Preterm Births (OE)	percent	8.2	9.4	9.9	9.9	2017	8
	MENTAL HEALTH &		FRANKLIN				MEASUREMENT	
SCORE	MENTAL DISORDERS	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Mental Health Provider							
2.17	Rate	providers/ 100,000 population	31		149.5	228.7	2018	5
	Poor Mental Health:							
1.67	Average Number of Days	days	4.1		4.3	3.8	2016	5
1.17	Frequent Mental Distress	percent	12.3		13.3	15	2016	5
0.04	Depression: Medicare		467		20.2	47.0	2017	
0.94	Population	percent	16.7		20.3	17.9	2017	4

	APPENDIX B	1	1	ĺ	İ			į l
	Alzheimer's Disease or							
	Dementia: Medicare							
0.61	Population	percent	8.7		11.1	10.9	2017	4
	Age-Adjusted Death Rate							
0.39	due to Alzheimer's Disease	deaths/ 100,000 population	25.8		34.4	30.3	2015-2017	3
			ED A NIZI INI				NAC A CLUDENACNIT	
SCORE	MORTALITY DATA	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Cource
SCORE	WORTALITY DATA	UNITS	COUNTY	HPZUZU	Illulalla	0.3.	PERIOD	Source
	Age-Adjusted Death Rate							
2.67	due to Prostate Cancer	deaths/ 100,000 males	28.8	21.8	20.4	19.5	2011-2015	10
	Death Rate due to Drug							
2.50	Poisoning	deaths/ 100,000 population	26.4		23.2	19.2	2015-2017	5
	Age-Adjusted Death Rate							
2.28	due to Breast Cancer	deaths/ 100,000 females	23.4	20.7	21.8	21.2	2010-2014	10
	Age-Adjusted Death Rate	_						
1.89	due to Cancer	deaths/ 100,000 population	182.6	161.4	181	163.5	2011-2015	10
	Age-Adjusted Death Rate							
1.83	due to Lung Cancer	deaths/ 100,000 population	54.6	45.5	53.4	43.4	2011-2015	10
1.00	Age-Adjusted Death Rate	acaths, 100,000 population	3 1.0	13.3	33.1	13.1	2011 2013	10
	due to Chronic Lower							
1.78	Respiratory Diseases	deaths/ 100,000 population	53.4		55	41	2015-2017	3
	Age-Adjusted Death Rate	, , , , , , , , , , , , , , , , , , ,						
1.67	due to Diabetes	deaths/ 100,000 population	28.2		25.8	21.1	2013-2015	3
	Alcohol-Impaired Driving							
1.67	Deaths	percent	28.6		20.8	28.6	2013-2017	5
	Age-Adjusted Death Rate							
	due to Unintentional							
1.61	Injuries	deaths/ 100,000 population	51	36.4	52.7	46.7	2015-2017	3
	Age-Adjusted Death Rate	deaths/ 100,000 population 35+						
1.56	due to Heart Attack	years	76.2		75.6		2015	13
	Age-Adjusted Death Rate	700.0	7 0.2		70.0			
	due to Coronary Heart							
1.33	Disease	deaths/ 100,000 population	102.4	103.4	101.9	94.8	2015-2017	3
1.25	Mortality Ranking	ranking	12				2019	5
1.17	Life Expectancy	years	78.9		77.1	79.1	2015-2017	5
		,						
0.56	Premature Death	years/ 100,000 population	6422.8		8237.6	6900.6	2015-2017	5

0.39	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/ 100,000 population	25.8		34.4	30.3	2015-2017	3
0.28	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/ 100,000 population	13.1	14.5	15.9	14.5	2011-2015	10
0.00	Age-Adjusted Death Rate due to Cerebrovascular	dontho / 100 000 nonviction	27.5	24.0	20.6	27.5	2015 2017	2
0.00	Disease (Stroke)	deaths/ 100,000 population	27.5	34.8	39.6	37.5	2015-2017	3
SCORE	OLDER ADULTS & AGING	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	Mammography Screening: Medicare Population	percent	52.5		62.3	63.2	2015	15
2.33	People 65+ Living Below Poverty Level	percent	11.1		7.5	9.3	2013-2017	1
1.94	Diabetic Monitoring: Medicare Population	percent	84.9		86.1	85.7	2015	15
1.83	Heart Failure: Medicare Population	percent	14.3		15	13.9	2017	4
1.44	Atrial Fibrillation: Medicare Population	percent	8.3		8.4	8.4	2017	4
1.44	Hypertension: Medicare Population	percent	58.1		59.4	57.1	2017	4
1.17	Ischemic Heart Disease: Medicare Population	percent	24.7		28.3	26.9	2017	4
1.17	People 65+ with Low Access to a Grocery Store	percent	1				2015	18
1.11	Cancer: Medicare Population	percent	7.2		7.8	8.2	2017	4
1.00	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	29.5		34.5	33.1	2017	4
0.94	Depression: Medicare Population	percent	16.7		20.3	17.9	2017	4
0.94	Diabetes: Medicare Population	percent	24.7		28.1	27.2	2017	4

	AFFLINDIA D							
	Chronic Kidney Disease:							
0.83	Medicare Population	percent	20		25.1	24	2017	4
	Asthma: Medicare							
0.78	Population	percent	3.8		5.2	5.1	2017	4
	COPD: Medicare							
0.72	Population	percent	11.6		14.4	11.7	2017	4
	Stroke: Medicare							
0.72	Population	percent	3.3		3.7	3.8	2017	4
	Alzheimer's Disease or							
	Dementia: Medicare							
0.61	Population	percent	8.7		11.1	10.9	2017	4
0.50	People 65+ Living Alone	percent	20.2		27.7	26.2	2013-2017	1
	Age-Adjusted Death Rate							
0.39	due to Alzheimer's Disease	deaths/ 100,000 population	25.8		34.4	30.3	2015-2017	3
	Hyperlipidemia: Medicare							
0.33	Population	percent	35.9		41.3	40.7	2017	4
	Osteoporosis: Medicare							
0.33	Population	percent	4.5		6.2	6.4	2017	4
			FRANKLIN				MEASUREMENT	
SCORE	OTHER CHRONIC DISEASES	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
000112	Rheumatoid Arthritis or	<u> </u>						
	Osteoarthritis: Medicare							
1.00	Population	percent	29.5		34.5	33.1	2017	4
	Chronic Kidney Disease:							
0.83	Medicare Population	percent	20		25.1	24	2017	4
0.03	Osteoporosis: Medicare	percent	20		23.1	24	2017	7
0.33	Population	percent	4.5		6.2	6.4	2017	4
	· opaliation	percent			0.1	<b>.</b>		
			FD A FILE IC:				A45 A CU 15 55 455 :-	
SCORE	DDEVENTION & CAFETY	LINUTC	FRANKLIN	прэдэд	Indiana	11.6	MEASUREMENT	Courses
SCORE	PREVENTION & SAFETY	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.50	Death Rate due to Drug Poisoning	deaths/ 100,000 population	26.4		23.2	19.2	2015-2017	5
2.50	Age-Adjusted Death Rate	αεαίτιος 100,000 μομαίατιστι	20.4		23.2	13.4	2013-2017	3
	due to Unintentional							
1.61	Injuries	deaths/ 100,000 population	51	36.4	52.7	46.7	2015-2017	3
1.01	принез	acatilis, 100,000 population	J1	30.7	32.1	70.7	2013 2017	

0.39	Covers Housing Broblems	norcont	9.3		13.7	18.4	2011-2015	5
0.55	Severe Housing Problems	percent	9.5		15./	10.4	2011-2015	3
SCORE	PUBLIC SAFETY	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Alcohol-Impaired Driving							
1.67	Deaths	percent	28.6		20.8	28.6	2013-2017	5
1.61	Child Abuse Rate	cases/ 1,000 children	17.2		17.1		2015	2
0.42	Violent Crime Rate	crimes/ 100,000 population	36.3		385.1	386.5	2014-2016	5
SCORE	RESPIRATORY DISEASES	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.33	Lung and Bronchus Cancer Incidence Rate	cases/ 100,000 population	76.5		72.8	60.2	2011-2015	10
1.83	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	54.6	45.5	53.4	43.4	2011-2015	10
1.78	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/ 100,000 population	53.4		55	41	2015-2017	3
0.78	Asthma: Medicare Population	percent	3.8		5.2	5.1	2017	4
0.72	COPD: Medicare Population	percent	11.6		14.4	11.7	2017	4
SCORE	SOCIAL ENVIRONMENT	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	Total Employment Change	percent	-24.1		2.2	2.1	2015-2016	17
2.39	Mean Travel Time to Work	minutes	30.1		23.4	26.4	2013-2017	1
2.25	Households with an Internet Subscription	percent	66.8		75.9	78.7	2013-2017	1
1.94	Social Associations	membership associations/ 10,000 population	10.6		12.3	9.3	2016	5
1.92	Households with One or More Types of Computing Devices	percent	80.3		85.5	87.2	2013-2017	1

People 25+ with a							
_	_			05.5			
	•				30.9		1
	cases/ 1,000 children	17.2		17.1		2015	2
Median Monthly Owner							
without a Mortgage	dollars	381		389	474	2013-2017	1
Mortgaged Owners Median							
Monthly Household Costs	dollars	1161		1109	1515	2013-2017	1
Voter Turnout: Presidential							
Election	percent	60		58		2016	7
Social and Economic							
Factors Ranking	ranking	25				2019	5
Per Capita Income	dollars	26267		27305	31177	2013-2017	1
People 25+ with a High							
School Degree or Higher	percent	87.6		88.3	87.3	2013-2017	1
Median Housing Unit Value	dollars	152200		130200	193500	2013-2017	1
Median Household Gross							
Rent	dollars	668		782	982	2013-2017	1
Persons with Health							
Insurance	percent	91.1	100	90.4		2017	14
Female Population 16+ in							
Civilian Labor Force	percent	59.3		58.9	58.2	2013-2017	1
Population 16+ in Civilian							
Labor Force	percent	64.6		63.8	63	2013-2017	1
Median Household Income	dollars	55588		52182	57652	2013-2017	1
Single-Parent Households	percent	24.5		33.6	33.3	2013-2017	1
Homeownership	percent	73.4		61.2	56	2013-2017	1
'	•						1
	p 2. 30			_,,,	· -		_
Poverty Level	percent	10.6		20.4	20.3	2013-2017	1
Linguistic Isolation	percent	0.1		1.7	4.5	2013-2017	1
People Living Below	,						
Poverty Level	percent	9.9		14.6	14.6	2013-2017	1
Young Children Living							
Below Poverty Level	percent	10.3		23.7	22.5	2013-2017	1
	Bachelor's Degree or Higher Child Abuse Rate Median Monthly Owner Costs for Households without a Mortgage Mortgaged Owners Median Monthly Household Costs Voter Turnout: Presidential Election Social and Economic Factors Ranking Per Capita Income People 25+ with a High School Degree or Higher Median Housing Unit Value Median Household Gross Rent Persons with Health Insurance Female Population 16+ in Civilian Labor Force Population 16+ in Civilian Labor Force Median Household Income Single-Parent Households Homeownership People 65+ Living Alone Children Living Below Poverty Level Linguistic Isolation People Living Below Poverty Level Young Children Living	Bachelor's Degree or Higher	Bachelor's Degree or Higher percent 19.7 Child Abuse Rate cases/ 1,000 children 17.2 Median Monthly Owner Costs for Households without a Mortgage dollars 381 Mortgaged Owners Median Monthly Household Costs dollars 1161 Voter Turnout: Presidential Election percent 60 Social and Economic Factors Ranking ranking 25 Per Capita Income dollars 26267 People 25+ with a High School Degree or Higher percent 87.6 Median Housing Unit Value dollars 152200 Median Household Gross Rent dollars 668 Persons with Health Insurance percent 91.1 Female Population 16+ in Civilian Labor Force percent 94.5 Median Household Income dollars 55588 Single-Parent Households percent 24.5 Homeownership percent 73.4 People 65+ Living Alone percent 10.6 Linguistic Isolation percent 9.9 Poverty Level percent 9.9 Poung Children Living Below Poverty Level 9.9 Poung Children Living	Bachelor's Degree or Higher	Bachelor's Degree or Higher         percent         19.7         25.3           Child Abuse Rate         cases/1,000 children         17.2         17.1           Median Monthly Owner Costs for Households without a Mortgage         dollars         381         389           Mortgaged Owners Median Monthly Household Costs         dollars         1161         1109           Voter Turnout: Presidential Election         percent         60         58           Social and Economic Factors Ranking         ranking         25           Per Capita Income         dollars         26267         27305           People 25+ with a High School Degree or Higher         percent         87.6         88.3           Median Housing Unit Value         dollars         152200         130200           Median Household Gross Rent         dollars         668         782           Persons with Health Insurance         percent         91.1         100         90.4           Female Population 16+ in Civilian Labor Force         percent         59.3         58.9           Population 16+ in Civilian Labor Force         percent         59.3         58.9           Median Household Income         dollars         55588         52182           Single-Parent Households         percent	Bachelor's Degree or Higher         percent         19.7         25.3         30.9           Child Abuse Rate         cases/ 1,000 children         17.2         17.1           Median Monthly Owner Costs for Households without a Mortgage         dollars         381         389         474           Mortgaged Owners Median Monthly Household Costs         dollars         1161         1109         1515           Voter Turnout: Presidential Election         percent         60         58           Social and Economic Factors Ranking         ranking         25           Per Capita Income         dollars         26267         27305         31177           People 25+ with a High School Degree or Higher         percent         87.6         88.3         87.3           Median Housing Unit Value         dollars         152200         130200         193500           Median Household Gross Rent         dollars         668         782         982           Persons with Health Insurance         percent         91.1         100         90.4         100           Female Population 16+ in Civilian Labor Force         percent         59.3         58.9         58.2           Population 16+ in Civilian Labor Force         percent         59.3         58.9         58.2	Bachelor's Degree or Higher   Percent   19.7   25.3   30.9   2013-2017

SCORE	SUBSTANCE ABUSE	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Death Rate due to Drug							
2.50	Poisoning	deaths/ 100,000 population	26.4		23.2	19.2	2015-2017	5
2.33	Liquor Store Density	stores/ 100,000 population	17.6		12.5	10.5	2016	17
1.97	Mothers who Smoked During Pregnancy	percent	15.7	1.4	13.5	6.9	2017	8
1.94	Substance Abuse Treatment Rate: Alcohol	Rate per 100,000 population	223		197.1		2015	8
1.67	Adults who Smoke	percent	18.8	12	21.1	17	2016	5
1.67	Alcohol-Impaired Driving Deaths Adults who Drink	percent	28.6		20.8	28.6	2013-2017	5
1.50	Excessively	percent	18.2	25.4	18.6	18	2016	5
1.42	Health Behaviors Ranking	ranking	37				2019	5
SCORE	TRANSPORTATION	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
3.00	Workers who Walk to Work	percent	0.6	3.1	2.1	2.7	2013-2017	1
2.67	Workers who Drive Alone to Work	percent	88.9	3.1	83	76.4	2013-2017	1
2.61	Solo Drivers with a Long Commute	percent	48.1		30.7	35.2	2013-2017	5
2.44	Workers Commuting by Public Transportation	percent	0.1	5.5	1	5.1	2013-2017	1
2.39	Mean Travel Time to Work	minutes	30.1		23.4	26.4	2013-2017	1
1.33	Households with No Car and Low Access to a Grocery Store Households without a	percent	2.2				2015	18
0.50	Vehicle	percent	3.1		6.7	8.8	2013-2017	1
SCORE	WELLNESS & LIFESTYLE	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source

1.17	Insufficient Sleep	percent	34		36	38	2016	5
1.17	Life Expectancy	years	78.9		77.1	79.1	2015-2017	5
1.00	Frequent Physical Distress	percent	11		11.9	15	2016	5
1.00	Poor Physical Health: Average Number of Days	days	3.7		3.9	3.7	2016	5
0.83	Self-Reported General Health Assessment: Poor or Fair	percent	15.1		17.7	16	2016	5
	-		_					_
SCORE	WOMEN'S HEALTH	UNITS	FRANKLIN COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	Mammography Screening: Medicare Population	percent	52.5		62.3	63.2	2015	15
2.28	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	23.4	20.7	21.8	21.2	2010-2014	10
1.28	Breast Cancer Incidence Rate	cases/ 100,000 females	114.5		121.7	124.7	2011-2015	10

# HENRY COUNTY, INDIANA

SCORE	ACCESS TO HEALTH SERVICES	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.17	Primary Care Provider Rate	providers/ 100,000 population	41.2		66.9	75.4	2016	6
2.06	Dentist Rate	dentists/ 100,000 population	37.1		55.2	68.4	2017	6

	Preventable Hospital Stays:	discharges/ 1,000 Medicare						
2.06	Medicare Population	enrollees	63.6		56.8	49.4	2015	16
2.00	Mental Health Provider Rate	providers/ 100,000 population	82.5		149.5	228.7	2018	6
1.58	Clinical Care Ranking	ranking	54				2019	6
1.39	Non-Physician Primary Care Provider Rate	providers/ 100,000 population	76.3		80.3	88.2	2018	6
1.19	Children with Health Insurance	percent	94.7	100	93.7		2017	15
0.81	Adults with Health Insurance: 18-64	percent	91	100	89		2017	15
0.81	Persons with Health Insurance	percent	92	100	90.4		2017	15
SCORE	CANCER	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Age-Adjusted Death Rate due							
2.78	to Breast Cancer	deaths/ 100,000 females	26.3	20.7	21.4	20.9	2011-2015	11
2.61	Oral Cavity and Pharynx Cancer Incidence Rate	cases/ 100,000 population	15.1		12	11.6	2011-2015	11
2.50	Lung and Bronchus Cancer Incidence Rate	cases/ 100,000 population	81.7		72.8	60.2	2011-2015	11
2.28	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/ 100,000 population	16.2	14.5	15.9	14.5	2011-2015	11
2.06	Age-Adjusted Death Rate due to Cancer	deaths/ 100,000 population	190.2	161.4	181	163.5	2011-2015	11
2.00	Colorectal Cancer Incidence Rate	cases/ 100,000 population	47.4	39.9	42.9	39.2	2011-2015	11
1.83	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	56.7	45.5	53.4	43.4	2011-2015	11
1.72	All Cancer Incidence Rate	cases/ 100,000 population	453.8		447	441.2	2011-2015	11
1.28	Mammography Screening: Medicare Population	percent	63.9		62.3	63.2	2015	16
1.11	Cancer: Medicare Population	percent	7.3		7.8	8.2	2017	5
0.56	Prostate Cancer Incidence Rate	cases/ 100,000 males	83.4		92.7	109	2011-2015	11
0.39	Breast Cancer Incidence Rate	cases/ 100,000 females	103.6		121.7	124.7	2011-2015	11
	Age-Adjusted Death Rate due	· · · · · · · · · · · · · · · · · · ·						
0.22	to Prostate Cancer	deaths/ 100,000 males	13.3	21.8	21	20.1	2010-2014	11

SCORE	CHILDREN'S HEALTH	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.00	Child Food Insecurity Rate	percent	20		17.7	17.9	2016	7
1.94	Food Insecure Children Likely Ineligible for Assistance	percent	28		29	20	2016	7
1.58	Blood Lead Levels in Children (>5 micrograms per deciliter)	percent	2.9		2.7		2013	14
1.19	Children with Health Insurance	percent	94.7	100	93.7		2017	15
1.00	Children with Low Access to a Grocery Store	percent	0.8				2015	19
0.89	Child Abuse Rate	cases/ 1,000 children	11		17.1		2015	3
SCORE	COUNTY HEALTH RANKINGS	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
1.58	Clinical Care Ranking	ranking	54				2019	6
1.58	Health Behaviors Ranking	ranking	61				2019	6
1.58	Morbidity Ranking	ranking	54				2019	6
1.58	Mortality Ranking	ranking	52				2019	6
1.58	Social and Economic Factors Ranking	ranking	54				2019	6
1.42	Physical Environment Ranking	ranking	31				2019	6
SCORE	DIABETES	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	Adults 20+ with Diabetes	percent	14.4		11.5	10.2	2015	6
2.61	Age-Adjusted Death Rate due to Diabetes	deaths/ 100,000 population	43.1		26.5	21.2	2015-2017	4
1.94	Diabetes: Medicare Population	percent	29.1		28.1	27.2	2017	5
0.72	Diabetic Monitoring: Medicare Population	percent	89.7		86.1	85.7	2015	16
SCORE	ECONOMY	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source

	ALL FINDIV D						:
2.39	Homeowner Vacancy Rate	percent	3.5	1.8	1.7	2013-2017	1
	Children Living Below Poverty						
2.33	Level	percent	25	20.4	20.3	2013-2017	1
	Families Living Below Poverty						
2.22	Level	percent	12.3	10.3	10.5	2013-2017	1
	Population 16+ in Civilian Labor						
2.22	Force	percent	54	63.8	63	2013-2017	1
	Young Children Living Below						
2.22	Poverty Level	percent	28.9	23.7	22.5	2013-2017	1
					1935		
2.14	Median Housing Unit Value	dollars	94800	130200	00	2013-2017	1
2.00	Child Food Insecurity Rate	percent	20	17.7	17.9	2016	7
					5765		
2.00	Median Household Income	dollars	46131	52182	2	2013-2017	1
	People Living Below Poverty						
2.00	Level	percent	16.1	14.6	14.6	2013-2017	1
					3117		
2.00	Per Capita Income	dollars	23293	27305	7	2013-2017	1
	Food Insecure Children Likely						
1.94	Ineligible for Assistance	percent	28	29	20	2016	7
	Unemployed Workers in						
1.94	Civilian Labor Force	percent	4.3	4.1	4.1	February 2019	17
	Female Population 16+ in						
1.83	Civilian Labor Force	percent	53	58.9	58.2	2013-2017	1
	Households with Cash Public						
1.78	Assistance Income	percent	2.2	1.8	2.6	2013-2017	1
	People 65+ Living Below						
1.78	Poverty Level	percent	8.5	7.5	9.3	2013-2017	1
4 = 6	People Living 200% Above		60.0			2012 2015	
1.72	Poverty Level	percent	63.3	66.5	67.2	2013-2017	1
1.67	Food Insecurity Rate	percent	13.8	13.7	12.9	2016	7
	Renters Spending 30% or More						
1.67	of Household Income on Rent	percent	47.4	47.9	50.6	2013-2017	1
	Social and Economic Factors						
1.58	Ranking	ranking	54			2019	6
1.39	Income Inequality		0.4	0.5	0.5	2013-2017	1
	11						

	Ctudouto Flicible for the Free							İ
1.39	Students Eligible for the Free Lunch Program	percent	39.8		39.6	40.4	2016-2017	12
1.28	Homeownership	·	62.4		61.2	56		
1.28	Persons with Disability Living in	percent	02.4		01.2	50	2013-2017	1
1.25	Poverty (5-year)	percent	26.7		27	27.1	2013-2017	1
1.06	SNAP Certified Stores	stores/ 1,000 population	0.9			27.1	2016	19
1.03	Median Household Gross Rent	dollars	687		782	982	2013-2017	
1.05	Low-Income and Low Access to	uonars	067		702	962	2013-2017	1
1.00	a Grocery Store	percent	1.4				2015	19
0.83	Severe Housing Problems	percent	12.8		13.7	18.4	2011-2015	6
0.03		ρειτείπ	12.0		13.7	10.4	2011 2013	
0.81	Mortgaged Owners Median Monthly Household Costs	dollars	968		1109	1515	2013-2017	1
0.54	Median Monthly Owner Costs for Households without a	4.46.00	246		200	474	2042 2047	
0.64	Mortgage	dollars	346		389	474	2013-2017	1
0.39	Total Employment Change	percent	6.7		2.2	2.1	2015-2016	18
SCORE	EDUCATION	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
SCORE	EDUCATION People 25+ with a Bachelor's	UNITS		HP2020	Indiana	U.S.		Source
SCORE		<b>UNITS</b> percent		HP2020	Indiana 25.3	<b>U.S.</b> 30.9		Source
1.83	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient		<b>COUNTY</b> 16.5	HP2020	25.3		PERIOD 2013-2017	1
	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient in Math		COUNTY	HP2020			PERIOD	
1.83	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient in Math 4th Grade Students Proficient	percent percent	16.5 52.4	HP2020	25.3 54.4		PERIOD  2013-2017  2017	3
1.83	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient in Math 4th Grade Students Proficient in Math	percent	<b>COUNTY</b> 16.5	HP2020	25.3		PERIOD 2013-2017	1
1.83 1.78 1.44	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient in Math 4th Grade Students Proficient in Math 8th Grade Students Proficient	percent percent percent	16.5 52.4 65.3	HP2020	25.3 54.4 61.2		2013-2017 2017 2017	3
1.83	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient in Math 4th Grade Students Proficient in Math 8th Grade Students Proficient in English/Language Arts	percent percent	16.5 52.4	HP2020	25.3 54.4		PERIOD  2013-2017  2017	3
1.83 1.78 1.44 1.44	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient in Math 4th Grade Students Proficient in Math 8th Grade Students Proficient in English/Language Arts 4th Grade Students Proficient	percent  percent  percent  percent	16.5 52.4 65.3	HP2020	25.3 54.4 61.2 60.7		PERIOD  2013-2017  2017  2017	1 3 3
1.83 1.78 1.44 1.44	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient in Math 4th Grade Students Proficient in Math 8th Grade Students Proficient in English/Language Arts 4th Grade Students Proficient in English/Language Arts	percent  percent  percent  percent  percent	16.5 52.4 65.3 63.3		25.3 54.4 61.2 60.7 64.9	30.9	PERIOD  2013-2017  2017  2017  2017	1 3 3 3
1.83 1.78 1.44 1.44	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient in Math 4th Grade Students Proficient in Math 8th Grade Students Proficient in English/Language Arts 4th Grade Students Proficient in English/Language Arts High School Graduation	percent  percent  percent  percent	16.5 52.4 65.3	HP2020	25.3 54.4 61.2 60.7		PERIOD  2013-2017  2017  2017	1 3 3
1.83 1.78 1.44 1.44	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient in Math 4th Grade Students Proficient in Math 8th Grade Students Proficient in English/Language Arts 4th Grade Students Proficient in English/Language Arts	percent  percent  percent  percent  percent	16.5 52.4 65.3 63.3		25.3 54.4 61.2 60.7 64.9	30.9	PERIOD  2013-2017  2017  2017  2017	1 3 3 3
1.83 1.78 1.44 1.44 1.28 1.03	People 25+ with a Bachelor's Degree or Higher 8th Grade Students Proficient in Math 4th Grade Students Proficient in Math 8th Grade Students Proficient in English/Language Arts 4th Grade Students Proficient in English/Language Arts High School Graduation People 25+ with a High School	percent  percent  percent  percent  percent  percent  percent	16.5 52.4 65.3 63.3 71.3 93.6		25.3 54.4 61.2 60.7 64.9 88.7	30.9	PERIOD  2013-2017  2017  2017  2017  2017  2017	1 3 3 3 3

SCORE	ENVIRONMENT	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	Liquor Store Density	stores/ 100,000 population	18.5		12.5	10.5	2016	18
2.39	Houses Built Prior to 1950	percent	36.1		23.4	18	2013-2017	1
	Access to Exercise							
1.67	Opportunities	percent	68.3		75.3	83.9	2019	6
1.67	Grocery Store Density	stores/ 1,000 population	0.2				2014	19
1.61	Months of Mild Drought or Worse	months per year	6				2016	14
1.58	Blood Lead Levels in Children (>5 micrograms per deciliter)	percent	2.9		2.7		2013	14
1.53	Annual Particle Pollution	grade	В				2014-2016	2
1.42	Physical Environment Ranking	ranking	31				2019	6
1.39	Number of Extreme Heat Days	days	28				2016	14
1.39	PBT Released	pounds	3194.7				2017	20
1.33	Daily Dose of UV Irradiance	Joule per square meter	2365		2427		2015	14
1.33	Farmers Market Density	markets/ 1,000 population	0				2016	19
1.33	Fast Food Restaurant Density	restaurants/ 1,000 population	0.5				2014	19
1.17	Number of Extreme Precipitation Days	days	133				2016	14
1.17	People 65+ with Low Access to a Grocery Store	percent	0.9				2015	19
1.17	Recognized Carcinogens Released into Air	pounds	166.8				2017	20
1.17	Recreation and Fitness Facilities	facilities/ 1,000 population	0.1				2014	19
1.06	SNAP Certified Stores	stores/ 1,000 population	0.9				2016	19
1.00	Children with Low Access to a Grocery Store	percent	0.8				2015	19
1.00	Households with No Car and Low Access to a Grocery Store	percent	1.2				2015	19
1.00	Low-Income and Low Access to a Grocery Store	percent	1.4				2015	19
1.00	People with Low Access to a Grocery Store	percent	3.7				2015	19
0.89	Food Environment Index		8.1		7.1	7.7	2019	6

	APPENDIA D							
0.83	Severe Housing Problems	percent	12.8		13.7	18.4	2011-2015	6
SCORE	ENVIRONMENTAL & OCCUPATIONAL HEALTH	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Blood Lead Levels in Children							
1.58	(>5 micrograms per deciliter)	percent	2.9		2.7		2013	14
1.42	Physical Environment Ranking		31				2019	6
1.39	Asthma: Medicare Population	percent	4.8		5.2	5.1	2017	5
SCORE	EXERCISE, NUTRITION, & WEIGHT	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.83	Workers who Walk to Work	percent	1.3	3.1	2.1	2.7	2013-2017	1
2.61	Adults 20+ who are Obese	percent	35.8	30.5	32.8	28.5	2015	6
2.00	Child Food Insecurity Rate	percent	20		17.7	17.9	2016	7
1.94	Food Insecure Children Likely Ineligible for Assistance	percent	28		29	20	2016	7
1.67	Access to Exercise Opportunities	percent	68.3		75.3	83.9	2019	6
1.67	Food Insecurity Rate	percent	13.8		13.7	12.9	2016	7
1.67	Grocery Store Density	stores/ 1,000 population	0.2				2014	19
1.58	Health Behaviors Ranking	ranking	61				2019	6
1.33	Farmers Market Density	markets/ 1,000 population	0				2016	19
1.33	Fast Food Restaurant Density	restaurants/ 1,000 population	0.5				2014	19
1.17	Adults 20+ who are Sedentary	percent	25.3	32.6	25.1	22.2	2015	6
1.17	People 65+ with Low Access to a Grocery Store	percent	0.9				2015	19
1.17	Recreation and Fitness Facilities	facilities/ 1,000 population	0.1				2014	19
1.06	SNAP Certified Stores	stores/ 1,000 population	0.9				2016	19
1.00	Children with Low Access to a Grocery Store	percent	0.8				2015	19
1.00	Households with No Car and Low Access to a Grocery Store	percent	1.2				2015	19

	Low-Income and Low Access to							
1.00	a Grocery Store	percent	1.4				2015	19
	People with Low Access to a	·						
1.00	Grocery Store	percent	3.7				2015	19
0.89	Food Environment Index		8.1		7.1	7.7	2019	6
			HENRY				MEASUREMENT	
SCORE	HEART DISEASE & STROKE	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Atrial Fibrillation: Medicare							
2.83	Population	percent	9.6		8.4	8.4	2017	5
	Age-Adjusted Death Rate due							
	to Cerebrovascular Disease							_
2.78	(Stroke)	deaths/ 100,000 population	65.5	34.8	39.6	37.5	2015-2017	4
2.00	Heart Failure: Medicare Population	norcont	14.8		15	13.9	2017	5
	·	percent						
2.00	Stroke: Medicare Population Ischemic Heart Disease:	percent	3.9		3.7	3.8	2017	5
1.94	Medicare Population	percent	28.8		28.3	26.9	2017	5
1.54	Age-Adjusted Death Rate due	deaths/ 100,000 population	20.0		20.3	20.5	2017	3
1.89	to Heart Attack	35+ years	97.9		75.6		2015	14
	Hypertension: Medicare	·						
1.72	Population	percent	60.1		59.4	57.1	2017	5
	Age-Adjusted Death Rate due							
1.61	to Coronary Heart Disease	deaths/ 100,000 population	103.8	103.4	101.9	94.8	2015-2017	4
	Hyperlipidemia: Medicare							
0.67	Population	percent	37.9		41.3	40.7	2017	5
	IMMUNIZATIONS &		HENRY				MEASUREMENT	
SCORE	INFECTIOUS DISEASES	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Age-Adjusted Death Rate due							
2.61	to Influenza and Pneumonia	deaths/ 100,000 population	24.9		13.4	14.3	2015-2017	4
2.11	Hepatitis C Prevalence	Rate per 100,000 population	179.5		126.1		2017	9
0.94	Gonorrhea Incidence Rate	cases/ 100,000 population	38.8		142.8	145.8	2016	13
0.72	Chlamydia Incidence Rate	cases/ 100,000 population	210.3		466	497.3	2016	13

	Salmonella Infection Incidence							
0.72	Rate	cases/ 100,000 population	0	11.4	11.1		2017	9
	MATERNAL, FETAL & INFANT		HENRY				MEASUREMENT	
SCORE	HEALTH	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Mothers who Smoked During							
2.53	Pregnancy	percent	24.7	1.4	13.5	6.9	2017	9
2.53	Preterm Births (OE)	percent	11.3	9.4	9.9	9.9	2017	9
2.19	Babies with Low Birth Weight	percent	9.1	7.8	8.3	8.3	2017	9
1.83	Infant Mortality Rate	deaths/ 1,000 live births	8.3	6	7.1	5.9	2012-2016	9
		live births/ 1,000 females aged						
1.72	Teen Birth Rate: 15-19	15-19	26		22.8		2017	9
	Mothers who Received Early							
1.58	Prenatal Care	percent	72.7	77.9	68.6	77.3	2017	9
	MENTAL HEALTH & MENTAL		HENRY				MEASUREMENT	
SCORE	DISORDERS	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Age-Adjusted Death Rate due							
2.36	to Suicide	deaths/ 100,000 population	17.9	10.2	15.4	13.6	2015-2017	4
	Age-Adjusted Death Rate due							
2.17	to Alzheimer's Disease	deaths/ 100,000 population	36		34.4	30.3	2015-2017	4
	Alzheimer's Disease or							
2.17	Dementia: Medicare	norcant	11.2		11.1	10.9	2017	5
	Population	percent						
2.00	Mental Health Provider Rate  Depression: Medicare	providers/ 100,000 population	82.5		149.5	228.7	2018	6
1.56	Population	percent	19.7		20.3	17.9	2017	5
1.30	Poor Mental Health: Average	percent	13.7		20.5	17.5	2017	J
1.50	Number of Days	days	4.1		4.3	3.8	2016	6
1.33	Frequent Mental Distress	percent	12.3		13.3	15	2016	6
	,	F	_			-		-
			LIENDY				NAFACLIDENAFAIT	
SCORE	MORTALITY DATA	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
JCORE	Age-Adjusted Death Rate due	OMITS	COUNTY	TIF ZUZU	iliuialia	0.3.	FLNIOD	Jource
	to Chronic Lower Respiratory							
2.83	Diseases	deaths/ 100,000 population	70.3		55	41	2015-2017	4

	APPENDIX B Age-Adjusted Death Rate due							
2.78	to Breast Cancer	deaths/ 100,000 females	26.3	20.7	21.4	20.9	2011-2015	11
2.70	Age-Adjusted Death Rate due	acatris, 100,000 jerriales	20.5	20.7	21.4	20.5	2011-2013	11
	to Cerebrovascular Disease							
2.78	(Stroke)	deaths/ 100,000 population	65.5	34.8	39.6	37.5	2015-2017	4
	Age-Adjusted Death Rate due							
2.61	to Diabetes	deaths/ 100,000 population	43.1		26.5	21.2	2015-2017	4
	Age-Adjusted Death Rate due							
2.61	to Influenza and Pneumonia	deaths/ 100,000 population	24.9		13.4	14.3	2015-2017	4
	Age-Adjusted Death Rate due							
2.50	to Kidney Disease	deaths/ 100,000 population	20.6		18.6	13.2	2015-2017	4
	Age-Adjusted Death Rate due							
2.36	to Suicide	deaths/ 100,000 population	17.9	10.2	15.4	13.6	2015-2017	4
	Age-Adjusted Death Rate due							
2.28	to Colorectal Cancer	deaths/ 100,000 population	16.2	14.5	15.9	14.5	2011-2015	11
	Age-Adjusted Death Rate due							
2.17	to Alzheimer's Disease	deaths/ 100,000 population	36		34.4	30.3	2015-2017	4
	Age-Adjusted Death Rate due							
2.06	to Cancer	deaths/ 100,000 population	190.2	161.4	181	163.5	2011-2015	11
		(400.000	0561.0		0007.5	6900.	2045 2245	
2.00	Premature Death	years/ 100,000 population	8561.3		8237.6	6	2015-2017	6
1.00	Age-Adjusted Death Rate due	deaths/ 100,000 population	07.0		75.0		2015	1.4
1.89	to Heart Attack	35+ years	97.9		75.6		2015	14
1.83	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	56.7	45.5	53.4	43.4	2011-2015	11
1.83	Infant Mortality Rate	deaths/ 1,000 live births	8.3	6	7.1	5.9	2012-2016	9
1.83	Life Expectancy	years	76		77.1	79.1	2015-2017	6
	Age-Adjusted Death Rate due							
1.81	to Unintentional Poisonings	deaths/ 100,000 population	23.6		24.3	19.3	2015-2017	4
	Age-Adjusted Death Rate due							
4	to Motor Vehicle Traffic	1 11 /400 000	4	40.5	44 =		2011 2212	
1.75	Collisions	deaths/ 100,000 population	14.3	12.4	11.7	11	2014-2016	4
	Age-Adjusted Death Rate due							
1.61	to Coronary Heart Disease	deaths/ 100,000 population	103.8	103.4	101.9	94.8	2015-2017	4
1.58	Mortality Ranking	ranking	52				2019	6
	Age-Adjusted Death Rate due							
1.39	to Unintentional Injuries	deaths/ 100,000 population	50.6	36.4	52.7	46.7	2015-2017	4

	APPENDIA D							
	Alcohol-Impaired Driving							
1.00	Deaths	percent	15		20.8	28.6	2013-2017	6
	Death Rate due to Drug							_
0.33	Poisoning	deaths/ 100,000 population	16.4		23.2	19.2	2015-2017	6
0.22	Age-Adjusted Death Rate due to Prostate Cancer	deaths/ 100,000 males	13.3	21.8	21	20.1	2010-2014	11
			HENRY				MEASUREMENT	
SCORE	OLDER ADULTS & AGING	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Atrial Fibrillation: Medicare						_	
2.83	Population	percent	9.6		8.4	8.4	2017	5
	Age-Adjusted Death Rate due							
2.17	to Alzheimer's Disease	deaths/ 100,000 population	36		34.4	30.3	2015-2017	4
	Alzheimer's Disease or							
	Dementia: Medicare							
2.17	Population	percent	11.2		11.1	10.9	2017	5
	Heart Failure: Medicare							
2.00	Population	percent	14.8		15	13.9	2017	5
2.00	Stroke: Medicare Population	percent	3.9		3.7	3.8	2017	5
1.94	Diabetes: Medicare Population	percent	29.1		28.1	27.2	2017	5
	Ischemic Heart Disease:							
1.94	Medicare Population	percent	28.8		28.3	26.9	2017	5
1.78	COPD: Medicare Population	percent	14.1		14.4	11.7	2017	5
	People 65+ Living Below							
1.78	Poverty Level	percent	8.5		7.5	9.3	2013-2017	1
	Hypertension: Medicare							_
1.72	Population	percent	60.1		59.4	57.1	2017	5
	Rheumatoid Arthritis or							
1.61	Osteoarthritis: Medicare Population	narcant	33.6		34.5	33.1	2017	5
1.01	Depression: Medicare	percent	33.0		34.3	33.1	2017	J
1.56	Population	percent	19.7		20.3	17.9	2017	5
	Chronic Kidney Disease:	F 2. 20.1.						
1.50	Medicare Population	percent	22.7		25.1	24	2017	5
1.39	Asthma: Medicare Population	percent	4.8		5.2	5.1	2017	5
	Mammography Screening:	·						
1.28	Medicare Population	percent	63.9		62.3	63.2	2015	16

SCORE	PUBLIC SAFETY	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
			HENRY				MEASUREMENT	
0.33	Poisoning	deaths/ 100,000 population	16.4		23.2	19.2	2015-2017	6
0.83	Severe Housing Problems  Death Rate due to Drug	percent	12.8		13.7	18.4	2011-2015	6
1.39	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/ 100,000 population	50.6	36.4	52.7	46.7	2015-2017	4
1.81	Age-Adjusted Death Rate due to Unintentional Poisonings	deaths/ 100,000 population	23.6		24.3	19.3	2015-2017	4
SCORE	PREVENTION & SAFETY	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
1.11	Osteoporosis: Medicare Population	percent	5.3		6.2	6.4	2017	5
1.50	Chronic Kidney Disease: Medicare Population	percent	22.7		25.1	24	2017	5
1.61	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	33.6		34.5	33.1	2017	5
2.50	Age-Adjusted Death Rate due to Kidney Disease	deaths/ 100,000 population	20.6		18.6	13.2	2015-2017	4
SCORE	OTHER CHRONIC DISEASES	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.67	Population	percent	37.9		41.3	40.7	2017	5
0.72	Population  Hyperlipidemia: Medicare	percent	89.7		86.1	85.7	2015	16
1.11	Osteoporosis: Medicare Population Diabetic Monitoring: Medicare	percent	5.3		6.2	6.4	2017	5
1.11	Cancer: Medicare Population	percent	7.3		7.8	8.2	2017	5
1.17	People 65+ with Low Access to a Grocery Store	percent	0.9				2015	19
1.22	People 65+ Living Alone	percent	26.5		27.7	26.2	2013-2017	1

	APPENDIX B							İ
	Age-Adjusted Death Rate due							
1.75	to Motor Vehicle Traffic Collisions	deaths/ 100,000 population	14.3	12.4	11.7	11	2014-2016	4
1./5	Alcohol-Impaired Driving	deaths/ 100,000 population	14.5	12.4	11./	11	2014-2016	4
1.00	Deaths	percent	15		20.8	28.6	2013-2017	6
0.89	Child Abuse Rate	cases/ 1,000 children	11		17.1	20.0	2015	3
0.64	Violent Crime Rate		15.9		385.1	386.5	2013	6
0.64	Violent Crime Rate	crimes/ 100,000 population	15.9		365.1	380.5	2014-2016	0
			HENRY				MEASUREMENT	
SCORE	RESPIRATORY DISEASES	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Age-Adjusted Death Rate due							
2.83	to Chronic Lower Respiratory Diseases	deaths/ 100,000 population	70.3		55	41	2015-2017	4
2.03		αεαττική 100,000 μομαιατίστι	70.3		33	41	2013-2017	4
2.64	Age-Adjusted Death Rate due	de the (400 000 cm butter	240		42.4	112	2015 2017	
2.61	to Influenza and Pneumonia	deaths/ 100,000 population	24.9		13.4	14.3	2015-2017	4
2.50	Lung and Bronchus Cancer Incidence Rate	cases/ 100,000 population	81.7		72.8	60.2	2011-2015	11
2.30	Age-Adjusted Death Rate due	cases/ 100,000 population	01.7		72.0	00.2	2011-2013	11
1.83	to Lung Cancer	deaths/ 100,000 population	56.7	45.5	53.4	43.4	2011-2015	11
1.78	COPD: Medicare Population	percent	14.1		14.4	11.7	2017	5
1.39	Asthma: Medicare Population	percent	4.8		5.2	5.1	2017	5
		,			_		-	
			HENRY				MEASUREMENT	
SCORE	SOCIAL ENVIRONMENT	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.50	Mean Travel Time to Work	minutes	26.8	111 2020	23.4	26.4	2013-2017	1
2.50	Children Living Below Poverty	iiiiiutes	20.8		23.4	20.4	2013-2017	<b>T</b>
2.33	Level	percent	25		20.4	20.3	2013-2017	1
2.33	Population 16+ in Civilian Labor	percent	23		20.1	20.5	2013 2017	
2.22	Force	percent	54		63.8	63	2013-2017	1
	Young Children Living Below	·						
2.22	Poverty Level	percent	28.9		23.7	22.5	2013-2017	1
						1935		
2.14	Median Housing Unit Value	dollars	94800		130200	00	2013-2017	1
						5765		
2.00	Median Household Income	dollars	46131		52182	2	2013-2017	1
2.00	People Living Below Poverty		16.4		1.6.6	146	2042 2047	_
2.00	Level	percent	16.1		14.6	14.6	2013-2017	1

	AFFENDIA					3117		
2.00	Per Capita Income	dollars	23293		27305	7	2013-2017	1
	Households with an Internet							
1.92	Subscription	percent	69.1		75.9	78.7	2013-2017	1
1.02	Female Population 16+ in	n a va a a t	F2		F0.0	F0.3	2012 2017	
1.83	Civilian Labor Force People 25+ with a Bachelor's	percent	53		58.9	58.2	2013-2017	1
1.83	Degree or Higher	percent	16.5		25.3	30.9	2013-2017	1
1.83	Single-Parent Households	percent	33.9		33.6	33.3	2013-2017	1
1.75	Households with One or More Types of Computing Devices	percent	81		85.5	87.2	2013-2017	1
1.58	Social and Economic Factors Ranking	ranking	54				2019	6
1.28	Homeownership	percent	62.4		61.2	56	2013-2017	1
1.22	People 65+ Living Alone	percent	26.5		27.7	26.2	2013-2017	1
1.03	Median Household Gross Rent	dollars	687		782	982	2013-2017	1
0.89	Child Abuse Rate	cases/ 1,000 children	11		17.1		2015	3
0.89	Voter Turnout: Presidential Election	percent	66		58		2016	8
0.83	People 25+ with a High School Degree or Higher	percent	88.7		88.3	87.3	2013-2017	1
0.81	Mortgaged Owners Median Monthly Household Costs	dollars	968		1109	1515	2013-2017	1
0.81	Persons with Health Insurance	percent	92	100	90.4		2017	15
0.72	Social Associations	membership associations/ 10,000 population	15.1		12.3	9.3	2016	6
0.64	Median Monthly Owner Costs for Households without a Mortgage	dollars	346		389	474	2013-2017	1
0.39	Linguistic Isolation	percent	0.1		1.7	4.5	2013-2017	1
0.39	Total Employment Change	percent	6.7		2.2	2.1	2015-2016	18
SCORE	SUBSTANCE ABUSE	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	Liquor Store Density	stores/ 100,000 population	18.5		12.5	10.5	2016	18
	1. 2. 2.2. 2 = 2						====	

	Mothers who Smoked During							
2.53	Pregnancy	percent	24.7	1.4	13.5	6.9	2017	9
2.50	Adults who Smoke	percent	21.3	12	21.1	17	2016	6
2.30	Substance Abuse Treatment	percent	21.5	12	21.1	17	2010	U
1.94	Rate: Alcohol	Rate per 100,000 population	247		197.1		2015	9
1.58	Health Behaviors Ranking	ranking	61				2019	6
1.28	Non-Fatal Emergency Department Visits due to Opioid Overdoses	Rate per 100,000 population	68.1		122.5		2017	9
1.20	Alcohol-Impaired Driving	Rate per 100,000 population	08.1		122.5		2017	<u> </u>
1.00	Deaths	percent	15		20.8	28.6	2013-2017	6
0.83	Adults who Drink Excessively	percent	16.8	25.4	18.6	18	2016	6
0.33	Death Rate due to Drug Poisoning	deaths/ 100,000 population	16.4		23.2	19.2	2015-2017	6
			HENRY				MEASUREMENT	
SCORE	TRANSPORTATION	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.83	Workers who Walk to Work	percent	1.3	3.1	2.1	2.7	2013-2017	1
2.50	Mean Travel Time to Work	minutes	26.8		23.4	26.4	2013-2017	1
	Workers Commuting by Public							
2.44	Transportation	percent	0.2	5.5	1	5.1	2013-2017	1
2.28	Solo Drivers with a Long Commute	percent	39.2		30.7	35.2	2013-2017	6
1.83	Workers who Drive Alone to Work	percent	85.3		83	76.4	2013-2017	1
1.75	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions	deaths/ 100,000 population	14.3	12.4	11.7	11	2014-2016	4
	Households with No Car and							
1.00	Low Access to a Grocery Store	percent	1.2				2015	19
0.33	Households without a Vehicle	percent	4.1		6.7	8.8	2013-2017	1
		F = 20			2.7			_
			HENRY				MEASUREMENT	
SCORE	WELLNESS & LIFESTYLE	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
1.83	Life Expectancy	years	76		77.1	79.1	2015-2017	6

1.33	Poor Physical Health: Average Number of Days	days	3.8		3.9	3.7	2016	6
1.33	Self-Reported General Health Assessment: Poor or Fair	percent	16.3		17.7	16	2016	6
1.00	Frequent Physical Distress	percent	11.6		11.9	15	2016	6
0.67	Insufficient Sleep	percent	31.6		36	38	2016	6
			HENRY				MEASUREMENT	
SCORE	WOMEN'S HEALTH	UNITS	HENRY COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
SCORE	WOMEN'S HEALTH  Age-Adjusted Death Rate due	UNITS		HP2020	Indiana	U.S.		Source
SCORE		UNITS  deaths/ 100,000 females		<b>HP2020</b> 20.7	Indiana 21.4	<b>U.S.</b> 20.9		Source
	Age-Adjusted Death Rate due	011110	COUNTY				PERIOD	
	Age-Adjusted Death Rate due to Breast Cancer	011110	COUNTY				PERIOD	

# PREBLE COUNTY, OHIO

SCORE	ACCESS TO HEALTH SERVICES	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.50	Primary Care Provider Rate	providers/ 100,000 population	19.4		76.7	75.4	2016	6
2.39	Dentist Rate	dentists/ 100,000 population	17		61.6	68.4	2017	6
2.00	Mental Health Provider Rate	providers/ 100,000 population	73		212.3	228.7	2018	6
2.00	Non-Physician Primary Care Provider Rate	providers/ 100,000 population	38.9		86.2	88.2	2018	6
1.58	Clinical Care Ranking	ranking	65				2019	6
1.53	Children with Health Insurance	percent	95.1	100	95.4		2017	17
1.22	Preventable Hospital Stays: Medicare Population	discharges/ 1,000 Medicare enrollees	53		57	49.4	2015	18
0.81	Adults with Health Insurance: 18-64	percent	92.6	100	91.9		2017	17

0.81	Persons with Health Insurance	percent	93.3	100	92.9		2017	17
SCORE	CANCER	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.78	Age-Adjusted Death Rate due to Prostate Cancer	deaths/ 100,000 males	25.1	21.8	19.5	19.5	2011-2015	8
2.67	Colorectal Cancer Incidence Rate	cases/ 100,000 population	50.2	39.9	41.7	39.2	2011-2015	8
2.11	Lung and Bronchus Cancer Incidence Rate	cases/ 100,000 population	75.7		69.3	60.2	2011-2015	8
2.06	Age-Adjusted Death Rate due to Cancer	deaths/ 100,000 population	184.5	161.4	179.3	163.5	2011-2015	8
2.00	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/ 100,000 population	17.1	14.5	15.9	14.5	2011-2015	8
1.72	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	51.3	45.5	51.7	43.4	2011-2015	8
1.72	All Cancer Incidence Rate	cases/ 100,000 population	460.9		456.3	441.2	2011-2015	8
1.72	Mammography Screening: Medicare Population	percent	58.2		62.4	63.2	2015	18
1.67	Oral Cavity and Pharynx Cancer Incidence Rate	cases/ 100,000 population	12.6		11.7	11.6	2011-2015	8
1.44	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	21.7	20.7	22.9	20.9	2011-2015	8
0.94	Cancer: Medicare Population	percent	7.4		8.3	8.2	2017	5
0.72	Prostate Cancer Incidence Rate	cases/ 100,000 males	92.1		108	109	2011-2015	8
0.50	Breast Cancer Incidence Rate	cases/ 100,000 females	105.2		126.2	124.7	2011-2015	8
SCORE	CHILDREN'S HEALTH	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
1.58	Children who are Overweight or Obese: 3rd Graders	percent	37.1				2009-2010	12
1.53	Children with Health Insurance	percent	95.1	100	95.4		2017	17
1.33	Blood Lead Levels in Children (>5 micrograms per deciliter)	percent	2.8		4.1		2013	10

4 00	Children days and the But		20.4		20.2	47.0	2016	_
1.33	Child Food Insecurity Rate	percent	20.1		20.3	17.9	2016	7
	Food Insecure Children Likely							
1.22	Ineligible for Assistance	percent	24		34	20	2016	7
1.06	Child Abuse Rate (HP2020)	cases/ 1,000 children	5.6		7.3		2017	3
	Children with Low Access to a							
1.00	Grocery Store	percent	0.1				2015	21
			PREBLE				MEASUREMENT	
SCORE	COUNTY HEALTH RANKINGS	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
1.75	Mortality Ranking	ranking	75				2019	6
1.58	Clinical Care Ranking	ranking	65				2019	6
1.58	Morbidity Ranking	ranking	50				2019	6
1.42	Health Behaviors Ranking	ranking	23				2019	6
1.42	Physical Environment Ranking	ranking	29				2019	6
	Social and Economic Factors							
1.42	Ranking	ranking	32				2019	6
			PREBLE				MEASUREMENT	
SCORE	DIABETES	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
SCORE 2.83	DIABETES Adults 20+ with Diabetes	UNITS percent		HP2020	<b>Ohio</b> 11.7	<b>U.S.</b> 10.2		<b>Source</b>
			COUNTY	HP2020			PERIOD	
	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population		COUNTY	HP2020			PERIOD	
<b>2.83 1.94</b>	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to	percent percent	13.7 84.4	HP2020	11.7 85.4	10.2 85.7	2015 2015	6 18
2.83 1.94 1.83	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to Diabetes	percent  percent  deaths/ 100,000 population	13.7 84.4 25.9	HP2020	11.7 85.4 25	10.2 85.7 21.2	PERIOD 2015 2015 2015-2017	6 18 4
<b>2.83 1.94</b>	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to	percent percent	13.7 84.4	HP2020	11.7 85.4	10.2 85.7	2015 2015	6 18
2.83 1.94 1.83	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to Diabetes	percent  percent  deaths/ 100,000 population	13.7 84.4 25.9	HP2020	11.7 85.4 25	10.2 85.7 21.2	PERIOD 2015 2015 2015-2017	6 18 4
2.83 1.94 1.83	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to Diabetes	percent  percent  deaths/ 100,000 population	13.7 84.4 25.9	HP2020	11.7 85.4 25	10.2 85.7 21.2	PERIOD 2015 2015 2015-2017	6 18 4
2.83 1.94 1.83	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to Diabetes	percent  percent  deaths/ 100,000 population	13.7 84.4 25.9 29.1	HP2020	11.7 85.4 25	10.2 85.7 21.2	PERIOD  2015  2015  2015-2017  2017	6 18 4
1.94 1.83 1.83	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to Diabetes Diabetes: Medicare Population	percent  percent  deaths/ 100,000 population  percent	13.7 84.4 25.9 29.1 PREBLE		11.7 85.4 25 27.7	10.2 85.7 21.2 27.2	2015 2015 2015 2015-2017 2017 MEASUREMENT	6 18 4 5
2.83 1.94 1.83 1.83 SCORE 1.89	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to Diabetes Diabetes: Medicare Population  ECONOMY	percent  percent  deaths/ 100,000 population percent  UNITS  stores/ 1,000 population	25.9 29.1 PREBLE COUNTY		11.7 85.4 25 27.7	10.2 85.7 21.2 27.2	2015 2015 2015 2015-2017 2017  MEASUREMENT PERIOD 2016	6 18 4 5 <b>Source</b> 21
2.83 1.94 1.83 1.83	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to Diabetes Diabetes: Medicare Population  ECONOMY SNAP Certified Stores	percent  percent  deaths/ 100,000 population percent  UNITS	25.9 29.1 PREBLE COUNTY		11.7 85.4 25 27.7 <b>Ohio</b>	10.2 85.7 21.2 27.2 <b>U.S.</b>	2015 2015 2015 2017 2017 MEASUREMENT PERIOD	6 18 4 5
2.83 1.94 1.83 1.83 SCORE 1.89	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to Diabetes Diabetes: Medicare Population  ECONOMY SNAP Certified Stores Population 16+ in Civilian Labor Force	percent  percent  deaths/ 100,000 population percent  UNITS  stores/ 1,000 population  percent	25.9 29.1 PREBLE COUNTY 0.7		11.7 85.4 25 27.7 <b>Ohio</b> 63.1 1351	10.2 85.7 21.2 27.2 <b>U.S.</b> 63 1935	2015 2015 2015 2015-2017 2017  MEASUREMENT PERIOD 2016 2013-2017	6 18 4 5 <b>Source</b> 21
2.83 1.94 1.83 1.83 SCORE 1.89	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to Diabetes Diabetes: Medicare Population  ECONOMY  SNAP Certified Stores Population 16+ in Civilian Labor	percent  percent  deaths/ 100,000 population percent  UNITS  stores/ 1,000 population	25.9 29.1 PREBLE COUNTY		11.7 85.4 25 27.7 <b>Ohio</b> 63.1 1351 00	10.2 85.7 21.2 27.2 <b>U.S.</b> 63 1935 00	2015 2015 2015 2015-2017 2017  MEASUREMENT PERIOD 2016	6 18 4 5 <b>Source</b> 21
2.83 1.94 1.83 1.83 SCORE 1.89	Adults 20+ with Diabetes Diabetic Monitoring: Medicare Population Age-Adjusted Death Rate due to Diabetes Diabetes: Medicare Population  ECONOMY SNAP Certified Stores Population 16+ in Civilian Labor Force	percent  percent  deaths/ 100,000 population percent  UNITS  stores/ 1,000 population  percent	25.9 29.1 PREBLE COUNTY 0.7		11.7 85.4 25 27.7 <b>Ohio</b> 63.1 1351	10.2 85.7 21.2 27.2 <b>U.S.</b> 63 1935	2015 2015 2015 2015-2017 2017  MEASUREMENT PERIOD 2016 2013-2017	6 18 4 5 <b>Source</b> 21

	APPENDIX D						
	Female Population 16+ in						
1.61	Civilian Labor Force	percent	57	58.9	58.2	2013-2017	1
	Unemployed Workers in Civilian						
1.61	Labor Force	percent	4.5	4.7	4.1	February 2019	19
	Social and Economic Factors						
1.42	Ranking	ranking	32			2019	6
1.33	Child Food Insecurity Rate	percent	20.1	20.3	17.9	2016	7
	Median Monthly Owner Costs						
	for Households without a						
1.31	Mortgage	dollars	431	458	474	2013-2017	1
1.25	Median Household Gross Rent	dollars	706	764	982	2013-2017	1
	Food Insecure Children Likely						
1.22	Ineligible for Assistance	percent	24	34	20	2016	7
1.22	Homeowner Vacancy Rate	percent	1.6	1.7	1.7	2013-2017	1
		μοσ		5240	5765		
1.22	Median Household Income	dollars	52661	7	2	2013-2017	1
1.22	Total Employment Change	percent	1.7	1.5	2.1	2015-2016	20
	People Living 200% Above	р					
1.06	Poverty Level	percent	68.4	67.5	67.2	2013-2017	1
	Low-Income and Low Access to						
1.00	a Grocery Store	percent	0.2			2015	21
2.00	Young Children Living Below	percent	0.2			2013	
1.00	Poverty Level	percent	21	25.1	22.5	2013-2017	1
0.94	Severe Housing Problems	percent	12	14.5	18.4	2011-2015	6
0.0.		percent		2 1.3	10	2011 2013	
0.03	Persons with Disability Living in	norcont	24.1	20.4	27.1	2012 2017	1
0.92	Poverty (5-year)	percent	24.1	30.4	27.1	2013-2017	1
	Households with Cash Public						
0.89	Assistance Income	percent	2.2	3.1	2.6	2013-2017	1
	Renters Spending 30% or More						
0.89	of Household Income on Rent	percent	43.2	46.7	50.6	2013-2017	1
	Families Living Below Poverty						
0.83	Level	percent	8.8	10.8	10.5	2013-2017	1
	People Living Below Poverty						
0.83	Level	percent	12.4	14.9	14.6	2013-2017	1
	Mortgaged Owners Median						
0.75	Monthly Household Costs	dollars	1091	1247	1515	2013-2017	1

	Children Living Below Poverty							
0.72	Level	percent	16.6		21.3	20.3	2013-2017	1
0.67	Food Insecurity Rate	percent	12.3		15.1	12.9	2016	7
	People 65+ Living Below Poverty	·						
0.67	Level	percent	6.4		8	9.3	2013-2017	1
0.61	Homeownership	percent	68.8		59.1	56	2013-2017	1
0.50	Income Inequality		0.4		0.5	0.5	2013-2017	1
	Students Eligible for the Free							
0.33	Lunch Program	percent	32.2		40.2	42.6	2015-2016	9
			PREBLE				MEASUREMENT	
SCORE	EDUCATION	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
	People 25+ with a Bachelor's							
2.22	Degree or Higher	percent	14.4		27.2	30.9	2013-2017	1
1.72	Student-to-Teacher Ratio	students/ teacher	17.4		17.6	16.5	2016-2017	9
	8th Grade Students Proficient in							
1.50	Math	percent	45.4		22.3		2016-2017	11
1.50	8th Grade Students Proficient in Reading	percent	51.7		25.7		2016-2017	11
1.50	4th Grade Students Proficient in	ρειτεπι	31.7		23.7		2010-2017	11
1.17	Reading	percent	67.4		38.7		2016-2017	11
	People 25+ with a High School	·						
1.17	Degree or Higher	percent	89.4		89.8	87.3	2013-2017	1
	4th Grade Students Proficient in	·						
1.00	Math	percent	84.8		47.7		2016-2017	11
0.92	High School Graduation	percent	93.4	87	90.6	84.6	2016-2017	11
			PREBLE				MEASUREMENT	
SCORE	ENVIRONMENT	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
2.50	Access to Exercise Opportunities	percent	41.8		84.1	83.9	2019	6
2.00	Grocery Store Density	stores/ 1,000 population	0.1				2014	21
2.00	Houses Built Prior to 1950	percent	30.8		26.8	18	2013-2017	1
1.94	Recreation and Fitness Facilities	facilities/ 1,000 population	0				2014	21
1.89	SNAP Certified Stores	stores/ 1,000 population	0.7				2016	21

SCORE	EXERCISE, NUTRITION, & WEIGHT	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
0.56	Asthma: Medicare Population	percent	4.1		5.2	5.1	2017	5
1.33	Blood Lead Levels in Children (>5 micrograms per deciliter)	percent	2.8		4.1		2013	10
1.42	Physical Environment Ranking	ranking	29				2019	6
SCORE	ENVIRONMENTAL & OCCUPATIONAL HEALTH	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
0.17	Food Environment Index		8.5		6.7	7.7	2019	6
0.50	Liquor Store Density	stores/ 100,000 population	2.4		6.7	10.5	2016	20
0.94	Severe Housing Problems	percent	12		14.5	18.4	2011-2015	6
1.00	People with Low Access to a Grocery Store	percent	0.7				2015	21
1.00	People 65+ with Low Access to a Grocery Store	percent	0.2				2015	21
1.00	Low-Income and Low Access to a Grocery Store	percent	0.2				2015	21
1.00	Children with Low Access to a Grocery Store	percent	0.5				2014	21
1.06	Fast Food Restaurant Density	restaurants/ 1,000 population	0.5		2331		2013	21
1.22	Daily Dose of UV Irradiance	Joule per square meter	2313		2351		2014-2016	10
1.31 1.25	Annual Ozone Air Quality  Annual Particle Pollution	grade grade	C A				2014-2016 2014-2016	2
1.33	Households with No Car and Low Access to a Grocery Store	percent	2.3				2015	21
1.33 1.33	Blood Lead Levels in Children (>5 micrograms per deciliter)  Farmers Market Density	percent markets/ 1,000 population	2.8		4.1		2013 2016	10 21
1.39	Number of Extreme Heat Events	events	6				2016	10
1.42	Physical Environment Ranking	ranking	29				2019	6
1.61	Worse	months per year	5				2016	10

2.56	Adults 20+ who are Sedentary	percent	31	32.6	24.6	22.2	2015	6
2.50	Access to Exercise Opportunities	percent	41.8	0.1	84.1	83.9	2019	6
2.28	Workers who Walk to Work	percent	1.9	3.1	2.2	2.7	2013-2017	1
2.00	Grocery Store Density	stores/ 1,000 population	0.1				2014	21
1.94	Recreation and Fitness Facilities	facilities/ 1,000 population	0				2014	21
1.89	SNAP Certified Stores	stores/ 1,000 population	0.7				2016	21
	Children who are Overweight or							
1.58	Obese: 3rd Graders	percent	37.1				2009-2010	12
1.42	Health Behaviors Ranking	ranking	23				2019	6
1.33	Child Food Insecurity Rate	percent	20.1		20.3	17.9	2016	7
1.33	Farmers Market Density	markets/ 1,000 population	0				2016	21
1.33	Households with No Car and Low Access to a Grocery Store	percent	2.3				2015	21
1.22	Food Insecure Children Likely Ineligible for Assistance	percent	24		34	20	2016	7
1.06	Fast Food Restaurant Density	restaurants/ 1,000 population	0.5				2014	21
1.00	Adults 20+ who are Obese	percent	30.1	30.5	31.8	28.5	2015	6
1.00	Children with Low Access to a Grocery Store	percent	0.1				2015	21
1.00	Low-Income and Low Access to a Grocery Store	percent	0.2				2015	21
1.00	People 65+ with Low Access to a Grocery Store	percent	0.2				2015	21
1.00	People with Low Access to a Grocery Store	percent	0.7				2015	21
0.67	Food Insecurity Rate	percent	12.3		15.1	12.9	2016	7
0.17	Food Environment Index		8.5		6.7	7.7	2019	6
SCORE	HEART DISEASE & STROKE	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.61	Heart Failure: Medicare Population	percent	18.1		14.8	13.9	2017	5
2.28	Ischemic Heart Disease: Medicare Population	percent	30.5		27.9	26.9	2017	5

	APPENDIX B				1			
	Age-Adjusted Death Rate due to	deaths/ 100,000 population 35+						
1.94	Heart Attack	years	78.8		67		2015	10
	Age-Adjusted Death Rate due to							
1.89	Coronary Heart Disease	deaths/ 100,000 population	109.7	103.4	104.8	94.8	2015-2017	4
	Hyperlipidemia: Medicare							
1.72	Population	percent	43.8		42.5	40.7	2017	5
	Atrial Fibrillation: Medicare							
1.50	Population	percent	8.7		8.9	8.4	2017	5
	Hypertension: Medicare							
1.44	Population	percent	58.3		59.8	57.1	2017	5
	Age-Adjusted Death Rate due to							
	Cerebrovascular Disease		20.0				2215 2215	_
1.39	(Stroke)	deaths/ 100,000 population	39.9	34.8	41.4	37.5	2015-2017	4
1.00	Stroke: Medicare Population	percent	3.4		3.8	3.8	2017	5
	IMMUNIZATIONS &		PREBLE				MEASUREMENT	
SCORE	INFECTIOUS DISEASES	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
	Salmonella Infection Incidence							
2.28	Rate	cases/ 100,000 population	14.5	11.4	11.8		2016	13
	Age-Adjusted Death Rate due to							
1.44	Influenza and Pneumonia	deaths/ 100,000 population	15.4		16.2	14.6	2014-2016	4
1.44	Gonorrhea Incidence Rate	cases/ 100,000 population	60.6		206.6		2017	13
1.11		cases/ 100,000 population	169.7		528.9			
	Chlamydia Incidence Rate					2.0	2017	13
0.58	Tuberculosis Incidence Rate	cases/ 100,000 population	0	1	1.3	2.8	2017	13
	MATERNAL, FETAL & INFANT		PREBLE				MEASUREMENT	
SCORE	HEALTH	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
2.53	Infant Mortality Rate	deaths/ 1,000 live births	11.2	6	7.5	6	2012	14
2.17	Babies with Low Birth Weight	percent	10.8	7.8		8.3	2017	14
	Mothers who Smoked During							
1.97	Pregnancy	percent	21.3	1.4	17.8	9.2	2010	14
		live births/ 1,000 females aged						
1.86	Teen Birth Rate: 15-17	15-17	11				2017	14
	Babies with Very Low Birth							
1.58	Weight	percent	0.2	1.4	0.1	1.4	2017	14
1.50	Preterm Births							

	Mothers who Received Early		1					
1.31	Prenatal Care	norcont	75.3	77.9	73	73.1	2010	14
1.51	Prenatal Care	percent pregnancies/ 1,000 females	75.5	77.9	/5	75.1	2010	14
0.83	Teen Pregnancy Rate	aged 15-17	17.9	36.2	19.5		2016	14
0.83	reen Pregnancy Rate	agea 13-17	17.9	30.2	19.5		2016	14
	MENTAL HEALTH & MENTAL		PREBLE				MEASUREMENT	
SCORE	DISORDERS	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
	Age-Adjusted Death Rate due to							
3.00	Suicide	deaths/ 100,000 population	20.2	10.2	12.8	12.7	2012-2014	4
	Depression: Medicare							
2.28	Population	percent	20.3		19.7	17.9	2017	5
2.00	Mental Health Provider Rate	providers/ 100,000 population	73		212.3	228.7	2018	6
	Poor Mental Health: Average	, ,						
1.67	Number of Days	days	4.1		4.3	3.8	2016	6
	Alzheimer's Disease or	•						
1.61	Dementia: Medicare Population	percent	10.4		10.5	10.9	2017	5
1.01		percent	10.4		10.5	10.5	2017	J
	Age-Adjusted Death Rate due to							
1.50	Alzheimer's Disease	deaths/ 100,000 population	34.9		32.7	30.3	2015-2017	4
1.17	Frequent Mental Distress	percent	12.3		13.5	15	2016	6
			PREBLE				MEASUREMENT	
SCORE	MORTALITY DATA	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
JCOKE	Age-Adjusted Death Rate due to	ONITS	COONTI	111 2020	Oillo	0.3.	FERIOD	Jource
3.00	Suicide	deaths/ 100,000 population	20.2	10.2	12.8	12.7	2012-2014	4
3.00	Death Rate due to Drug	deathsy 100,000 population	20.2	10.2	12.0	12.7	2012-2014	4
2.83	Poisoning	deaths/ 100,000 population	53.4		36.6	19.2	2015-2017	6
2.03	1 013011111g	deaths, 100,000 population	33.4		8491.	6900.	2013 2017	0
2.83	Premature Death	years/ 100,000 population	10574.7		6	6	2015-2017	6
		, ca. 3, 100,000 population	10377.7			- 3	2010 2017	<u> </u>
0.70	Age-Adjusted Death Rate due to	1	25.4	24.0	10.5	40.5	2044 2045	
2.78	Prostate Cancer	deaths/ 100,000 males	25.1	21.8	19.5	19.5	2011-2015	8
	Age-Adjusted Death Rate due to							
2.78	Unintentional Injuries	deaths/ 100,000 population	110	36.4	65.9	46.7	2015-2017	4
	Age-Adjusted Death Rate due to							
2.56	Motor Vehicle Traffic Collisions	deaths/ 100,000 population	27.9	12.4	10.4	11.4	2015-2017	4
2.53								
2.53	Infant Mortality Rate	deaths/ 1,000 live births	11.2	6	7.5	6	2012	14

	Age-Adjusted Death Rate due to							
2.50	Falls	deaths/ 100,000 population	12.7	7.2	10	9.2	2015-2017	4
2.17	Life Expectancy	years	75.2		77	79.1	2015-2017	6
2.06	Age-Adjusted Death Rate due to Cancer	deaths/ 100,000 population	184.5	161.4	179.3	163.5	2011-2015	8
2.00	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/ 100,000 population	17.1	14.5	15.9	14.5	2011-2015	8
1.94	Age-Adjusted Death Rate due to Heart Attack	deaths/ 100,000 population 35+ years	78.8		67		2015	10
1.94	Age-Adjusted Death Rate due to Unintentional Poisonings	deaths/ 100,000 population	24.4		38.5	19.3	2015-2017	4
1.89	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/ 100,000 population	109.7	103.4	104.8	94.8	2015-2017	4
1.83	Age-Adjusted Death Rate due to Diabetes	deaths/ 100,000 population	25.9		25	21.2	2015-2017	4
1.75	Mortality Ranking	ranking	75				2019	6
1.72	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	51.3	45.5	51.7	43.4	2011-2015	8
1.67	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/ 100,000 population	51.7		48.5	41	2015-2017	4
1.67	Age-Adjusted Death Rate due to Kidney Disease	deaths/ 100,000 population	15.6		14.9	13.2	2015-2017	4
1.50	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/ 100,000 population	34.9		32.7	30.3	2015-2017	4
1.44	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	21.7	20.7	22.9	20.9	2011-2015	8
1.44	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/ 100,000 population	15.4		16.2	14.6	2014-2016	4
1.39	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/ 100,000 population	39.9	34.8	41.4	37.5	2015-2017	4
0.67	Alcohol-Impaired Driving Deaths	percent	26.7		33.1	28.6	2013-2017	6

			PREBLE				MEASUREMENT	
SCORE	OLDER ADULTS & AGING	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
	Chronic Kidney Disease:							
2.83	Medicare Population	percent	27.8		24.9	24	2017	5
	Heart Failure: Medicare							_
2.61	Population	percent	18.1		14.8	13.9	2017	5
	Age-Adjusted Death Rate due to		10-				2215 2215	
2.50	Falls	deaths/ 100,000 population	12.7	7.2	10	9.2	2015-2017	4
	Depression: Medicare					1=0	2017	_
2.28	Population	percent	20.3		19.7	17.9	2017	5
2.20	Ischemic Heart Disease:		20.5		27.0	26.0	2047	_
2.28	Medicare Population	percent	30.5		27.9	26.9	2017	5
	Rheumatoid Arthritis or							
2.00	Osteoarthritis: Medicare	navaant	25.2		25.7	22.1	2017	_
2.00	Population Diabetic Monitoring: Medicare	percent	35.2		35.7	33.1	2017	5
1.94	Population	norcont	84.4		85.4	85.7	2015	18
		percent						
1.83	Diabetes: Medicare Population	percent	29.1		27.7	27.2	2017	5
1.78	COPD: Medicare Population	percent	13.5		13.6	11.7	2017	5
	Hyperlipidemia: Medicare							
1.72	Population	percent	43.8		42.5	40.7	2017	5
	Mammography Screening:							
1.72	Medicare Population	percent	58.2		62.4	63.2	2015	18
	Alzheimer's Disease or							
1.61	Dementia: Medicare Population	percent	10.4		10.5	10.9	2017	5
		регеет	20		10.5	10.5	2017	
4.50	Age-Adjusted Death Rate due to	11/100.000	24.0		22.7	20.2	2045 2047	
1.50	Alzheimer's Disease	deaths/ 100,000 population	34.9		32.7	30.3	2015-2017	4
1.50	Atrial Fibrillation: Medicare	norcont	8.7		8.9	8.4	2017	
1.50	Population Hypertension: Medicare	percent	ð./		8.9	8.4	2017	5
1.44	Population	narcant	58.3		59.8	57.1	2017	5
1.44	Osteoporosis: Medicare	percent	36.5		29.0	3/.1	2017	3
1.11	Population	percent	5.4		6	6.4	2017	5
1.11	·	ρειτεπι	J. <del>4</del>		J	0.4	2017	J
	People 65+ with Low Access to a						06:-	
1.00	Grocery Store	percent	0.2				2015	21
1.00	Stroke: Medicare Population	percent	3.4		3.8	3.8	2017	5

	APPENDIX B							
0.94	Cancer: Medicare Population	percent	7.4		8.3	8.2	2017	5
	People 65+ Living Below Poverty							
0.67	Level	percent	6.4		8	9.3	2013-2017	1
0.56	Asthma: Medicare Population	percent	4.1		5.2	5.1	2017	5
0.56	People 65+ Living Alone	percent	23.6		28.8	26.2	2013-2017	1
			PREBLE				MEASUREMENT	
SCORE	OTHER CHRONIC DISEASES	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
	Chronic Kidney Disease:							
2.83	Medicare Population	percent	27.8		24.9	24	2017	5
	Rheumatoid Arthritis or	·						
	Osteoarthritis: Medicare							
2.00	Population	percent	35.2		35.7	33.1	2017	5
	Age-Adjusted Death Rate due to							
1.67	Kidney Disease	deaths/ 100,000 population	15.6		14.9	13.2	2015-2017	4
	Osteoporosis: Medicare	, , ,						
1.11	Population	percent	5.4		6	6.4	2017	5
		·						
1								
			DDERIE				MEASIDEMENT	
SCORE	PREVENTION & SAFETY	LINITS	PREBLE	HP2020	Ohio	II S	MEASUREMENT	Source
SCORE	PREVENTION & SAFETY  Death Rate due to Drug	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
	Death Rate due to Drug		COUNTY	HP2020			PERIOD	
SCORE  2.83	Death Rate due to Drug Poisoning	UNITS  deaths/ 100,000 population		HP2020	<b>Ohio</b> 36.6	<b>U.S.</b> 19.2		Source 6
2.83	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to	deaths/ 100,000 population	53.4		36.6	19.2	PERIOD 2015-2017	6
	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries		COUNTY	HP2020 36.4			PERIOD	
2.83	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries  Age-Adjusted Death Rate due to	deaths/ 100,000 population deaths/ 100,000 population	53.4 110	36.4	36.6 65.9	19.2 46.7	PERIOD  2015-2017  2015-2017	6
2.83	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries  Age-Adjusted Death Rate due to Falls	deaths/ 100,000 population	53.4		36.6	19.2	PERIOD 2015-2017	6
2.83 2.78 2.50	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries  Age-Adjusted Death Rate due to Falls  Age-Adjusted Death Rate due to	deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population	53.4 110 12.7	36.4	36.6 65.9	19.2 46.7 9.2	PERIOD  2015-2017  2015-2017  2015-2017	6 4 4
2.83 2.78 2.50	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries  Age-Adjusted Death Rate due to Falls  Age-Adjusted Death Rate due to Unintentional Poisonings	deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population	53.4 110 12.7 24.4	36.4	36.6 65.9 10 38.5	19.2 46.7 9.2 19.3	PERIOD  2015-2017  2015-2017  2015-2017	6 4 4
2.83 2.78 2.50	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries  Age-Adjusted Death Rate due to Falls  Age-Adjusted Death Rate due to	deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population	53.4 110 12.7	36.4	36.6 65.9	19.2 46.7 9.2	PERIOD  2015-2017  2015-2017  2015-2017	6 4 4
2.83 2.78 2.50	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries  Age-Adjusted Death Rate due to Falls  Age-Adjusted Death Rate due to Unintentional Poisonings	deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population	53.4 110 12.7 24.4	36.4	36.6 65.9 10 38.5	19.2 46.7 9.2 19.3	PERIOD  2015-2017  2015-2017  2015-2017	6 4 4
2.83 2.78 2.50	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries  Age-Adjusted Death Rate due to Falls  Age-Adjusted Death Rate due to Unintentional Poisonings	deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population	53.4 110 12.7 24.4	36.4	36.6 65.9 10 38.5	19.2 46.7 9.2 19.3	PERIOD  2015-2017  2015-2017  2015-2017	6 4 4
2.83 2.78 2.50	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries  Age-Adjusted Death Rate due to Falls  Age-Adjusted Death Rate due to Unintentional Poisonings	deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population	53.4 110 12.7 24.4 12	36.4	36.6 65.9 10 38.5	19.2 46.7 9.2 19.3	PERIOD  2015-2017  2015-2017  2015-2017  2015-2017  2011-2015	6 4 4
2.83 2.78 2.50 1.94 0.94	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries Age-Adjusted Death Rate due to Falls  Age-Adjusted Death Rate due to Unintentional Poisonings Severe Housing Problems	deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population  percent	53.4 110 12.7 24.4 12 PREBLE	36.4 7.2	36.6 65.9 10 38.5 14.5	19.2 46.7 9.2 19.3 18.4	PERIOD  2015-2017  2015-2017  2015-2017  2015-2017  2011-2015  MEASUREMENT	6 4 4 4 6
2.83 2.78 2.50 1.94 0.94 SCORE	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries  Age-Adjusted Death Rate due to Falls  Age-Adjusted Death Rate due to Unintentional Poisonings  Severe Housing Problems  PUBLIC SAFETY  Age-Adjusted Death Rate due to	deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population  percent  UNITS	53.4  110  12.7  24.4  12  PREBLE COUNTY	36.4 7.2 HP2020	36.6 65.9 10 38.5 14.5	19.2 46.7 9.2 19.3 18.4	PERIOD  2015-2017  2015-2017  2015-2017  2015-2017  2011-2015  MEASUREMENT PERIOD	6 4 4 4 6
2.83 2.78 2.50 1.94 0.94	Death Rate due to Drug Poisoning  Age-Adjusted Death Rate due to Unintentional Injuries Age-Adjusted Death Rate due to Falls  Age-Adjusted Death Rate due to Unintentional Poisonings Severe Housing Problems	deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population  deaths/ 100,000 population  percent	53.4 110 12.7 24.4 12 PREBLE	36.4 7.2	36.6 65.9 10 38.5 14.5	19.2 46.7 9.2 19.3 18.4	PERIOD  2015-2017  2015-2017  2015-2017  2015-2017  2011-2015  MEASUREMENT	6 4 4 4 6

0.67	Alcohol-Impaired Driving Deaths	percent	26.7		33.1	28.6	2013-2017	6
0.64	Violent Crime Rate	crimes/ 100,000 population	60.5		291.4	373.7	2015	15
0.04	Violent Chine Nate	crimesy 100,000 population	00.5		231.4	373.7	2013	13
SCORE	RESPIRATORY DISEASES	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.11	Lung and Bronchus Cancer Incidence Rate	cases/ 100,000 population	75.7		69.3	60.2	2011-2015	8
1.78	COPD: Medicare Population	percent	13.5		13.6	11.7	2017	5
1.72	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	51.3	45.5	51.7	43.4	2011-2015	8
1.67	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/ 100,000 population	51.7		48.5	41	2015-2017	4
1.44	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/ 100,000 population	15.4		16.2	14.6	2014-2016	4
0.58	Tuberculosis Incidence Rate	cases/ 100,000 population	0	1	1.3	2.8	2017	13
0.56	Asthma: Medicare Population	percent	4.1		5.2	5.1	2017	5
SCORE	SOCIAL ENVIRONMENT	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
2.50	Mean Travel Time to Work	minutes	26.5		23.4	26.4	2013-2017	1
2.44	Social Associations	membership associations/ 10,000 population	8.7		11.2	9.3	2016	6
2.22	People 25+ with a Bachelor's Degree or Higher	percent	14.4		27.2	30.9	2013-2017	1
1.83	Population 16+ in Civilian Labor Force	percent	62.3		63.1	63	2013-2017	1
1.81	Median Housing Unit Value	dollars	116900		1351	1935	2013-2017	1
1.72	Per Capita Income	dollars	25374		2901	3117 7	2013-2017	1
1.61	Female Population 16+ in Civilian Labor Force	percent	57		58.9	58.2	2013-2017	1
	Households with an Internet							

	AFFENDIX D							
	Households with One or More							
1.58	Types of Computing Devices	percent	84.6		85.8	87.2	2013-2017	1
	Social and Economic Factors							
1.42	Ranking	ranking	32				2019	6
	Median Monthly Owner Costs							
1 21	for Households without a	dollara	424		450	474	2012 2017	1
1.31	Mortgage  Voter Turnout: Presidential	dollars	431		458	474	2013-2017	1
1.28	Election	percent	75.1		71.3		2016	16
		•				002		
1.25	Median Household Gross Rent	dollars	706		764 5240	982 5765	2013-2017	1
1.22	Median Household Income	dollars	52661		7	2	2013-2017	1
1.22	Total Employment Change	percent	1.7		1.5	2.1	2015-2016	20
	People 25+ with a High School							
1.17	Degree or Higher	percent	89.4		89.8	87.3	2013-2017	1
1.06	Child Abuse Rate (HP2020)	cases/ 1,000 children	5.6		7.3		2017	3
	Young Children Living Below							
1.00	Poverty Level	percent	21		25.1	22.5	2013-2017	1
0.00	People Living Below Poverty		12.4		140	11.0	2042 2047	4
0.83	Level	percent	12.4		14.9	14.6	2013-2017	1
0.81	Persons with Health Insurance	percent	93.3	100	92.9		2017	17
	Mortgaged Owners Median							
0.75	Monthly Household Costs	dollars	1091		1247	1515	2013-2017	1
	Children Living Below Poverty							
0.72	Level	percent	16.6		21.3	20.3	2013-2017	1
0.61	Homeownership	percent	68.8		59.1	56	2013-2017	1
0.56	People 65+ Living Alone	percent	23.6		28.8	26.2	2013-2017	1
0.39	Linguistic Isolation	percent	0.1		1.4	4.5	2013-2017	1
0.39	Single-Parent Households	percent	25.3		35.7	33.3	2013-2017	1
	_	·						
			DDEDLE				MEASUREMENT	
SCORE	SUBSTANCE ABUSE	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
333.12	Death Rate due to Drug	2.11.0		2020	J.110	3.0.	. 202	334100
2.83	Poisoning	deaths/ 100,000 population	53.4		36.6	19.2	2015-2017	6
	Mothers who Smoked During							
1.97	Pregnancy	percent	21.3	1.4	17.8	9.2	2010	14

	AFFLINDIA D				1		i	
1.67	Adults who Smoke	percent	20.2	12	22.5	17	2016	6
1.42	Health Behaviors Ranking	ranking	23				2019	6
1.17	Adults who Drink Excessively	percent	17.7	25.4	19.1	18	2016	6
0.67	Alcohol-Impaired Driving Deaths	percent	26.7		33.1	28.6	2013-2017	6
0.50	Liquor Store Density	stores/ 100,000 population	2.4		6.7	10.5	2016	20
			PREBLE				MEASUREMENT	
SCORE	TRANSPORTATION	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
	Solo Drivers with a Long							_
2.83	Commute	percent	40.6		30.3	35.2	2013-2017	6
	Age-Adjusted Death Rate due to							
2.56	Motor Vehicle Traffic Collisions	deaths/ 100,000 population	27.9	12.4	10.4	11.4	2015-2017	4
2.50	Mean Travel Time to Work	minutes	26.5		23.4	26.4	2013-2017	1
2.44	Workers Commuting by Public Transportation	narcant	0.2	5.5	1.6	5.1	2013-2017	1
2.28	Workers who Walk to Work	percent	1.9	3.1	2.2	2.7	2013-2017	
2.20	Workers who Drive Alone to	percent	1.9	5.1	2.2	2.7	2015-2017	1
2.11	Work	percent	84.2		83.4	76.4	2013-2017	1
	Households with No Car and							
1.33	Low Access to a Grocery Store	percent	2.3				2015	21
0.94	Households without a Vehicle	percent	5.3		8.3	8.8	2013-2017	1
			PREBLE				MEASUREMENT	
SCORE	WELLNESS & LIFESTYLE	UNITS	COUNTY	HP2020	Ohio	U.S.	PERIOD	Source
2.17	Life Expectancy	years	75.2		77	79.1	2015-2017	6
1.58	Morbidity Ranking	ranking	50				2019	6
1.33	Insufficient Sleep	percent	35.8		38	38	2016	6
	Poor Physical Health: Average							
1.33	Number of Days	days	3.7		4	3.7	2016	6
	Self-Reported General Health							
1.33	Assessment: Poor or Fair	percent	16		17	16	2016	6
1.00	Frequent Physical Distress	percent	11.3		12.5	15	2016	6

SCORE	WOMEN'S HEALTH	UNITS	PREBLE COUNTY	HP2020	Ohio	U.S.	MEASUREMENT PERIOD	Source
1.72	Mammography Screening: Medicare Population	percent	58.2		62.4	63.2	2015	18
1.44	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	21.7	20.7	22.9	20.9	2011-2015	8
0.50	Breast Cancer Incidence Rate	cases/ 100,000 females	105.2		126.2	124.7	2011-2015	8

## RANDOLPH COUNTY, INDIANA

SCORE	ACCESS TO HEALTH SERVICES	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	Primary Care Provider Rate	providers/ 100,000 population	19.9		66.9	75.4	2016	5
2.39	Mental Health Provider Rate	providers/ 100,000 population	28.1		149.5	228. 7	2018	5
1.83	Dentist Rate	dentists/ 100,000 population	28.1		55.2	68.4	2017	5
1.67	Non-Physician Primary Care Provider Rate	providers/ 100,000 population	64.2		80.3	88.2	2018	5
1.58	Clinical Care Ranking	ranking	53				2019	5
1.53	Children with Health Insurance	percent	93.8	100	93.7		2017	14
1.50	Preventable Hospital Stays: Medicare Population	discharges/ 1,000 Medicare enrollees	56.9		56.8	49.4	2015	15
1.47	Adults with Health Insurance: 18-64	percent	89	100	89		2017	14
1.36	Persons with Health Insurance	percent	90.4	100	90.4		2017	14

SCORE	CANCER	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.67	Age-Adjusted Death Rate due to Prostate Cancer	deaths/ 100,000 males	26.5	21.8	20.4	19.5	2011-2015	10
2.61	Oral Cavity and Pharynx Cancer Incidence Rate	cases/ 100,000 population	14.6		12	11.6	2011-2015	10
2.17	Age-Adjusted Death Rate due to Cancer	deaths/ 100,000 population	187.4	161.4	181	163. 5	2011-2015	10
2.06	Prostate Cancer Incidence Rate	cases/ 100,000 males	114.1		92.7	109	2011-2015	10
1.94	Mammography Screening: Medicare Population	percent	59.8		62.3	63.2	2015	15
1.89	All Cancer Incidence Rate	cases/ 100,000 population	473		447	441. 2	2011-2015	10
1.89	Lung and Bronchus Cancer Incidence Rate	cases/ 100,000 population	78		72.8	60.2	2011-2015	10
1.83	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	51.1	45.5	53.4	43.4	2011-2015	10
1.44	Cancer: Medicare Population	percent	7.6		7.8	8.2	2017	4
1.22	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	19.4	20.7	21.4	20.9	2011-2015	10
1.11	Colorectal Cancer Incidence Rate	cases/ 100,000 population	40.5	39.9	42.9	39.2	2011-2015	10
1.06	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/ 100,000 population	15.3	14.5	15.9	14.5	2011-2015	10
0.89	Breast Cancer Incidence Rate	cases/ 100,000 females	111.9		121.7	124. 7	2011-2015	10
SCORE	CHILDREN'S HEALTH	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.00	Child Food Insecurity Rate	percent	20.4		17.7	17.9	2016	6
1.83	Child Abuse Rate	cases/ 1,000 children	20.9		17.1		2015	2
1.53	Children with Health Insurance	percent	93.8	100	93.7		2017	14
1.50	Children with Low Access to a Grocery Store	percent	3.7				2015	18

	APPENDIX D							
	Food Insecure Children Likely	_					2015	
0.61	Ineligible for Assistance	percent	12		29	20	2016	6
SCORE	COUNTY HEALTH RANKINGS	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
1.75	Morbidity Ranking	ranking	79				2019	5
1.75	Mortality Ranking	ranking	76				2019	5
1.75	Social and Economic Factors Ranking	ranking	77				2019	5
1.58	Clinical Care Ranking	ranking	53				2019	5
1.58	Health Behaviors Ranking	ranking	52				2019	5
1.42	Physical Environment Ranking	ranking	25				2019	5
SCORE	DIABETES	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	Diabetes: Medicare Population	percent	31.3		28.1	27.2	2017	4
1.83	Adults 20+ with Diabetes	percent	12		11.5	10.2	2015	5
1.06	Diabetic Monitoring: Medicare Population	percent	88.6		86.1	85.7	2015	15
0.72	Age-Adjusted Death Rate due to Diabetes	deaths/ 100,000 population	19.4		26.5	21.2	2015-2017	3
SCORE	ECONOMY	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	People 65+ Living Below							
2.67	Poverty Level	percent	10.4		7.5	9.3	2013-2017	1
2.61	Total Employment Change	percent	-5.7		2.2	2.1	2015-2016	17
2.44	Unemployed Workers in Civilian Labor Force	percent	5		4.1	4.1	February 2019	16
2.33	People Living Below Poverty Level	percent	17		14.6	14.6	2013-2017	1
2.22	Children Living Below Poverty Level	percent	24.9		20.4	20.3	2013-2017	1
2.22	Families Living Below Poverty Level	percent	11.9		10.3	10.5	2013-2017	1

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Median Household Income	dollars	44985	52182		2013-2017	1
Wedian Household Income	uoliuis	44363	32182		2013-2017	Т
Per Capita Income	dollars	23427	27305	7	2013-2017	1
Child Food Insecurity Rate	percent	20.4	17.7	17.9	2016	6
,				1935		
Median Housing Unit Value	dollars	79500	130200	00	2013-2017	1
S S						
·	•	25.4				1
·	percent	2	1.8	1.7	2013-2017	1
		60	66.5	67.2	2042 2047	4
	percent	60	66.5	67.2	2013-2017	1
·						
	percent	55.9	58.9	58.2	2013-2017	1
·	norcont	60.4	62.0	62	2012 2017	1
	регсеп	00.4	05.6	03	2013-2017	Т
		20.2	27	27.4	2042 2047	4
	percent	28.2	21	27.1	2013-2017	1
	rankina	77			2019	5
	ranking	,,			2013	
	nercent	7			2015	18
	ρειτειιι	,			2013	10
_	percent	42.6	39.6	40.4	2016-2017	11
	percent	2.1	1.8	2.6	2013-2017	1
	,					6
·	,					18
	storesy 1,000 population				2010	10
for Households without a						
Mortgage	dollars	339	389	474	2013-2017	1
Income Inequality		0.4	0.5	0.5	2013-2017	1
Median Household Gross Rent	dollars	623	782	982	2013-2017	1
Mortgaged Owners Median						
Monthly Household Costs	dollars	879	1109	1515	2013-2017	1
	Child Food Insecurity Rate  Median Housing Unit Value Young Children Living Below Poverty Level Homeowner Vacancy Rate People Living 200% Above Poverty Level  Female Population 16+ in Civilian Labor Force Population 16+ in Civilian Labor Force Persons with Disability Living in Poverty (5-year)  Social and Economic Factors Ranking  Low-Income and Low Access to a Grocery Store Students Eligible for the Free Lunch Program  Households with Cash Public Assistance Income Food Insecurity Rate  SNAP Certified Stores Median Monthly Owner Costs for Households without a Mortgage Income Inequality Median Household Gross Rent Mortgaged Owners Median	Per Capita Income Child Food Insecurity Rate  Median Housing Unit Value Young Children Living Below Poverty Level Homeowner Vacancy Rate People Living 200% Above Poverty Level Persons with Disability Living in Poverty (5-year) Social and Economic Factors Ranking Low-Income and Low Access to a Grocery Store Students Eligible for the Free Lunch Program Households with Cash Public Assistance Income Food Insecurity Rate SNAP Certified Stores Median Monthly Owner Costs for Households without a Mortgage Income Inequality Median Household Gross Rent Mortgaged Owners Median Mortgaged Owners Median Mortgaged Owners Median Mortgaged Owners Median Mortgaged Owners Median Mortgaged Owners Median Mortgaged Owners Median	Per Capita Income Child Food Insecurity Rate  Median Housing Unit Value Young Children Living Below Poverty Level Homeowner Vacancy Rate People Living 200% Above Poverty Level Poverty Level Poverty Level Poverty Level Poverty Level Poverty Level Poverty Level Poverty Level Poverty Level Poverty Level Poverty Level Population 16+ in Civilian Labor Force Population 16+ in Civilian Labor Force Population 16+ in Civilian Labor Force Posons with Disability Living in Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty Store Poverty Store Poverty Store Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty (5-year) Poverty	Per Capita Income Child Food Insecurity Rate  Child Food Insecurity Rate  Percent  Child Food Insecurity Rate  Percent  Definition  Median Housing Unit Value  Median Housing Unit Value  Median Housing Unit Value  Poverty Level  Poverty Level  Percent  People Living 200% Above Poverty Level  People Living 200% Above Poverty Level  Percent  Definition  Civilian Labor Force  Population 16+ in  Civilian Labor Force  Persons with Disability Living in Poverty (5-year)  Social and Economic Factors Ranking  Low-Income and Low Access to a Grocery Store  Students Eligible for the Free Lunch Program  Percent  Percent  Definition  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percent  Percen	Per Capita Income   dollars   23427   27305   7	Median Household Income   dollars   344985   52182   2 2013-2017

APPENDIX B				I			
Food Insecure Children <b>0.61</b> Ineligible for Assistance	•	12		29	20	2016	6
<b>0.56</b> Homeownership	percent	68		61.2	56	2013-2017	1
0.33 Severe Housing Probler	ns <i>percent</i>	10.7		13.7	18.4	2011-2015	5
Renters Spending 30% of Household Income o		37.8		47.9	50.6	2013-2017	1
		RANDOLPH				MEASUREMENT	
SCORE EDUCATION	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
People 25+ with a Bach Degree or Higher	elor's percent	13.7		25.3	30.9	2013-2017	1
8th Grade Students Pro in English/Language Art	s <i>percent</i>	54.1		60.7		2017	2
8th Grade Students Pro in Math	ficient percent	40.1		54.4		2017	2
People 25+ with a High  1.72 Degree or Higher	School percent	85.8		88.3	87.3	2013-2017	1
1.47 High School Graduation	percent	90.7	87	88.7	84.6	2017	2
4th Grade Students Pro in English/Language Art	s <i>percent</i>	70.2		64.9		2017	2
4th Grade Students Pro in Math	ficient percent	69.2		61.2		2017	2
0.94 Student-to-Teacher Rat	io students/ teacher	14.7		17.4	16.5	2016-2017	11
SCORE ENVIRONMENT	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.83 Houses Built Prior to 19	50 percent	46.2		23.4	18	2013-2017	1
2.83 Liquor Store Density	stores/ 100,000 population	23.9		12.5	10.5	2016	17
Access to Exercise Opportunities	percent	49.5		75.3	83.9	2019	5
Households with No Ca Low Access to a Grocer		4.2				2015	18
1.83 Farmers Market Density	markets/ 1,000 population	0				2016	18
<b>1.67</b> Grocery Store Density	stores/ 1,000 population	0.2				2014	18

	Low-Income and Low Access to							
1.67	a Grocery Store	percent	7				2015	18
	Months of Mild Drought or	p = = = = = = = = = = = = = = = = = = =	-					
1.61	Worse	months per year	8				2016	13
	Number of Extreme							
1.61	Precipitation Days	days	135				2016	13
	Recognized Carcinogens							
1.61	Released into Air	pounds	9669				2017	19
1.50	Children with Low Access to a	m avaant	2.7				2015	10
1.50	Grocery Store	percent	3.7				2015	18
	People 65+ with Low Access to							
1.50	a Grocery Store	percent	2.5				2015	18
1.42	Physical Environment Ranking	ranking	25				2019	5
1.39	PBT Released	pounds	555.1				2017	19
	People with Low Access to a							
1.33	Grocery Store	percent	14.3				2015	18
1.28	SNAP Certified Stores	stores/ 1,000 population	1				2016	18
4.44	Fact Food Bactarinant Banaiti	restaurants/ 1,000	0.2				2014	10
1.11	Fast Food Restaurant Density	population	0.3		0.40=		2014	18
1.06	Daily Dose of UV Irradiance	Joule per square meter	2279		2427		2015	13
1.00	Food Environment Index		7.7		7.1	7.7	2019	5
4.00	Recreation and Fitness	S	0.4				2014	4.0
1.00	Facilities	facilities/ 1,000 population	0.1				2014	18
0.33	Severe Housing Problems	percent	10.7		13.7	18.4	2011-2015	5
	EXERCISE, NUTRITION, &		RANDOLPH				MEASUREMENT	
SCORE	WEIGHT	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.22	Access to Exercise	_	40.5		75.0	00.0	2010	_
2.33	Opportunities	percent	49.5		75.3	83.9	2019	5
2.28	Adults 20+ who are Obese	percent	34.9	30.5	32.8	28.5	2015	5
2.28	Workers who Walk to Work	percent	1.6	3.1	2.1	2.7	2013-2017	1
2.00	Child Food Insecurity Rate	percent	20.4		17.7	17.9	2016	6
	Households with No Car and							
2.00	Low Access to a Grocery Store	percent	4.2				2015	18
1.83	Farmers Market Density	markets/ 1,000 population	0				2016	18

1.67	Grocery Store Density	stores/ 1,000 population	0.2				2014	18
	Low-Income and Low Access to							
1.67	a Grocery Store	percent	7				2015	18
1.58	Health Behaviors Ranking	ranking	52				2019	5
	Children with Low Access to a							
1.50	Grocery Store	percent	3.7				2015	18
	People 65+ with Low Access to							
1.50	a Grocery Store	percent	2.5				2015	18
1.33	Adults 20+ who are Sedentary	percent	26.3	32.6	25.1	22.2	2015	5
1.33	Food Insecurity Rate	percent	13.3		13.7	12.9	2016	6
	People with Low Access to a							
1.33	Grocery Store	percent	14.3				2015	18
1.28	SNAP Certified Stores	stores/ 1,000 population	1				2016	18
		restaurants/ 1,000						
1.11	Fast Food Restaurant Density	population	0.3				2014	18
1.00	Food Environment Index		7.7		7.1	7.7	2019	5
	Recreation and Fitness							
1.00	Facilities	facilities/ 1,000 population	0.1				2014	18
	Food Insecure Children Likely							
0.61	Ineligible for Assistance	percent	12		29	20	2016	6
			RANDOLPH				MEASUREMENT	
SCORE	HEART DISEASE & STROKE	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Heart Failure: Medicare							
2.83	Population	percent	18.2		15	13.9	2017	4
	Ischemic Heart Disease:							
2.61	Medicare Population	percent	31.1		28.3	26.9	2017	4
	Age-Adjusted Death Rate due							
2.50	to Coronary Heart Disease	deaths/ 100,000 population	121.9	103.4	101.9	94.8	2015-2017	3
	Hypertension: Medicare							
2.33	Population	percent	62.7		59.4	57.1	2017	4
	Age-Adjusted Death Rate due	deaths/ 100,000 population						
2.11	to Heart Attack	35+ years	102.3		75.6		2015	13

SCORE	MENTAL HEALTH & MENTAL DISORDERS	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	AAFAITAL HEALTH O AAFAITAL		DANDOLDIL				BACA CLIDEBAENT	
1.47	Preterm Births (OE)	percent	9.9	9.4	9.9	9.9	2017	8
1.47	Babies with Low Birth Weight	percent	7.9	7.8	8.3	8.3	2017	8
1.58	Mothers who Received Early Prenatal Care	percent	73.6	77.9	68.6	77.3	2017	8
1.72	Teen Birth Rate: 15-19	live births/ 1,000 females aged 15-19	30.5		22.8		2017	8
2.42	Mothers who Smoked During Pregnancy	percent	22.6	1.4	13.5	6.9	2017	8
SCORE	MATERNAL, FETAL & INFANT HEALTH	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.83	Salmonella Infection Incidence Rate	cases/ 100,000 population	0	11.4	11.1		2017	8
0.94	Gonorrhea Incidence Rate	cases/ 100,000 population	43.7		142.8	145. 8	2016	12
1.11	Chlamydia Incidence Rate	cases/ 100,000 population	290		466	497. 3	2016	12
2.11	Hepatitis C Prevalence	Rate per 100,000 population	208.7		126.1		2017	8
2.61	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/ 100,000 population	21.5		13.4	14.3	2015-2017	3
SCORE	IMMUNIZATIONS & INFECTIOUS DISEASES	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
1.17	Stroke: Medicare Population	percent	3.3		3.7	3.8	2017	4
1.28	Atrial Fibrillation: Medicare Population	percent	8		8.4	8.4	2017	4
1.72	Hyperlipidemia: Medicare Population	percent	42		41.3	40.7	2017	4
2.06	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/ 100,000 population	41.5	34.8	39.6	37.5	2015-2017	3

	APPENDIX B	11 /100 000				222		
		providers/ 100,000				228.		_
2.39	Mental Health Provider Rate	population	28.1		149.5	7	2018	5
	Depression: Medicare		40.0			4= 0		_
2.17	Population	percent	19.8		20.3	17.9	2017	4
	Poor Mental Health: Average							
2.17	Number of Days	days	4.4		4.3	3.8	2016	5
1.67	Frequent Mental Distress	percent	13.3		13.3	15	2016	5
	Alzheimer's Disease or							
	Dementia: Medicare							
1.50	Population	percent	10		11.1	10.9	2017	4
	Age-Adjusted Death Rate due							
0.39	to Alzheimer's Disease	deaths/ 100,000 population	18.6		34.4	30.3	2015-2017	3
			RANDOLPH				MEASUREMENT	
SCORE	MORTALITY DATA	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
SCORE		Oiiii3	COOM	111 2020	maiana	0.3.	1 EMOD	Jource
2.00	Age-Adjusted Death Rate due	1	405.3	26.4	F2.7	46.7	2045 2047	
3.00	to Unintentional Injuries	deaths/ 100,000 population	105.3	36.4	52.7	46.7	2015-2017	3
2.83	Death Rate due to Drug Poisoning	deaths/ 100,000 population	43.9		23.2	19.2	2015-2017	5
2.03	, and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second	deaths/ 100,000 population	45.5		25.2	19.2	2013-2017	J
	Age-Adjusted Death Rate due							
2.67	to Prostate Cancer	deaths/ 100,000 males	26.5	21.8	20.4	19.5	2011-2015	10
	Age-Adjusted Death Rate due							
2.61	to Influenza and Pneumonia	deaths/ 100,000 population	21.5		13.4	14.3	2015-2017	3
	Age-Adjusted Death Rate due							
2.50	to Coronary Heart Disease	deaths/ 100,000 population	121.9	103.4	101.9	94.8	2015-2017	3
	Age-Adjusted Death Rate due							
2.44	to Kidney Disease	deaths/ 100,000 population	23.3		18.7	13.3	2013-2015	3
	to Maney Bisease	acatilis, 100,000 population	23.3		20.7	6900	2010 2010	
2.44	Premature Death	years/ 100,000 population	9939		8237.6	.6	2015-2017	5
	Age-Adjusted Death Rate due	, , , , , , , , , , , , , , , , , , , ,					-	
	to Motor Vehicle Traffic							
2.42	Collisions	deaths/ 100,000 population	27.9	12.4	12.3	11.4	2015-2017	3
	Age-Adjusted Death Rate due							
2.25	to Unintentional Poisonings	deaths/ 100,000 population	39		18.8	15.4	2014-2016	3
				1	_3.0		_ === : ===	_

2.61	Ischemic Heart Disease: Medicare Population	percent	31.1		28.3	26.9	2017	4
2.61	Diabetes: Medicare Population	percent	31.3		28.1	27.2	2017	4
2.67	Poverty Level	percent	10.4		7.5	9.3	2013-2017	1
2.83	Population People 65+ Living Below	percent	18.2		15	13.9	2017	4
SCORE	OLDER ADULTS & AGING Heart Failure: Medicare	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.17	Alcohol-Impaired Driving Deaths	percent	6.7		20.8	28.6	2013-2017	5
0.39	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/ 100,000 population	18.6		34.4	30.3	2015-2017	3
0.72	Age-Adjusted Death Rate due to Diabetes	deaths/ 100,000 population	19.4		26.5	21.2	2015-2017	3
0.89	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/ 100,000 population	42.3		55	41	2015-2017	3
1.06	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/ 100,000 population	15.3	14.5	15.9	14.5	2011-2015	10
1.22	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	19.4	20.7	21.4	20.9	2011-2015	10
1.75	Mortality Ranking	ranking	76				2019	5
1.83	Life Expectancy	years	76.4		77.1	79.1	2015-2017	5
1.83	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	51.1	45.5	53.4	43.4	2011-2015	10
2.06	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/ 100,000 population	41.5	34.8	39.6	37.5	2015-2017	3
2.11	Age-Adjusted Death Rate due to Heart Attack	deaths/ 100,000 population 35+ years	102.3		75.6		2015	13
2.17	APPENDIX B Age-Adjusted Death Rate due to Cancer	deaths/ 100,000 population	187.4	161.4	181	163. 5	2011-2015	10

2.44	Age-Adjusted Death Rate due to Kidney Disease	deaths/ 100,000 population	23.3		18.7	13.3	2013-2015	3
SCORE	OTHER CHRONIC DISEASES	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.39	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/ 100,000 population	18.6		34.4	30.3	2015-2017	3
0.56	Asthma: Medicare Population	percent	4		5.2	5.1	2017	4
1.06	Diabetic Monitoring: Medicare Population	percent	88.6		86.1	85.7	2015	15
1.17	Stroke: Medicare Population	percent	3.3		3.7	3.8	2017	4
1.28	Atrial Fibrillation: Medicare Population	percent	8		8.4	8.4	2017	4
1.44	Cancer: Medicare Population	percent	7.6		7.8	8.2	2017	4
1.50	People 65+ with Low Access to a Grocery Store	percent	2.5				2015	18
1.50	People 65+ Living Alone	percent	28.7		27.7	26.2	2013-2017	1
1.50	Alzheimer's Disease or Dementia: Medicare Population	percent	10		11.1	10.9	2017	4
1.72	Hyperlipidemia: Medicare Population	percent	42		41.3	40.7	2017	4
1.94	Mammography Screening: Medicare Population	percent	59.8		62.3	63.2	2015	15
2.00	Chronic Kidney Disease: Medicare Population	percent	25		25.1	24	2017	4
2.17	Rheumatoid Arthritis or Osteoarthritis: Medicare Population	percent	35.4		34.5	33.1	2017	4
2.17	Depression: Medicare Population	percent	19.8		20.3	17.9	2017	4
2.17	COPD: Medicare Population	percent	14.8		14.4	11.7	2017	4
2.28	Osteoporosis: Medicare Population	percent	6.6		6.2	6.4	2017	4
2.33	Hypertension: Medicare Population	percent	62.7		59.4	57.1	2017	4

	APPENDIX D							
2.22	Osteoporosis: Medicare		6.6		6.0		2047	
2.28	Population Rheumatoid Arthritis or	percent	6.6		6.2	6.4	2017	4
	Osteoarthritis: Medicare							
2.17	Population	percent	35.4		34.5	33.1	2017	4
	Chronic Kidney Disease:	,						
2.00	Medicare Population	percent	25		25.1	24	2017	4
	, , , , , , , , , , , , , , , , , , ,	P -						
			RANDOLPH				MEASUREMENT	
SCORE	PREVENTION & SAFETY	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Age-Adjusted Death Rate due	Çç						
3.00	to Unintentional Injuries	deaths/ 100,000 population	105.3	36.4	52.7	46.7	2015-2017	3
3.33	Death Rate due to Drug	acams, 100,000 population	103.3	3011	32.7	1017	2013 2017	
2.83	Poisoning	deaths/ 100,000 population	43.9		23.2	19.2	2015-2017	5
	Age-Adjusted Death Rate due							
2.25	to Unintentional Poisonings	deaths/ 100,000 population	39		18.8	15.4	2014-2016	3
0.33	Severe Housing Problems	percent	10.7		13.7	18.4	2011-2015	5
SCORE	PUBLIC SAFETY	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
000112	Age-Adjusted Death Rate due	O.M.O			maiana	0.0.		000.100
	to Motor Vehicle Traffic							
2.42	Collisions	deaths/ 100,000 population	27.9	12.4	12.3	11.4	2015-2017	3
1.83	Child Abuse Rate	cases/ 1,000 children	20.9		17.1		2015	2
0.89	Violent Crime Rate	crimes/ 100,000 population	27.9		356.2		2012-2014	5
	Alcohol-Impaired Driving							_
0.17	Deaths	percent	6.7		20.8	28.6	2013-2017	5
SCORE	RESPIRATORY DISEASES	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
JCORE		OMITS	COUNTY	HF ZUZU	iiiuiaiid	0.3.	FLNIOD	Jource
2.61	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/ 100,000 population	21.5		13.4	14.3	2015-2017	2
2.17	COPD: Medicare Population		14.8		14.4	11.7		3
2.17	COPD. Medicale Population	percent	14.0		14.4	11./	2017	4

	APPENDIX D	<del>.</del>						
	Lung and Bronchus Cancer	/ 100 000						
1.89	Incidence Rate	cases/ 100,000 population	78		72.8	60.2	2011-2015	10
1.83	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	51.1	45.5	53.4	43.4	2011-2015	10
1.05	Age-Adjusted Death Rate due	deaths/ 100,000 population	31.1	45.5	55.4	45.4	2011-2015	10
	to Chronic Lower Respiratory							
0.89	Diseases	deaths/ 100,000 population	42.3		55	41	2015-2017	3
0.56	Asthma: Medicare Population	percent	4		5.2	5.1	2017	4
		p = · · · · · ·						
			RANDOLPH				MEASUREMENT	
SCORE	SOCIAL ENVIRONMENT	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.61	Total Employment Change	percent	-5.7		2.2	2.1	2015-2016	17
2.44	Single-Parent Households	percent	37.2		33.6	33.3	2013-2017	1
	People 25+ with a Bachelor's							
2.39	Degree or Higher	percent	13.7		25.3	30.9	2013-2017	1
	People Living Below Poverty							
2.33	Level	percent	17		14.6	14.6	2013-2017	1
	Children Living Below Poverty							
2.22	Level	percent	24.9		20.4	20.3	2013-2017	1
2 22	Madian Hayaahald Income	dollars	44005		52182	5765	2012 2017	1
2.22	Median Household Income	dollars	44985		52182	2 3117	2013-2017	1
2.22	Per Capita Income	dollars	23427		27305	7	2013-2017	1
2.22	i ci capita income	donars	25427		27303	1935	2013 2017	
1.92	Median Housing Unit Value	dollars	79500		130200	00	2013-2017	1
	Young Children Living Below							
1.89	Poverty Level	percent	25.4		23.7	22.5	2013-2017	1
1.83	Child Abuse Rate	cases/ 1,000 children	20.9		17.1		2015	2
	Female Population 16+ in							
1.78	Civilian Labor Force	percent	55.9		58.9	58.2	2013-2017	1
1.78	Mean Travel Time to Work	minutes	24.5		23.4	26.4	2013-2017	1
	Population 16+ in Civilian							
1.78	Labor Force	percent	60.4		63.8	63	2013-2017	1
	Households with an Internet							
1.75	Subscription	percent	70.9		75.9	78.7	2013-2017	1

	AFF LINDIA D							
	Households with One or More							
1.75	Types of Computing Devices	percent	82.4		85.5	87.2	2013-2017	1
	Social and Economic Factors							
1.75	Ranking	ranking	77				2019	5
	People 25+ with a High School							
1.72	Degree or Higher	percent	85.8		88.3	87.3	2013-2017	1
1.50	People 65+ Living Alone	percent	28.7		27.7	26.2	2013-2017	1
	Voter Turnout: Presidential							
1.44	Election	percent	60		58		2016	7
1.36	Persons with Health Insurance	percent	90.4	100	90.4		2017	14
1.17	Linguistic Isolation	percent	0.9		1.7	4.5	2013-2017	1
	Median Monthly Owner Costs							
	for Households without a							
1.08	Mortgage	dollars	339		389	474	2013-2017	1
0.86	Median Household Gross Rent	dollars	623		782	982	2013-2017	1
	Mortgaged Owners Median							
0.75	Monthly Household Costs	dollars	879		1109	1515	2013-2017	1
		membership associations/						
0.61	Social Associations	10,000 population	17.9		12.3	9.3	2016	5
0.56	Homeownership	percent	68		61.2	56	2013-2017	1
			RANDOLPH				MEASUREMENT	
SCORE	SUBSTANCE ABUSE	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Death Rate due to Drug							
2.83	Poisoning	deaths/ 100,000 population	43.9		23.2	19.2	2015-2017	5
2.83	Liquor Store Density	stores/ 100,000 population	23.9		12.5	10.5	2016	17
	Mothers who Smoked During							
2.42	Pregnancy	percent	22.6	1.4	13.5	6.9	2017	8
2.17	Adults who Smoke	percent	20.5	12	21.1	17	2016	5
	Non-Fatal Emergency							
	Department Visits due to	Rate per 100,000						
2.11	Opioid Overdoses	population	200.6		122.5		2017	8
1.70	Substance Abuse Treatment	Rate per 100,000	274.4		107.1		2045	0
1.72	Rate: Alcohol	population	274.1		197.1		2015	8
1.58	Health Behaviors Ranking	ranking	52				2019	5
0.50	Adults who Drink Excessively	percent	16.1	25.4	18.6	18	2016	5

1.94	Mammography Screening: Medicare Population	percent	59.8		62.3	63.2	2015	15
SCORE	WOMEN'S HEALTH	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
1.33	Frequent Physical Distress	percent	11.8		11.9	15	2016	5
1.67	Self-Reported General Health Assessment: Poor or Fair	percent	17		17.7	16	2016	5
1.67	Poor Physical Health: Average Number of Days	days	3.9		3.9	3.7	2016	5
1.67	Insufficient Sleep	percent	35.5		36	38	2016	5
1.75	Morbidity Ranking	ranking	79				2019	5
1.83	Life Expectancy	years	76.4		77.1	79.1	2015-2017	5
SCORE	WELLNESS & LIFESTYLE	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.50	Households without a Vehicle	percent	4.9		6.7	8.8	2013-2017	1
1.22	Workers who Drive Alone to Work	percent	81.2		83	76.4	2013-2017	1
1.33	Solo Drivers with a Long Commute	percent	33.1		30.7	35.2	2013-2017	5
1.78	Mean Travel Time to Work	minutes	24.5		23.4	26.4	2013-2017	1
1.89	Workers Commuting by Public Transportation	percent	0.4	5.5	1	5.1	2013-2017	1
2.00	Households with No Car and Low Access to a Grocery Store	percent	4.2				2015	18
2.28	Workers who Walk to Work	percent	1.6	3.1	2.1	2.7	2013-2017	1
2.42	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions	deaths/ 100,000 population	27.9	12.4	12.3	11.4	2015-2017	3
SCORE	TRANSPORTATION	UNITS	RANDOLPH COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.17	Deaths	percent	6.7		20.8	28.6	2013-2017	5

1.22	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	19.4	20.7	21.4	20.9	2011-2015	10	
						124.			İ
0.89	Breast Cancer Incidence Rate	cases/ 100,000 females	111.9		121.7	7	2011-2015	10	ĺ

# UNION COUNTY, INDIANA

SCORE	ACCESS TO HEALTH SERVICES	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
JCOKE	ACCESS TO HEALTH SERVICES	providers/ 100,000	COONT	HFZUZU	Illulalla	0.3.	PERIOD	Jource
2.83	Primary Care Provider Rate	population	27.7		66.9	75.4	2016	5
	Non-Physician Primary Care	providers/ 100,000						
2.44	Provider Rate	population	41.7		80.3	88.2	2018	5
2.25	Dentist Rate	dentists/ 100,000 population	13.2		46.2		2010	5
2.25	Mental Health Provider Rate	providers/ 100,000 population	13.8		140		2015	5
2.11	Preventable Hospital Stays: Medicare Population	discharges/ 1,000 Medicare enrollees	61.5		56.8	49.4	2015	15
	Children with Health							
1.69	Insurance	percent	93.3	100	93.7		2017	14
1.42	Clinical Care Ranking	ranking	32				2019	5
1.14	Persons with Health Insurance	percent	90.8	100	90.4		2017	14
1.08	Adults with Health Insurance: 18-64	percent	89.8	100	89		2017	14
SCORE	CANCER	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source

	APPENDIX B							
	Age-Adjusted Death Rate due							
2.42	to Colorectal Cancer	deaths/ 100,000 population	41	14.5	18.1		2005-2009	10
	Mammography Screening:							
2.39	Medicare Population	percent	54.8		62.3	63.2	2015	15
	Prostate Cancer Incidence	(100.000				100	2211 2215	1.0
1.83	Rate	cases/ 100,000 males	114.5		92.7	109	2011-2015	10
1 11	Age-Adjusted Death Rate due	dontho/100,000 population	160.4	161.4	101	162.5	2011 2015	10
1.11	to Cancer	deaths/ 100,000 population	168.4	161.4	181	163.5	2011-2015	10
0.67	All Cancer Incidence Rate	cases/ 100,000 population	421.5		447	441.2	2011-2015	10
0.56	Cancer: Medicare Population	percent	6.9		7.8	8.2	2017	4
0.39	Breast Cancer Incidence Rate	cases/ 100,000 females	75.4		121.7	124.7	2011-2015	10
0.17	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	40.2	45.5	53.4	43.4	2011-2015	10
	Colorectal Cancer Incidence							
0.17	Rate	cases/ 100,000 population	35.3	39.9	42.9	39.2	2011-2015	10
	Lung and Bronchus Cancer							
0.17	Incidence Rate	cases/ 100,000 population	53		72.8	60.2	2011-2015	10
			UNION				MEASUREMENT	
SCORE	CHILDREN'S HEALTH	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.11	Child Abuse Rate	cases/ 1,000 children	26.2		17.1		2015	2
2.11	Child Abuse Rate Children with Health	cases/ 1,000 children	26.2		17.1		2015	2
1.69		cases/ 1,000 children  percent	26.2 93.3	100	17.1 93.7		2015 2017	2
1.69	Children with Health			100			2017	14
	Children with Health Insurance			100				
1.69	Children with Health Insurance Children with Low Access to a	percent	93.3	100			2017	14
1.69	Children with Health Insurance Children with Low Access to a Grocery Store	percent	93.3	100		20	2017	14
1.69	Children with Health Insurance Children with Low Access to a Grocery Store Food Insecure Children Likely Ineligible for Assistance	percent	93.3	100	93.7	20 17.9	2017 2015	14
1.69 1.00 0.39	Children with Health Insurance Children with Low Access to a Grocery Store Food Insecure Children Likely	percent  percent	93.3 0 17	100	93.7		2017 2015 2016	14 18 6
1.69 1.00 0.39	Children with Health Insurance Children with Low Access to a Grocery Store Food Insecure Children Likely Ineligible for Assistance	percent  percent	93.3 0 17 15.9	100	93.7		2017 2015 2016 2016	14 18 6
1.69 1.00 0.39 0.17	Children with Health Insurance Children with Low Access to a Grocery Store Food Insecure Children Likely Ineligible for Assistance Child Food Insecurity Rate	percent  percent  percent  percent  percent	93.3 0 17 15.9 UNION		93.7 29 17.7	17.9	2017 2015 2016 2016 MEASUREMENT	14 18 6 6
1.69 1.00 0.39 0.17	Children with Health Insurance Children with Low Access to a Grocery Store Food Insecure Children Likely Ineligible for Assistance Child Food Insecurity Rate  COUNTY HEALTH RANKINGS	percent  percent  percent  percent  percent	93.3 0 17 15.9 UNION COUNTY	100 HP2020	93.7		2017 2015 2016 2016 MEASUREMENT PERIOD	14 18 6 6
1.69 1.00 0.39 0.17	Children with Health Insurance Children with Low Access to a Grocery Store Food Insecure Children Likely Ineligible for Assistance Child Food Insecurity Rate  COUNTY HEALTH RANKINGS Mortality Ranking	percent  percent  percent  percent  percent	93.3 0 17 15.9 UNION		93.7 29 17.7	17.9	2017 2015 2016 2016 MEASUREMENT	14 18 6 6
1.69 1.00 0.39 0.17 SCORE 1.75	Children with Health Insurance Children with Low Access to a Grocery Store Food Insecure Children Likely Ineligible for Assistance Child Food Insecurity Rate  COUNTY HEALTH RANKINGS Mortality Ranking Social and Economic Factors	percent  percent  percent  percent  percent  ranking	93.3 0 17 15.9 UNION COUNTY 82		93.7 29 17.7	17.9	2017 2015 2016 2016 MEASUREMENT PERIOD 2019	14 18 6 6 Source 5
1.69 1.00 0.39 0.17 SCORE 1.75	Children with Health Insurance Children with Low Access to a Grocery Store Food Insecure Children Likely Ineligible for Assistance Child Food Insecurity Rate  COUNTY HEALTH RANKINGS Mortality Ranking Social and Economic Factors Ranking	percent  percent  percent  percent  percent  units  ranking  ranking	93.3 0 17 15.9 UNION COUNTY 82 58		93.7 29 17.7	17.9	2017 2015 2016 2016  MEASUREMENT PERIOD 2019 2019	14 18 6 6 Source 5
1.69 1.00 0.39 0.17 SCORE 1.75	Children with Health Insurance Children with Low Access to a Grocery Store Food Insecure Children Likely Ineligible for Assistance Child Food Insecurity Rate  COUNTY HEALTH RANKINGS Mortality Ranking Social and Economic Factors	percent  percent  percent  percent  percent  ranking	93.3 0 17 15.9 UNION COUNTY 82		93.7 29 17.7	17.9	2017 2015 2016 2016 MEASUREMENT PERIOD 2019	14 18 6 6 Source 5

	APPENDIX B							
1.25	Morbidity Ranking	ranking	14				2019	5
1.25	Physical Environment Ranking	ranking	9				2019	5
SCORE	DIABETES	UNITS	UNION	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.83	Adults 20+ with Diabetes	percent	14.4		11.5	10.2	2015	5
1.89	Diabetic Monitoring: Medicare Population	percent	84.3		86.1	85.7	2015	15
1.33	Diabetes: Medicare Population	percent	25.7		28.1	27.2	2017	4
SCORE	ECONOMY	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.33	Median Household Income	dollars	45531		52182	57652	2013-2017	1
2.22	Per Capita Income	dollars	22527		27305	31177	2013-2017	1
2.17	Unemployed Workers in Civilian Labor Force	percent	4.4		4.1	4.1	February 2019	16
2.00	People Living 200% Above Poverty Level	percent	63.6		66.5	67.2	2013-2017	1
1.97	Median Housing Unit Value	dollars	109900		130200	19350 0	2013-2017	1
1.94	People 65+ Living Below Poverty Level	percent	9.1		7.5	9.3	2013-2017	1
1.78	Population 16+ in Civilian Labor Force	percent	61		63.8	63	2013-2017	1
1.69	Median Monthly Owner Costs for Households without a Mortgage	dollars	417		389	474	2013-2017	1
1.61	Female Population 16+ in Civilian Labor Force	percent	56.4		58.9	58.2	2013-2017	1
1.58	Median Household Gross Rent	dollars	741		782	982	2013-2017	1
1.58	Social and Economic Factors Ranking	ranking	58				2019	5
1.50	Homeownership	percent	63.9		61.2	56	2013-2017	1

2.11	People 25+ with a Bachelor's Degree or Higher	percent	17.6		25.3	30.9	2013-2017	1
SCORE	EDUCATION	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.17	Level	percent	8.2		14.6	14.6	2013-2017	1
	People Living Below Poverty	•						
0.17	Assistance Income	percent	0.9		1.8	2.6	2013-2017	1
0.17	Level Households with Cash Public	percent	4		10.3	10.5	2013-2017	1
	Families Living Below Poverty		_		100		2242 224-	_
0.17	Level	percent	7.4		20.4	20.3	2013-2017	1
0.17	Children Living Below Poverty	percent	15.9		1/./	17.9	2010	О
0.39	Poverty Level Child Food Insecurity Rate	percent	10.7 15.9		23.7 17.7	22.5 17.9	2013-2017 2016	6
0.30	Young Children Living Below		10.7		22.7	22.5	2012 2017	1
0.39	Food Insecure Children Likely Ineligible for Assistance	percent	17		29	20	2016	6
0.50	Students Eligible for the Free Lunch Program	percent	33.2		39.6	40.4	2016-2017	11
0.50	Income Inequality		0.4		0.5	0.5	2013-2017	1
0.56	Severe Housing Problems	percent	10.6		13.7	18.4	2011-2015	5
0.58	Mortgaged Owners Median Monthly Household Costs	dollars	976		1109	1515	2013-2017	1
0.61	Total Employment Change	percent	4		2.2	2.1	2015-2016	17
0.67	Food Insecurity Rate	percent	11.7		13.7	12.9	2016	6
0.75	Persons with Disability Living in Poverty (5-year)	percent	21.2		27	27.1	2013-2017	1
1.00	to a Grocery Store	percent	0				2015	18
1.00	Homeowner Vacancy Rate Low-Income and Low Access	percent	1.6		1.8	1.7	2013-2017	1
1.06	SNAP Certified Stores	stores/ 1,000 population	1		4.0	4 -	2016	18
1.50	on Rent	percent	48.8		47.9	50.6	2013-2017	1
	Renters Spending 30% or More of Household Income							

	APPENDIX B						1	
1.67	4th Grade Students Proficient	norcest	65.0		61.3		2017	2
1.67	in Math	percent	65.9	_	61.2	_	2017	2
1.25	High School Graduation	percent	91.8	87	88.7	84.6	2017	2
	4th Grade Students Proficient							
1.11	in English/Language Arts	percent	81.3		64.9		2017	2
	8th Grade Students Proficient							
1.11	in English/Language Arts	percent	68		60.7		2017	2
1.06	Student-to-Teacher Ratio	students/ teacher	15.4		17.4	16.5	2016-2017	11
	8th Grade Students Proficient							
1.00	in Math	percent	69.7		54.4		2017	2
	People 25+ with a High School							
0.83	Degree or Higher	percent	88.4		88.3	87.3	2013-2017	1
			UNION				MEASUREMENT	
SCORE	ENVIRONMENT	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.39	Houses Built Prior to 1950	percent	36.1		23.4	18	2013-2017	1
2.06	Liquor Store Density	stores/ 100,000 population	13.7		12	10.4	2013	17
1.83	Farmers Market Density	markets/ 1,000 population	0				2016	18
1.83	Grocery Store Density	stores/ 1,000 population	0.1				2014	18
	Recreation and Fitness	, , , , , , , , , , , , , , , , , , , ,					-	
1.83	Facilities	facilities/ 1,000 population	0				2014	18
	Access to Exercise							
1.67	Opportunities	percent	69.7		75.3	83.9	2019	5
	Months of Mild Drought or							
1.61	Worse	months per year	6				2016	13
	Number of Extreme Heat		_					
1.61	Events	events	7				2016	13
1.20	Number of Extreme Heat	daye	26				2016	12
1.39	Days Number of Extreme	days	26				2016	13
1.39	Precipitation Days	days	140				2016	13
1.25	Physical Environment Ranking	ranking	9				2019	5
	,				2427			
1.22	Daily Dose of UV Irradiance	Joule per square meter restaurants/ 1,000	2368		2427		2015	13
1.22	Fast Food Restaurant Density	population	0.6				2014	18
	,	· ·						
1.06	SNAP Certified Stores	stores/ 1,000 population	1				2016	18

	APPENDIX B						i	
	Children with Low Access to a							
1.00	Grocery Store	percent	0				2015	18
	Households with No Car and							
1.00	Low Access to a Grocery Store	percent	1.5				2015	18
	Low-Income and Low Access							
1.00	to a Grocery Store	percent	0				2015	18
	People 65+ with Low Access							
1.00	to a Grocery Store	percent	0				2015	18
	People with Low Access to a						2017	
1.00	Grocery Store	percent	0				2015	18
0.61	Food Environment Index		8.3		7.2	7.3	2017	5
0.56	Severe Housing Problems	percent	10.6		13.7	18.4	2011-2015	5
	EXERCISE, NUTRITION, &		UNION				MEASUREMENT	
SCORE	WEIGHT	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.33	Adults 20+ who are Sedentary	percent	30.5	32.6	25.1	22.2	2015	5
2.22	Workers who Walk to Work	percent	1.5	3.1	2.1	2.7	2013-2017	1
2.00	Adults 20+ who are Obese	percent	33	30.5	32.8	28.5	2015	5
1.83	Farmers Market Density	markets/ 1,000 population	0				2016	18
1.83	Grocery Store Density	stores/ 1,000 population	0.1				2014	18
	Recreation and Fitness							
1.83	Facilities	facilities/ 1,000 population	0				2014	18
	Access to Exercise							
1.67	Opportunities	percent	69.7		75.3	83.9	2019	5
1.25	Health Behaviors Ranking	ranking	20				2019	5
		restaurants/ 1,000						
1.22	Fast Food Restaurant Density	population	0.6				2014	18
1.06	SNAP Certified Stores	stores/ 1,000 population	1				2016	18
	Children with Low Access to a							
1.00	Grocery Store	percent	0				2015	18
	Households with No Car and							
1.00	Low Access to a Grocery Store	percent	1.5				2015	18
	Low-Income and Low Access							
1.00	to a Grocery Store	percent	0				2015	18
4.00	People 65+ with Low Access						2017	4.5
1.00	to a Grocery Store	percent	0				2015	18

SCORE	MATERNAL, FETAL & INFANT HEALTH	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.39	Gonorrhea Incidence Rate	cases/ 100,000 population	0		142.8	145.8	2016	12
0.39	Chlamydia Incidence Rate	cases/ 100,000 population	69.6		466	497.3	2016	12
0.83	Incidence Rate	cases/ 100,000 population	0	11.4	11.1		2017	8
SCORE	Salmonella Infection	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	IMMUNIZATIONS &	LIMITO	UNION	LIDOGGG			MEASUREMENT	6
0.83	Stroke: Medicare Population	percent	3.2		3.7	3.8	2017	4
0.89	Hyperlipidemia: Medicare Population	percent	38		41.3	40.7	2017	4
1.33	Atrial Fibrillation: Medicare Population	percent	8.3		8.4	8.4	2017	4
1.72	Age-Adjusted Death Rate due to Heart Attack	deaths/ 100,000 population 35+ years	87.1		75.6		2015	13
2.17	Hypertension: Medicare Population	percent	60.7		59.4	57.1	2017	4
2.56	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/ 100,000 population	128.4	103.4	101.9	94.8	2015-2017	3
2.61	Ischemic Heart Disease: Medicare Population	percent	31.7		28.3	26.9	2017	4
2.83	Heart Failure: Medicare Population	percent	19		15	13.9	2017	4
SCORE	HEART DISEASE & STROKE	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.17	Child Food Insecurity Rate	percent	15.9		17.7	17.9	2016	6
0.39	Food Insecure Children Likely Ineligible for Assistance	percent	17		29	20	2016	6
0.61	Food Environment Index		8.3		7.2	7.3	2017	5
0.67	Food Insecurity Rate	percent	11.7		13.7	12.9	2016	6
1.00	People with Low Access to a Grocery Store	percent	0				2015	18

	APPENDIX B	·					1	r
	Mothers who Smoked During							
2.53	Pregnancy	percent	29.9	1.4	15.7	8.5	2013	8
2.03	Preterm Births (OE)	percent	13.8	9.4			2008	8
	Mothers who Received Early							
1.58	Prenatal Care	percent	73.9	77.9	68.6	77.3	2017	8
SCORE	MENTAL HEALTH & MENTAL DISORDERS	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Depression: Medicare							
2.33	Population	percent	20.2		20.3	17.9	2017	4
		providers/ 100,000						
2.25	Mental Health Provider Rate	population	13.8		140		2015	5
	Poor Mental Health: Average							
1.50	Number of Days	days	4		4.3	3.8	2016	5
1.00	Frequent Mental Distress	percent	12.1		13.3	15	2016	5
0.78	Alzheimer's Disease or Dementia: Medicare Population	percent	9.4		11.1	10.9	2017	4
SCORE	MORTALITY DATA	UNITS	UNION	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
SCORE		UNITS	COUNTY	ПР2020	inuiana	0.3.	PERIOD	Source
2.67	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/ 100,000 population	100	36.4	52.7	46.7	2015-2017	3
2.61	Premature Death	years/ 100,000 population	10384		8237.6	6900. 6	2015-2017	5
2.56	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/ 100,000 population	128.4	103.4	101.9	94.8	2015-2017	3
2.50	Death Rate due to Drug Poisoning	deaths/ 100,000 population	50.9		23.2	19.2	2015-2017	5
2.42	Age-Adjusted Death Rate due to Colorectal Cancer	deaths/ 100,000 population	41	14.5	18.1		2005-2009	10
1.83	Life Expectancy	years	76.3		77.1	79.1	2015-2017	5
1.75	Mortality Ranking	ranking	82				2019	5
	Age-Adjusted Death Rate due	deaths/ 100,000 population			75.6			
1.72	to Heart Attack	35+ years	87.1		75.6		2015	13

	APPENDIA D							
	Age-Adjusted Death Rate due							
1.11	to Cancer	deaths/ 100,000 population	168.4	161.4	181	163.5	2011-2015	10
	Alcohol-Impaired Driving							
0.39	Deaths	percent	0		20.8	28.6	2013-2017	5
	Age-Adjusted Death Rate due							
0.17	to Lung Cancer	deaths/ 100,000 population	40.2	45.5	53.4	43.4	2011-2015	10
			UNION				MEASUREMENT	
SCORE	OLDER ADULTS & AGING	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Heart Failure: Medicare							
2.83	Population	percent	19		15	13.9	2017	4
	Ischemic Heart Disease:							
2.61	Medicare Population	percent	31.7		28.3	26.9	2017	4
2.61	People 65+ Living Alone	percent	35.3		27.7	26.2	2013-2017	1
	Mammography Screening:							
2.39	Medicare Population	percent	54.8		62.3	63.2	2015	15
	Depression: Medicare							
2.33	Population	percent	20.2		20.3	17.9	2017	4
	Hypertension: Medicare		66 -		<b>50</b> .		2017	
2.17	Population	percent	60.7		59.4	57.1	2017	4
2.00	Chronic Kidney Disease:	wayaant.	24.4		25.4	24	2017	_
2.00	Medicare Population	percent	24.4		25.1	24	2017	4
1.94	People 65+ Living Below Poverty Level	percent	9.1		7.5	9.3	2013-2017	1
1.54	Diabetic Monitoring:	ρειτεπι	9.1		7.5	<i>J</i> .3	2013-2017	
1.89	Medicare Population	percent	84.3		86.1	85.7	2015	15
2.00	Rheumatoid Arthritis or	percerie	00		00.1	33.7	2023	10
	Osteoarthritis: Medicare							
1.50	Population	percent	32.3		34.5	33.1	2017	4
1.33	Asthma: Medicare Population	percent	4.6		5.2	5.1	2017	4
	Atrial Fibrillation: Medicare	,	_					
1.33	Population	percent	8.3		8.4	8.4	2017	4
	Diabetes: Medicare							
1.33	Population	percent	25.7		28.1	27.2	2017	4
1.06	COPD: Medicare Population	percent	12.7		14.4	11.7	2017	4
	People 65+ with Low Access							
1.00	to a Grocery Store	percent	0				2015	18
	•	•						

0.17	Incidence Rate	cases/ 100,000 population	53		72.8	60.2	2011-2015	10
0.17	Lung and Bronchus Cancer	acatilis/ 100,000 population	70.2	73.3	JJ. <del>4</del>	73.4	2011-2013	10
0.17	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	40.2	45.5	53.4	43.4	2011-2015	10
1.06	COPD: Medicare Population	percent	12.7		14.4	11.7	2017	4
1.33	Asthma: Medicare Population	percent .	4.6		5.2	5.1	2017	4
				111 2020				
SCORE	RESPIRATORY DISEASES	UNITS	UNION	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.56	Severe Housing Problems	percent	10.6		13.7	18.4	2011-2015	5
2.50	Death Rate due to Drug Poisoning	deaths/ 100,000 population	50.9		23.2	19.2	2015-2017	5
2.67	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/ 100,000 population	100	36.4	52.7	46.7	2015-2017	3
SCORE	PREVENTION & SAFETY	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.50	Population	percent	5.1		6.2	6.4	2017	4
1.50	Population Osteoporosis: Medicare	percent	32.3		34.5	33.1	2017	4
	Rheumatoid Arthritis or Osteoarthritis: Medicare							
2.00	Chronic Kidney Disease: Medicare Population	percent	24.4		25.1	24	2017	4
SCORE	OTHER CHRONIC DISEASES	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
0.50	Population	percent	5.1		6.2	6.4	2017	4
0.50	Osteoporosis: Medicare	percent	0.5		7.0	0.2	2017	-
0.78	Cancer: Medicare Population	percent	6.9		7.8	8.2	2017	4
0.78	Alzheimer's Disease or Dementia: Medicare Population	percent	9.4		11.1	10.9	2017	4
0.83	Stroke: Medicare Population	percent	3.2		3.7	3.8	2017	4
0.89	Population	percent	38		41.3	40.7	2017	4

	APPENDIX B							
SCORE	SOCIAL ENVIRONMENT	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	People 65+ Living Alone	percent	35.3		27.7	26.2	2013-2017	1
2.33	Median Household Income	dollars	45531		52182	57652	2013-2017	1
2.25	Households with an Internet Subscription	percent	65.8		75.9	78.7	2013-2017	1
2.22	Per Capita Income	dollars	22527		27305	31177	2013-2017	1
2.11	Child Abuse Rate	cases/ 1,000 children	26.2		17.1		2015	2
2.11	People 25+ with a Bachelor's Degree or Higher Single-Parent Households	percent	17.6 36.2		25.3 33.6	30.9 33.3	2013-2017 2013-2017	1
2.11	Single-Farent Households	percent	30.2		33.0	19350	2013-2017	<b>T</b>
1.97	Median Housing Unit Value	dollars	109900		130200	0	2013-2017	1
1.78	Population 16+ in Civilian Labor Force	percent	61		63.8	63	2013-2017	1
1.78	Voter Turnout: Presidential Election	percent	57		58		2016	7
1.75	Households with One or More Types of Computing Devices	percent	81.2		85.5	87.2	2013-2017	1
1.69	Median Monthly Owner Costs for Households without a Mortgage	dollars	417		389	474	2013-2017	1
1.61	Female Population 16+ in Civilian Labor Force	percent	56.4		58.9	58.2	2013-2017	1
1.61	Social Associations	membership associations/ 10,000 population	11.1		12.3	9.3	2016	5
1.58	Median Household Gross Rent	dollars	741		782	982	2013-2017	1
1.58	Social and Economic Factors Ranking	ranking	58				2019	5
1.50	Homeownership	percent	63.9		61.2	56	2013-2017	1
1.44	Mean Travel Time to Work	minutes	23.6		23.4	26.4	2013-2017	1
1.14	Persons with Health Insurance	percent	90.8	100	90.4		2017	14
0.83	People 25+ with a High School Degree or Higher	percent	88.4		88.3	87.3	2013-2017	1

	APPENDIX B							
0.61	Total Employment Change	percent	4		2.2	2.1	2015-2016	17
	Mortgaged Owners Median							
0.58	Monthly Household Costs	dollars	976		1109	1515	2013-2017	1
0.39	Linguistic Isolation	percent	0		1.7	4.5	2013-2017	1
	Young Children Living Below	·						
0.39	Poverty Level	percent	10.7		23.7	22.5	2013-2017	1
	Children Living Below Poverty							
0.17	Level	percent	7.4		20.4	20.3	2013-2017	1
	People Living Below Poverty							
0.17	Level	percent	8.2		14.6	14.6	2013-2017	1
			UNION				MEASUREMENT	
SCORE	SUBSTANCE ABUSE	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Mothers who Smoked During							
2.53	Pregnancy	percent	29.9	1.4	15.7	8.5	2013	8
	Death Rate due to Drug							
2.50	Poisoning	deaths/ 100,000 population	50.9		23.2	19.2	2015-2017	5
2.06	Liquor Store Density	stores/ 100,000 population	13.7		12	10.4	2013	17
1.83	Adults who Smoke	percent	19.8	12	21.1	17	2016	5
1.25	Health Behaviors Ranking	ranking	20				2019	5
1.00	Adults who Drink Excessively	percent	17.1	25.4	18.6	18	2016	5
	Alcohol-Impaired Driving							
0.39	Deaths	percent	0		20.8	28.6	2013-2017	5
			UNION				MEASUREMENT	
SCORE	TRANSPORTATION	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Workers Commuting by							
2.33	Public Transportation	percent	0.1	5.5	1	5.1	2013-2017	1
2.22	Workers who Walk to Work	percent	1.5	3.1	2.1	2.7	2013-2017	1
	Solo Drivers with a Long							
1.61	Commute	percent	32.3		30.7	35.2	2013-2017	5
1.44	Mean Travel Time to Work	minutes	23.6		23.4	26.4	2013-2017	1
	Workers who Drive Alone to							
1.39	Work	percent	82.5		83	76.4	2013-2017	1
	Households with No Car and							
1.00	Low Access to a Grocery Store	percent	1.5				2015	18

0.61	Households without a Vehicle	percent	3.9		6.7	8.8	2013-2017	1
SCORE	WELLNESS & LIFESTYLE	UNITS	UNION COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
1.83	Life Expectancy	years	76.3		77.1	79.1	2015-2017	5
	Poor Physical Health: Average							
1.33	Number of Days	days	3.8		3.9	3.7	2016	5
1.25	Morbidity Ranking	ranking	14				2019	5
1.17	Insufficient Sleep	percent	33.5		36	38	2016	5
1.00	Frequent Physical Distress	percent	11.2		11.9	15	2016	5
1.00	Self-Reported General Health Assessment: Poor or Fair	percent	15.6		17.7	16	2016	5

# WAYNE COUNTY, INDIANA

SCORE	ACCESS TO HEALTH SERVICES	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
	Adults with Health Insurance:							
1.75	18-64	percent	87.3	100	89		2017	14
	Persons with Health							
1.75	Insurance	percent	89	100	90.4		2017	14
	Children with Health							
1.69	Insurance	percent	93.5	100	93.7		2017	14
1.42	Clinical Care Ranking	ranking	27				2019	5
1.22	Dentist Rate	dentists/ 100,000 population	57.4		55.2	68.4	2017	5
1.17	Primary Care Provider Rate	providers/ 100,000 population	61.6		66.9	75.4	2016	5
1.00	Preventable Hospital Stays: Medicare Population	discharges/ 1,000 Medicare enrollees	51.2		56.8	49.4	2015	15

	APPENDIX B	providers/100,000						_
0.61	Mental Health Provider Rate	population	471.4		149.5	228.7	2018	5
	Non-Physician Primary Care	providers/ 100,000	407.0			20.0		_
0.17	Provider Rate	population	107.3		80.3	88.2	2018	5
			WAYNE				MEASUREMENT	
SCORE	CANCER	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Cervical Cancer Incidence							
2.31	Rate	cases/ 100,000 females	11.9	7.3	7.8	7.5	2011-2015	10
	Colorectal Cancer Incidence							
2.28	Rate	cases/ 100,000 population	44.2	39.9	42.9	39.2	2011-2015	10
	Lung and Bronchus Cancer							
2.22	Incidence Rate	cases/ 100,000 population	81.4		72.8	60.2	2011-2015	10
	Age-Adjusted Death Rate due							
2.17	to Lung Cancer	deaths/ 100,000 population	61.1	45.5	53.4	43.4	2011-2015	10
	Oral Cavity and Pharynx							
2.06	Cancer Incidence Rate	cases/ 100,000 population	14.4		12	11.6	2011-2015	10
	Age-Adjusted Death Rate due							
2.00	to Cancer	deaths/ 100,000 population	196.1	161.4	181	163.5	2011-2015	10
1.89	All Cancer Incidence Rate	cases/ 100,000 population	472.4		447	441.2	2011-2015	10
	Prostate Cancer Incidence							
1.89	Rate	cases/ 100,000 males	107.3		92.7	109	2011-2015	10
1.28	Breast Cancer Incidence Rate	cases/ 100,000 females	115.1		121.7	124.7	2011-2015	10
	Mammography Screening:							
1.22	Medicare Population	percent	62.5		62.3	63.2	2015	15
	·	percent	02.3		02.0	00.2	2013	
4.44	Age-Adjusted Death Rate due	double / 400,000	440	445	45.0	445	2044 2045	40
1.11	to Colorectal Cancer	deaths/ 100,000 population	14.9	14.5	15.9	14.5	2011-2015	10
	Age-Adjusted Death Rate due							
1.00	to Breast Cancer	deaths/ 100,000 females	20.7	20.7	21.4	20.9	2011-2015	10
	Age-Adjusted Death Rate due							
0.44	to Prostate Cancer	deaths/ 100,000 males	16.4	21.8	20.4	19.5	2011-2015	10
0.33	Cancer: Medicare Population	percent	6.7		7.8	8.2	2017	4
		P = 15115						
			14/41/215				BAEACUDERAEN:	
CCORE	CHII DDENI'S HEALTH	LINUTE	WAYNE	прэдэд	Indiana	11.6	MEASUREMENT	Course
SCORE	CHILDREN'S HEALTH	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source

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2.00	Child Food Insecurity Rate	percent	21.5		17.7	17.9	2016	6
1.75	Blood Lead Levels in Children (>5 micrograms per deciliter)	percent	3.2		2.4		2014	13
1.69	Children with Health Insurance	percent	93.5	100	93.7		2017	14
1.67	Child Abuse Rate	cases/ 1,000 children	15.6		17.1		2015	2
1.50	Children with Low Access to a Grocery Store	percent	3.4				2015	18
0.89	Food Insecure Children Likely Ineligible for Assistance	percent	20		29	20	2016	6
SCORE	COUNTY HEALTH RANKINGS	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
1.75	Morbidity Ranking	ranking	81				2019	5
1.75	Mortality Ranking	ranking	89				2019	5
1.75	Social and Economic Factors Ranking	ranking	86				2019	5
1.58	Health Behaviors Ranking	ranking	69				2019	5
1.42	Clinical Care Ranking	ranking	27				2019	5
1.42	Physical Environment Ranking	ranking	43				2019	5
SCORE	DIABETES	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.28	Adults 20+ with Diabetes	percent	12.7		11.5	10.2	2015	5
2.06	Age-Adjusted Death Rate due to Diabetes	deaths/ 100,000 population	29.5		26.5	21.2	2015-2017	3
1.78	Diabetes: Medicare Population	percent	27.9		28.1	27.2	2017	4
1.50	Diabetic Monitoring: Medicare Population	percent	85.3		86.1	85.7	2015	15
SCORE	ECONOMY	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	Total Employment Change	percent	-3		2.2	2.1	2015-2016	17

	People 65+ Living Below						
2.28	Poverty Level	percent	10.2	7.5	9.3	2013-2017	1
2.20		percent	10.2	7.5	3.3	2013 2017	
2.25	Persons with Disability Living in Poverty (5-year)	percent	30.9	27	27.1	2013-2017	1
2.23	Children Living Below Poverty	регсепс	30.9	27	27.1	2013-2017	
2.22	Level	percent	26.3	20.4	20.3	2013-2017	1
	People Living Below Poverty	percent	20.0	20.1	20.0	2010 2017	-
2.22	Level	percent	18.2	14.6	14.6	2013-2017	1
2.17	Homeownership	percent .	56.8	61.2	56	2013-2017	1
	Young Children Living Below	,					
2.17	Poverty Level	percent	33.4	23.7	22.5	2013-2017	1
	Households with Cash Public						
2.11	Assistance Income	percent	2.4	1.8	2.6	2013-2017	1
2.00	Child Food Insecurity Rate	percent	21.5	17.7	17.9	2016	6
	Families Living Below Poverty	μουσουσ		=: .,			
2.00	Level	percent	13.5	10.3	10.5	2013-2017	1
2.00	Food Insecurity Rate	percent	15.6	13.7	12.9	2016	6
2.00	Income Inequality	·	0.5	0.5	0.5	2013-2017	1
	, ,				5765		
2.00	Median Household Income	dollars	41813	52182	2	2013-2017	1
	People Living 200% Above						
2.00	Poverty Level	percent	59.1	66.5	67.2	2013-2017	1
	Students Eligible for the Free						
2.00	Lunch Program	percent	49.4	39.6	40.4	2016-2017	11
4.07	Madian Hausing Huit Malus	da Harra	06500	120200	1935	2042 2047	4
1.97	Median Housing Unit Value Unemployed Workers in	dollars	96500	130200	00	2013-2017	1
1.94	Civilian Labor Force	percent	4.3	4.1	4.1	February 2019	16
2.54	Population 16+ in Civilian	percent	1.5	11.1	11.2	repractly 2015	10
1.89	Labor Force	percent	57.7	63.8	63	2013-2017	1
1.83	Homeowner Vacancy Rate	percent	2.5	1.8	1.7	2013-2017	1
	2.2.2.2.4.1.3.3.2	<b>1</b>	-		3117		
1.83	Per Capita Income	dollars	23895	27305	7	2013-2017	1
	Social and Economic Factors						
1.75	Ranking	ranking	86			2019	5
	Female Population 16+ in						
1.72	Civilian Labor Force	percent	54.3	58.9	58.2	2013-2017	1

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	Low-Income and Low Access							
1.67	to a Grocery Store	percent	6.6				2015	18
	Renters Spending 30% or							
4.56	More of Household Income		47.0		47.0	50.6	2042 2047	
1.56	on Rent	percent	47.8		47.9	50.6	2013-2017	1
1.56	Severe Housing Problems	percent	14.8		13.7	18.4	2011-2015	5
	Median Monthly Owner Costs							
	for Households without a							
1.25	Mortgage	dollars	370		389	474	2013-2017	1
4.00	Persons with Disability Living						2217	
1.08	in Poverty	percent	24.7		26.5	26	2017	1
1.06	SNAP Certified Stores	stores/ 1,000 population	1				2016	18
	Median Household Gross							
0.92	Rent	dollars	665		782	982	2013-2017	1
	Food Insecure Children Likely							
0.89	Ineligible for Assistance	percent	20		29	20	2016	6
	Mortgaged Owners Median							
0.64	Monthly Household Costs	dollars	933		1109	1515	2013-2017	1
0.01	monthly moderned costs	donars	333		1100	1313	2010 2017	_
			WAYNE				MEASUREMENT	
SCORE	EDUCATION	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	8th Grade Students Proficient							
2.11	in Math	percent	41.9		54.4		2017	2
	People 25+ with a Bachelor's							
2.00	Degree or Higher	percent	18.2		25.3	30.9	2013-2017	1
	4th Grade Students Proficient	percent	10.2		23.0	30.3	2010 2017	_
1.94	in Math	percent	56.2		61.2		2017	2
		<i>γ</i>						_
1.72	People 25+ with a High School Degree or Higher	norcent	85.5		88.3	87.3	2013-2017	1
1.72	School Degree of Higher	percent	83.5		88.3	67.3	2013-2017	1
	4th Grade Students Proficient							
1.61	in English/Language Arts	percent	65.2		64.9		2017	2
	8th Grade Students Proficient							
1.44	in English/Language Arts	percent	61.5		60.7		2017	2
		•						
0.64	High School Graduation	percent	96.3	87	88.7	84.6	2017	2
0.64 0.50	High School Graduation Student-to-Teacher Ratio	percent students/ teacher	96.3 14.6	87	88.7 17.4	84.6 16.5	2017 2016-2017	2 11

SCORE	ENVIRONMENT	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.83	Liquor Store Density	stores/ 100,000 population	21		12.5	10.5	2016	17
2.50	Houses Built Prior to 1950	percent	37.2		23.4	18	2013-2017	1
2.11	Grocery Store Density	stores/ 1,000 population	0.1				2014	18
1.75	Blood Lead Levels in Children (>5 micrograms per deciliter)	percent	3.2		2.4		2014	13
1.67	Access to Exercise Opportunities	percent	72.2		75.3	83.9	2019	5
1.67	Low-Income and Low Access to a Grocery Store	percent	6.6				2015	18
1.61	Number of Extreme Heat Events	events	9				2016	13
1.61	Recognized Carcinogens Released into Air	pounds	263.6				2017	19
1.56	Fast Food Restaurant Density	restaurants/ 1,000 population	0.6				2014	18
1.56	Severe Housing Problems	percent	14.8		13.7	18.4	2011-2015	5
1.50	Children with Low Access to a Grocery Store	percent	3.4				2015	18
1.50	Food Environment Index		7.3		7.1	7.7	2019	5
1.50	People 65+ with Low Access to a Grocery Store	percent	2.5				2015	18
1.50	People with Low Access to a Grocery Store	percent	14.5				2015	18
1.42	Physical Environment Ranking		43				2019	5
1.39	Months of Mild Drought or Worse	months per year	5				2016	13
1.39	Number of Extreme Heat Days	days	30				2016	13
1.39	Number of Extreme Precipitation Days	days	136				2016	13
1.33	Farmers Market Density	markets/ 1,000 population	0				2016	18

	APPENDIX B			1	î			1
	Households with No Car and							
	Low Access to a Grocery							
1.33	Store	percent	2.3				2015	18
1.22	Daily Dose of UV Irradiance	Joule per square meter	2340		2427		2015	13
	Recreation and Fitness							
1.22	Facilities	facilities/ 1,000 population	0.1				2014	18
1.06	SNAP Certified Stores	stores/ 1,000 population	1				2016	18
	ENVIRONMENTAL &		WAYNE				MEASUREMENT	
SCORE	OCCUPATIONAL HEALTH	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
				111 2020				
2.28	Asthma: Medicare Population	percent	5.4		5.2	5.1	2017	4
	Blood Lead Levels in Children							
1.75	(>5 micrograms per deciliter)	percent	3.2		2.4		2014	13
1.42	Physical Environment Ranking	ranking	43				2019	5
	EXERCISE, NUTRITION, &		WAYNE				MEASUREMENT	
SCORE	WEIGHT	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
					-			
2.56	Adults 20+ who are Sedentary	percent	32	32.6	25.1	22.2	2015	5
2.11	Grocery Store Density	stores/ 1,000 population	0.1				2014	18
2.00	Child Food Insecurity Rate	percent	21.5		17.7	17.9	2016	6
2.00	Food Insecurity Rate	percent	15.6		13.7	12.9	2016	6
	Access to Exercise							
1.67	Opportunities	percent	72.2		75.3	83.9	2019	5
	Low-Income and Low Access							
1.67	to a Grocery Store	percent	6.6				2015	18
1.58	Health Behaviors Ranking	ranking	69				2019	5
		restaurants/ 1,000						-
1.56	Fast Food Restaurant Density	population	0.6				2014	18
	Children with Low Access to a							
1.50	Grocery Store	percent	3.4				2015	18
1.50	Food Environment Index		7.3		7.1	7.7	2019	5
	People 65+ with Low Access						_	
1.50	·	narcent	2 5				2015	18
1.50	to a Grocery Store People with Low Access to a	percent	2.5				2015	10
1.50	Grocery Store	nercent	14.5				2015	18
1.50	Grocery Store	percent	14.5				2013	10

1.33	Adults 20+ who are Obese	percent	30.9	30.5	32.8	28.5	2015	5
1.33	Farmers Market Density	markets/ 1,000 population	0				2016	18
1.33	Households with No Car and Low Access to a Grocery Store	percent	2.3				2015	18
1.22	Recreation and Fitness Facilities	facilities/ 1,000 population	0.1				2014	18
1.06	SNAP Certified Stores	stores/ 1,000 population	1				2016	18
0.89	Food Insecure Children Likely Ineligible for Assistance	percent	20		29	20	2016	6
0.39	Workers who Walk to Work	percent	3	3.1	2.1	2.7	2013-2017	1
SCORE	HEART DISEASE & STROKE	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
3.00	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/ 100,000 population	179.2	103.4	101.9	94.8	2015-2017	3
2.83	Heart Failure: Medicare Population	percent	22.4		15	13.9	2017	4
2.83	Ischemic Heart Disease: Medicare Population	percent	34.8		28.3	26.9	2017	4
2.17	Hypertension: Medicare Population	percent	61.5		59.4	57.1	2017	4
2.00	Age-Adjusted Death Rate due to Heart Attack	deaths/ 100,000 population 35+ years	119.8		75.6		2015	13
1.33	Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)	deaths/ 100,000 population	40.5	34.8	39.6	37.5	2015-2017	3
1.11	Atrial Fibrillation: Medicare Population	percent	7.7		8.4	8.4	2017	4
1.00	Hyperlipidemia: Medicare Population	percent	37.8		41.3	40.7	2017	4
0.56	Stroke: Medicare Population	percent	3.1		3.7	3.8	2017	4
SCORE	IMMUNIZATIONS & INFECTIOUS DISEASES	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source

	ALL FINDIV D							
2.11	Hepatitis C Prevalence	Rate per 100,000 population	285.6		126.1		2017	8
2.11	Salmonella Infection	ρομαιατίση	283.0		120.1		2017	0
1.56	Incidence Rate	cases/ 100,000 population	10.6	11.4	11.1		2017	8
1.33	Chlamydia Incidence Rate	cases/ 100,000 population	411.9		466	497.3	2016	12
1.33	Gonorrhea Incidence Rate	cases/ 100,000 population	114.9		142.8	145.8	2016	12
1.22	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/ 100,000 population	13.9		13.4	14.3	2015-2017	3
SCORE	MATERNAL, FETAL & INFANT HEALTH	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.53	Mothers who Received Early Prenatal Care	percent	61.6	77.9	68.6	77.3	2017	8
1.81	Mothers who Smoked During Pregnancy	percent	14.5	1.4	13.5	6.9	2017	8
1.72	Teen Birth Rate: 15-19	live births/ 1,000 females aged 15-19	28.5		22.8		2017	8
1.64	Infant Mortality Rate	deaths/ 1,000 live births	7.8	6	7.3		2013-2017	8
0.75	Babies with Low Birth Weight	percent	7.3	7.8	8.3	8.3	2017	8
0.47	Preterm Births (OE)	percent	7.2	9.4	9.9	9.9	2017	8
SCORE	MENTAL HEALTH & MENTAL DISORDERS	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.83	Depression: Medicare Population	percent	24.7		20.3	17.9	2017	4
2.58	Age-Adjusted Death Rate due to Suicide	deaths/ 100,000 population	20.8	10.2	15.4	13.6	2015-2017	3
2.50	Alzheimer's Disease or Dementia: Medicare Population	percent	11.6		11.1	10.9	2017	4
2.33	Poor Mental Health: Average Number of Days	days	4.4		4.3	3.8	2016	5
1.67	Frequent Mental Distress	percent	13.5		13.3	15	2016	5
1.22	Age-Adjusted Death Rate due to Alzheimer's Disease	deaths/ 100,000 population	32.7		34.4	30.3	2015-2017	3

	AFFEINDIA D	providers/ 100,000						
0.61	Mental Health Provider Rate	population	471.4		149.5	228.7	2018	5
SCORE	MORTALITY DATA	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
3.00	Age-Adjusted Death Rate due to Coronary Heart Disease	deaths/ 100,000 population	179.2	103.4	101.9	94.8	2015-2017	3
3.00	Age-Adjusted Death Rate due to Unintentional Injuries	deaths/ 100,000 population	99.6	36.4	52.7	46.7	2015-2017	3
2.83	Death Rate due to Drug Poisoning	deaths/ 100,000 population	66.6		23.2	19.2 6900.	2015-2017	5
2.83	Premature Death	years/ 100,000 population	11324		8237.6	6	2015-2017	5
2.58	Age-Adjusted Death Rate due to Suicide	deaths/ 100,000 population	20.8	10.2	15.4	13.6	2015-2017	3
2.36	Age-Adjusted Death Rate due to Unintentional Poisonings	deaths/ 100,000 population	35.8		24.3	19.3	2015-2017	3
2.17	Age-Adjusted Death Rate due to Lung Cancer	deaths/ 100,000 population	61.1	45.5	53.4	43.4	2011-2015	10
2.17	Life Expectancy	years	74.3		77.1	79.1	2015-2017	5
2.06	Age-Adjusted Death Rate due to Diabetes	deaths/ 100,000 population	29.5		26.5	21.2	2015-2017	3
2.00	Age-Adjusted Death Rate due to Cancer	deaths/ 100,000 population	196.1	161.4	181	163.5	2011-2015	10
2.00	Age-Adjusted Death Rate due to Heart Attack	deaths/ 100,000 population 35+ years	119.8		75.6		2015	13
1.75	Age-Adjusted Death Rate due to Falls	deaths/ 100,000 population	8.4	7.2	6	8.9	2014-2016	3
1.75	Mortality Ranking	ranking	89				2019	5
1.72	Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/ 100,000 population	55.2		55	41	2015-2017	3
1.64	Infant Mortality Rate	deaths/ 1,000 live births	7.8	6	7.3	71	2013-2017	8
1.04	Age-Adjusted Death Rate due to Motor Vehicle Traffic		7.0					3
1.36	Collisions	deaths/ 100,000 population	11.9	12.4	12.3	11.4	2015-2017	3

	Age-Adjusted Death Rate due							
	to Cerebrovascular Disease							
1.33	(Stroke)	deaths/ 100,000 population	40.5	34.8	39.6	37.5	2015-2017	3
	Age-Adjusted Death Rate due							
1.22	to Alzheimer's Disease	deaths/ 100,000 population	32.7		34.4	30.3	2015-2017	3
	Age-Adjusted Death Rate due							
1.22	to Influenza and Pneumonia	deaths/ 100,000 population	13.9		13.4	14.3	2015-2017	3
	Age-Adjusted Death Rate due	, , , , , , , , , , , , , , , , , , , ,						_
1.11	to Colorectal Cancer	deaths/ 100,000 population	14.9	14.5	15.9	14.5	2011-2015	10
1.11		deathsy 100,000 population	14.5	14.5	13.3	14.5	2011 2013	10
1.00	Age-Adjusted Death Rate due	donths / 100,000 formales	20.7	20.7	21.4	20.9	2011 2015	10
1.00	to Breast Cancer Alcohol-Impaired Driving	deaths/ 100,000 females	20.7	20.7	21.4	20.9	2011-2015	10
0.78	Deaths	percent	14.9		20.8	28.6	2013-2017	5
0.70		percent	11.3		20.0	20.0	2013 2017	
0.72	Age-Adjusted Death Rate due	deaths/ 100,000 population	12.5		18.6	13.2	2015-2017	2
0.72	to Kidney Disease	deaths/ 100,000 population	12.5		10.0	13.2	2015-2017	3
	Age-Adjusted Death Rate due	1 11 /100 000	46.4	24.0	20.4	10.5	2011 2015	40
0.44	to Prostate Cancer	deaths/ 100,000 males	16.4	21.8	20.4	19.5	2011-2015	10
			14/43/415					
CCORE	OLDER ADULTS & ACINC	LIMITS	WAYNE	LID2020	Indiana	11.6	MEASUREMENT	Course
SCORE	OLDER ADULTS & AGING	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.83	Chronic Kidney Disease: Medicare Population	percent	30		25.1	24	2017	4
2.03	Depression: Medicare	percent	30		23.1	24	2017	4
2.83	Population	percent	24.7		20.3	17.9	2017	4
	Heart Failure: Medicare	p = = = = = = = = = = = = = = = = = = =						
2.83	Population	percent	22.4		15	13.9	2017	4
	Ischemic Heart Disease:							
2.83	Medicare Population	percent	34.8		28.3	26.9	2017	4
	Rheumatoid Arthritis or	F - 22	- ··· <b>-</b>					-
	Osteoarthritis: Medicare							
2.61	Population	percent	38.9		34.5	33.1	2017	4
	Alzheimer's Disease or							
	Dementia: Medicare							
2.50	Population	percent	11.6		11.1	10.9	2017	4

				_				
2.28	Asthma: Medicare Population	percent	5.4		5.2	5.1	2017	4
	People 65+ Living Below							
2.28	Poverty Level	percent	10.2		7.5	9.3	2013-2017	1
2.22	People 65+ Living Alone	percent	29.8		27.7	26.2	2013-2017	1
2.17	COPD: Medicare Population	percent	14.6		14.4	11.7	2017	4
	Hypertension: Medicare							
2.17	Population	percent	61.5		59.4	57.1	2017	4
	Osteoporosis: Medicare							
2.17	Population	percent	7.6		6.2	6.4	2017	4
	Diabetes: Medicare							_
1.78	Population	percent	27.9		28.1	27.2	2017	4
1.75	Age-Adjusted Death Rate due	dogths / 100 000 ====:/=ti==	0.4	7.3	_	0.0	2014 2016	_
1.75	to Falls	deaths/ 100,000 population	8.4	7.2	6	8.9	2014-2016	3
1.50	Diabetic Monitoring: Medicare Population	percent	85.3		86.1	85.7	2015	15
1.50	·	percent	85.5		00.1	65.7	2013	13
4.50	People 65+ with Low Access		2.5				2015	40
1.50	to a Grocery Store	percent	2.5				2015	18
	Age-Adjusted Death Rate due							
1.22	to Alzheimer's Disease	deaths/ 100,000 population	32.7		34.4	30.3	2015-2017	3
	Mammography Screening:							
1.22	Medicare Population	percent	62.5		62.3	63.2	2015	15
	Atrial Fibrillation: Medicare							
1.11	Population	percent	7.7		8.4	8.4	2017	4
	Hyperlipidemia: Medicare							
1.00	Population	percent	37.8		41.3	40.7	2017	4
0.56	Stroke: Medicare Population	percent	3.1		3.7	3.8	2017	4
0.33	Cancer: Medicare Population	percent	6.7		7.8	8.2	2017	4
			WAYNE				MEASUREMENT	
SCORE	OTHER CHRONIC DISEASES	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
	Chronic Kidney Disease:							
2.83	Medicare Population	percent	30		25.1	24	2017	4
	Rheumatoid Arthritis or							
	Osteoarthritis: Medicare							
2.61	Population	percent	38.9		34.5	33.1	2017	4

	Osteoporosis: Medicare							
2.17	Population	percent	7.6		6.2	6.4	2017	4
0.72	Age-Adjusted Death Rate due to Kidney Disease	deaths/ 100,000 population	12.5		18.6	13.2	2015-2017	3
SCORE	PREVENTION & SAFETY	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
3.00	Age-Adjusted Death Rate due to Unintentional Injuries Death Rate due to Drug	deaths/ 100,000 population	99.6	36.4	52.7	46.7	2015-2017	3
2.83	Poisoning	deaths/ 100,000 population	66.6		23.2	19.2	2015-2017	5
2.36	Age-Adjusted Death Rate due to Unintentional Poisonings	deaths/ 100,000 population	35.8		24.3	19.3	2015-2017	3
1.75	Age-Adjusted Death Rate due to Falls	deaths/ 100,000 population	8.4	7.2	6	8.9	2014-2016	3
1.56	Severe Housing Problems	percent	14.8		13.7	18.4	2011-2015	5
SCORE	PUBLIC SAFETY	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
1.67	Child Abuse Rate	cases/ 1,000 children	15.6		17.1		2015	2
1.58	Violent Crime Rate	crimes/ 100,000 population	282.7		333.7	393.1	2010-2012	5
1.36	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions	deaths/ 100,000 population	11.9	12.4	12.3	11.4	2015-2017	3
0.78	Alcohol-Impaired Driving							
	Deaths	percent	14.9		20.8	28.6	2013-2017	5
SCORE	•	percent UNITS	14.9 WAYNE COUNTY	HP2020	20.8	28.6 U.S.	2013-2017  MEASUREMENT PERIOD	5 Source
SCORE 2.28	Deaths	·	WAYNE	HP2020			MEASUREMENT	
	RESPIRATORY DISEASES  Asthma: Medicare Population Lung and Bronchus Cancer Incidence Rate	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.28	RESPIRATORY DISEASES  Asthma: Medicare Population Lung and Bronchus Cancer	UNITS  percent	WAYNE COUNTY 5.4	<b>HP2020</b> 45.5	Indiana 5.2	<b>U.S.</b> 5.1	MEASUREMENT PERIOD 2017	Source 4

1.72	APPENDIX B  Age-Adjusted Death Rate due to Chronic Lower Respiratory Diseases	deaths/ 100,000 population	55.2		55	41	2015-2017	3
1.22	Age-Adjusted Death Rate due to Influenza and Pneumonia	deaths/ 100,000 population	13.9		13.4	14.3	2015-2017	3
SCORE	SOCIAL ENVIRONMENT	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.61	Total Employment Change	percent	-3		2.2	2.1	2015-2016	17
2.50	Single-Parent Households	percent	40.5		33.6	33.3	2013-2017	1
2.25	Households with an Internet Subscription	percent	66.3		75.9	78.7	2013-2017	1
2.22	Children Living Below Poverty Level	percent	26.3		20.4	20.3	2013-2017	1
2.22	People 65+ Living Alone	percent	29.8		27.7	26.2	2013-2017	1
2.22	People Living Below Poverty Level	percent	18.2		14.6	14.6	2013-2017	1
2.17	Homeownership	percent	56.8		61.2	56	2013-2017	1
2.17	Young Children Living Below Poverty Level	percent	33.4		23.7	22.5	2013-2017	1
2.00	Median Household Income	dollars	41813		52182	5765 2	2013-2017	1
2.00	People 25+ with a Bachelor's Degree or Higher	percent	18.2		25.3	30.9	2013-2017	1
1.97	Median Housing Unit Value	dollars	96500		130200	1935 00	2013-2017	1
1.89	Population 16+ in Civilian Labor Force	percent	57.7		63.8	63	2013-2017	1
1.83	Per Capita Income	dollars	23895		27305	3117 7	2013-2017	1
1.75	Households with One or More Types of Computing Devices	percent	81.4		85.5	87.2	2013-2017	1
1.75	Persons with Health Insurance	percent	89	100	90.4		2017	14
1.75	Social and Economic Factors Ranking	ranking	86				2019	5

	APPENDIA D							
1.72	Female Population 16+ in Civilian Labor Force	percent	54.3		58.9	58.2	2013-2017	1
1.72	People 25+ with a High School Degree or Higher	percent	85.5		88.3	87.3	2013-2017	1
1.67	Child Abuse Rate	cases/ 1,000 children	15.6		17.1		2015	2
1.25	Median Monthly Owner Costs for Households without a Mortgage	dollars	370		389	474	2013-2017	1
1.00	Voter Turnout: Presidential Election	percent	61		58		2016	7
0.94	Social Associations	membership associations/ 10,000 population	15.9		12.3	9.3	2016	5
0.92	Median Household Gross Rent	dollars	665		782	982	2013-2017	1
0.72	Linguistic Isolation	percent	0.6		1.7	4.5	2013-2017	1
0.64	Mortgaged Owners Median Monthly Household Costs	dollars	933		1109	1515	2013-2017	1
0.50	Mean Travel Time to Work	minutes	19.6		23.4	26.4	2013-2017	1
			WAYNE				MEASUREMENT	
SCORE	SUBSTANCE ABUSE	UNITS	COUNTY	HP2020	Indiana	U.S.	PERIOD	Source
2.83	Death Rate due to Drug Poisoning	deaths/ 100,000 population	66.6		23.2	19.2	2015-2017	5
2.83	Liquor Store Density	stores/ 100,000 population	21		12.5	10.5	2016	17
2.50	Adults who Smoke	percent	21.5	12	21.1	17	2016	5
2.11	Non-Fatal Emergency Department Visits due to Opioid Overdoses	Rate per 100,000 population	356.6		122.5		2017	8
1.81	Mothers who Smoked During Pregnancy	percent	14.5	1.4	13.5	6.9	2017	8
1.58	Health Behaviors Ranking	ranking	69				2019	5
1.00	Adults who Drink Excessively	percent	16.9	25.4	18.6	18	2016	5
0.83	Substance Abuse Treatment Rate: Alcohol	Rate per 100,000 population	176.1		197.1		2015	8
0.78	Alcohol-Impaired Driving Deaths	percent	14.9		20.8	28.6	2013-2017	5

SCORE	TRANSPORTATION	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.39	Households without a Vehicle	percent	10.1	111 2020	6.7	8.8	2013-2017	1
2.11	Workers Commuting by Public Transportation	percent	0.4	5.5	1	5.1	2013-2017	1
1.67	Workers who Drive Alone to Work	percent	83.3		83	76.4	2013-2017	1
1.36	Age-Adjusted Death Rate due to Motor Vehicle Traffic Collisions	deaths/ 100,000 population	11.9	12.4	12.3	11.4	2015-2017	3
1.33	Households with No Car and Low Access to a Grocery Store	percent	2.3				2015	18
0.61	Solo Drivers with a Long Commute	percent	18.9		30.7	35.2	2013-2017	5
0.50	Mean Travel Time to Work	minutes	19.6		23.4	26.4	2013-2017	1
0.39	Workers who Walk to Work	percent	3	3.1	2.1	2.7	2013-2017	1
SCORE	WELLNESS & LIFESTYLE	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.33	Self-Reported General Health Assessment: Poor or Fair	percent	19.6		17.7	16	2016	5
2.17	Life Expectancy	years	74.3		77.1	79.1	2015-2017	5
2.17	Poor Physical Health: Average Number of Days	days	4.2		3.9	3.7	2016	5
1.75	Morbidity Ranking	ranking	81				2019	5
1.67	Frequent Physical Distress	percent	12.7		11.9	15	2016	5
0.67	Insufficient Sleep	percent	32.3		36	38	2016	5
SCORE	WOMEN'S HEALTH	UNITS	WAYNE COUNTY	HP2020	Indiana	U.S.	MEASUREMENT PERIOD	Source
2.31	Cervical Cancer Incidence Rate	cases/ 100,000 females	11.9	7.3	7.8	7.5	2011-2015	10

1.22	Mammography Screening: Medicare Population	percent	62.5		62.3	63.2	2015	15
1.00	Age-Adjusted Death Rate due to Breast Cancer	deaths/ 100,000 females	20.7	20.7	21.4	20.9	2011-2015	10

#### **DISPARITY ANALYSIS**

### Secondary Data

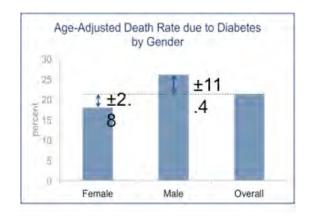
### Index of Disparity

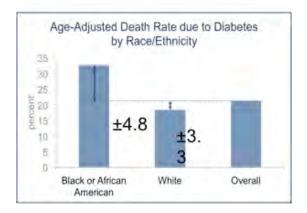
To identify indicators with the largest disparities by gender or race/ethnicity, the Index of Disparity1 measure was used to calculate the average of the absolute differences between

rates for each subgroup within a sub-population category and the overall county rate, divided by the county rate. The index of disparity summarizes disparities across groups within a population that can be applied across indicators. The measure is expressed as a percentage.

Across all indicators, an Index of Disparity score that ranked in the top 25% of all disparities scores — in either gender or race/ ethnicity category — was identified as having a high disparity. The availability of sub-population data varies by source and indicator.

In this example to the right, Age-Adjusted Death Rate due to Diabetes by Gender has county values for the female and male subgroups that are closer to each other and close to the overall county value when compared to the subgroup values for Age-Adjusted Death Rate due to Diabetes by Race/Ethnicity. The absolute difference between the Black or African American value and the overall value is much larger than the difference between the White value and overall value, resulting in a higher Index of Disparity score than the score calculated for the gender subgroups.





### SocioNeeds Index

The SocioNeeds Index® — developed by Healthy Communities Institute and available on the Reid Health data platform — is a tool used to help determine which communities in Reid Health's service area are in most need of services and interventions. The Index summarizes multiple socioeconomic indicators, ranging from poverty to education, which may impact health or access to care. All zip codes in the United States are given an Index value from 0 (low need) to 100 (high need). Within Reid Health's service area, zip codes are ranked based on their Index value. These ranks are used to identify geographic areas of highest need.

#### **Primary Data**

As a part of the primary data collection, community survey participants, key informants, and focus group participants were asked which racial, ethnic, or special population groups were most negatively impacted with respect to community health concerns.

1. Pearcy, J. & Keppel, K. (2002). A Summary Measure of Health Disparity. Public Health Reports, 117, 273-280.

# APPENDIX C. PRIMARY DATA METHODOLOGY

The following are lists of all the community input participants who attended either the focus group sessions, were key informants, or attend the final prioritization session:

#### **FOCUS GROUP ORGANIZATIONS**

- Amigos
- Birth to Five
- CAECI
- Drug Free Wayne County Partnership
- Fayette County Community Voices
- Forward Wayne County
- Hope Center
- · House of Ruth
- Independent Living Center
- Ivy Tech Community College
- JACY House
- Monroe Central School Corp
- NATCO Empowerment Center
- Neighborhood Health Center
- Northeastern Middle School
- Preble County Council on Aging
- Wayne County Purdue Extension
- Fayette County Purdue Extension
- Reid Community Outreach
- · Reid Health
- Richmond Farmers Market
- · Richmond Senior Center
- Rock Solid Ministries
- Union County Opiate Center (Health Dept)
- United Way
- Wayne County Tobacco Coalition

### **KEY INFORMANT ORGANIZATIONS**

- · Boys and Girls Club
- Fayette County Purdue Extension
- Independent Living Center
- Lifestream
- NATCO Community Empowerment Center
- Neighborhood Health Center
- Preble County YMCA
- Wayne County Purdue Extension
- Reid Community Outreach
- Richmond Parks Department
- · Richmond Senior Center
- · Saint Paul United Methodist Church
- Union County Health Department
- Wayne County Foundation

#### PRIORITIZATION SESSION PARTICIPANTS

- Alicia Criswell, Purdue Extension/ Wayne County Food Council
- Angela Cline, Reid Health Community Benefit
- · Angie Dickman, Reid Health Administration
- Becky Marvel, Purdue Extension/Discover Connersville
- Billie Kester, Reid Health Administration
- Brian Schleeper, Wayne County Cardinal Greenway
- Candace Ridgeway, Wayne County TPC
- · Carrie Miles, Neighborhood Health Clinic
- · Carrie Williams, NAACP and SLP for Richmond Schools
- · Chad Bolser, Ivy Tech Community College
- Chirs Knight, Reid Health Administration
- · Craig Kinyon, Reid Health CEO
- Denise Retz, Richmond Parks and Recreation
- Gerard Cyranowski, Meridian Health Services
- Jennifer Ehlers, Reid Health Administration
- · Jennifer Young, Hope Center
- · Jessica Przybysz, Meridian Health Services
- Judi Willett, Reid Health Marketing/Community Relations
- · Justin Burkhardt, Reid Foundation
- Katherine Good, Connersville Parks Department
- · Kathryn Cruz-Uribe, Indiana University East
- · Kelly Beall, Reid Health Administration
- · Lisa Felsman, Centerstone
- Megan Sanders, Forward Wayne County
- Misty Hollis, Richmond YMCA
- Patrick Ripberger, Reid Health Community Benefit
- Porter Miller, Reid Health Community Benefit Board Committee Member
- Randy Kirk, Reid Health Administration
- Robin Henry, West End Bank
- · Rylie Joy, Reid Health Foundation
- Tajuan Stoker, Reid Health Wellness
- · Tom Hilkert, Reid Health Board President
- Wendy McDavid, Randolph County Health Department/ Reach All Randolph County Coalition

# KEY INFORMANT QUESTIONNAIRE



Email: Organization: Title:	
Title:	
Titlo:	
Resident County:	
Key Informant Interview Questions	
<b>QI:</b> Could you tell me a little about yourself, your background, and yo organization?	ur
A:	
Part II – What is your organization's mission?	
A:	
Part III - Does your organization work in direct care, services or more in an advocacy role?	
A:	
<b>QII:</b> What are the major health needs/issues you see in the communi ( <i>Please provide up to 5</i> )	ty?
A:	
Part II – How would you rank these issues in your community (to priority to lowest priority) and why?	ор
A:	

	A:
	Who in your community appears to struggle the most with these es you've identified and how does it impact their lives?
A:	
	<b>Part II –</b> What is the impact of these health issues on low-income, underserved/uninsured persons?
	A:
	<b>Part III –</b> What about the impact on different racial or ethnic groups of this health concern?
	A:
	Part IV – What about by age or gender?
	A:
	Are there any barriers to receiving care in the community?
A:	
	<b>Part II –</b> What might prevent someone in this community from accessing care? (Examples might include lack of transportation, lack of health insurance coverage, language/cultural barriers, etc.)
	A:
comr servi	Could you tell me about some of the strengths and resources in your munity that address these issues, such as groups, initiatives, ces, or programs? (For any resource mentioned, please enter the e and type of program)
папп	and type or program,

A:
Part II – What is the most beneficial health resource or service in
your community?
A:
<b>QVI:</b> We have found that there is limited publicly available data around some health topics for your area, which may make it difficult to assess the extent of the community need. Could you please help fill in some of our data gaps by telling us a little about how any of the following health topics are impacting the community?
Family Planning:
Food Safety
• Vision
Disabilities
Oral Health:
Environment and Occupational Health
<b>QVII:</b> What services or programs do you feel could potentially have the greatest impact on the needs that you've identified?
A:
<b>QVIII:</b> Is there anything additional that should be considered for this Community Health Needs Assessment?
A:

#### 2019 REID HEALTH FOCUS GROUP GUIDE

#### **Focus Group Intro:**

Thank you for taking the time to speak with us to support the Reid Health Community Health Needs Assessment. We anticipate that this discussion will last no more than 90 minutes. You've been selected to participate because of the valuable insights you can provide into the community's health needs.

My name is \_\_\_\_\_ and we are working with Reid Health to collect information through interviews and discussion groups to combine with other data and information for the Needs Assessment. The results of this assessment will be made available to the public. We will be taking notes on your responses, but your names will not be associated with any direct quotes. Your identity will be kept confidential, so please share your honest opinions.

It is important that everyone has a chance to be heard, so we ask that only one person talk at a time (most important ground rule for today). Your insights will be lost if you are only sharing them with the person next to you. We also ask that you think about broader community needs and not just the health topic that you and your organization focus on. Please respect the opinions of others, as the point of the focus group is to collect various points of view.

Does anyone have any questions before we get started? Let's go around the room and introduce ourselves. Please tell everyone your first name, what community you live in, and if you are interested in sharing, your involvement in the community (could be their job).

### **Focus Group Questions**

# Let's start by talking about community health. How would you rate the health status of the community?

(Probe: do you think that this community is doing better or worse than those immediately surrounding it and why?)

•

#### What are the community's most critical health needs/issues?

(Probes: what health problems do you see the most among your family members and neighbors/patients? How would you rank these issues in your community (top priority to lowest priority) and why?)

•

### How do these issues impact different types of people/populations?

(Probe: Do these issues vary by age, gender, race and/or ethnicity? How about for low-income or uninsured people?)

•

#### Which of the needs should have the highest priority for being met and why?

(Probe: what is the one health related problem in the community that you would change and what would you do?)

#### What do you see as the community's resources?

(Probes: What organization or community agency do you see taking a strong leadership role at improving health in your community? Could you tell me about some of the strengths in your community in terms of resources/services/programs/initiatives that address the issues you see? Are individuals in your service area likely to use preventative healthcare?)

To what extent are people utilizing these resources? Are there gaps in services or health information? (Probe: Where do people get their health information in this community?)

#### What are the barriers to receiving services in the community?

(Probe: What might prevent someone in this community from accessing care? Examples include lack of transportation, lack of health insurance coverage, language/cultural barriers, etc.)

#### What do you think the role of a hospital has in addressing these needs?

(Probe: How does Reid Hospital respond to the health needs that have been discussed?)

What advice would you give to people who are working on this community assessment?

Is there anything else you thought about that we didn't get to discuss? Is there anything else you think would be helpful for the collaborative to know as they work to provide services and programs that meet the needs of the community?



## Reid Health Community Survey 2019

Welcome to the Reid Health Community Feedback Survey.

Reid Health is conducting a Community Health Needs Assessment for its service area. This assessment allows Reid Health to better understand the health status and needs of the community and use the knowledge gained to implement programs that will benefit the community.

We can better understand community needs by gathering voices from the community. This survey allows community members like you to tell us about what you feel are important issues for your community. We estimate that it will take about 10 minutes to complete this ~30 question survey, and ask that you please do so by May 13th, 2019.

Thank you very much for your input and your time! If you have questions about this survey, please contact us at communitybenefit@reidhealth.org.

First, tell us a little about yourself...

1. Where do you currently live?	
ZIP/Postal Code	
2. What is your profession?	

3. V	Vhat is your age?
$\bigcirc$	17 or younger
$\bigcirc$	18-24
$\bigcirc$	25-34
$\bigcirc$	35-44
$\bigcirc$	45-54
$\bigcirc$	55-64
$\bigcirc$	65-74
$\bigcirc$	75+
4. V	Vhat is your gender identity?
$\bigcirc$	Female
$\bigcirc$	Male
$\bigcirc$	Other (please specify)
5. V	Vhat is your race?
$\bigcirc$	American Indian or Alaska Native
	Asian
	Black or African American
	Native Hawaiian or Other Pacific Islander
	Hispanic/Latino
$\bigcirc$	White
$\bigcirc$	Multi-racial
	Other (please specify)

6. Select the highest level of education you have achieved
Less than High School
High School Diploma or GED
Some College
Technical Certificate
Associate's Degree
Bachelor's Degree
Professional or Advanced Degree
7. Enter the number of individuals in your household (including yourself)
8. Are there any children (persons younger than age 18) in your household? If yes, please enter the number of children below.
Yes (please specify number of children)
9. Select your total household income level
Less than \$25,000
\$25,000 - \$49,999
\$50,000 - \$74,999
\$75,000 or more
\$75,000 or more  10. Is English the primary language spoken in your home?  Yes
10. Is English the primary language spoken in your home?



# Your Health Status

11 Da you have a disa	hilita (O					
11. Do you have a disa	Dility?					
Yes (please specify)						
res (pieuse speelily)						
12. Your Overall Health	l					
	Excellent	Very good	Good	Fair	Poor	Don't know/r sure
How would you rank your personal health?	LACEIEIR	Very good	0			
13. Do you have any ki	nd of health	coverage?				
No						
Yes (medical only)						
Yes (medical and denta	ıl)					
14. Where do you go fo	or routine hea	llthcare? (Select	all that apply	)		
Physician's office						
Health Department						
Emergency room						
Urgent care clinic						
Urgent care clinic  Clinic in a grocery or dr	ug store					
Clinic in a grocery or dr						
Clinic in a grocery or dr						
Clinic in a grocery or dr						
Clinic in a grocery or dr  I do not receive routine  Other (please specify)	healthcare	een admitted to	the hospital f	or care?		
Clinic in a grocery or dr  I do not receive routine  Other (please specify)  15. Within the past year	healthcare	een admitted to	the hospital f	or care?		
Clinic in a grocery or dr  I do not receive routine  Other (please specify)	healthcare r, have you b		the hospital f	or care?		

16. V	Vithin the past year, what type	of health services did you receive?(\$	Select all that apply)
	None	Family Planning	Mental Health Services
E	Bone/Orthopedic Care	Foot and Ankle/Podiatry Care	Obstetrics/Gynecology/Women's Health
	Cancer/Oncology Care	General Surgery	Primary Care Provider
	Dental Care	Hearing Services	Radiology Tests (X-Ray, CT scan, MRI)
E	Ear, Nose, and Throat Care	Heart/Cardiac Care	Urology Care
E	Eye Care	Immunizations	
	Emergency Room Service	Lab Work	
	Other (please specify)		_
	Very satisfied  Somewhat satisfied  Not at all satisfied  Not applicable (did not receive health	u with the health care you received i care services in the past year) months when you did not see a doc	
○ <i>Y</i>	⁄es		
<u> </u>	No		
	Vas there a time in the past 12 use of cost?	months that you were unable to take	e your medications as prescribed
<u> </u>	⁄es		
	No		

	20.	Please select the top	health challe	enge(s) you face	e.(Select up	to 3)		
		Alcohol Overuse		High Blood Pres	ssure		Respiratory/Lung Disc COPD, etc.)	ease (asthma,
		Allergies		Heart Disease			Stroke	
		Cancer		Joint Pain or Ba	ck Pain			
		Diabetes	Г	Mental Health Is	ssues		Smoking Cessation	
		Drug Addiction		Overweight/Obe	esity		I do not have any hea	llth challenges
		Other (please specify)		_				
		(30)						
		UD						
R	e	id Health	1					
Re	id F	Health Community	Survey 201	9				
Co	mn	nunity Health Sta	tus					
Ne	xt, v	we'd like to hear yo	ur thoughts a	and opinions al	bout the co	ommunity's	s health on the ne	ext 3
		Please answer th	_	=		=		
	21.	Overall Health of You	ur Community	1				
								Don't know/not
			Excellent	Very good	Good	Fair	Poor	sure
	hea	w would you rate the alth of your mmunity?						$\circ$

22. Please select the <u>population(s)</u> below who is(are)	) most negatively affected by poor health outcomes in
your community. (Select up to 5)	
Children	Older Adults
Teen and Adolescent	Persons with Disabilities
Low income	Racial or Ethnic Populations
Lesbian, Gay, Bisexual, and Transgender	Refugees
Maternal, Fetal, and Infant	Women
Men	
Other (please specify)	
23. Social determinants are the conditions in which p	people are born, grow, work, live, and age, and the
wider set of forces and systems shaping the condition	ons of daily life. Please select the most critical <u>social</u>
determinant(s) of health in your community. (Select u	ıp to 5)
Access to Health Services	Housing
Diet, Food and Nutrition	Language Barriers I Cultural Diversity
Economy	Physical Activity and Exercise
Education	Transportation
Employment (jobs, etc.)	Social Environment (faith, friendship, family, etc.)
Environmental Quality (exposure to secondhand smoke, etc.	c.)
Other (please specify)	

24. Please select the most important <u>health issue(s)</u> up to 5)	in your community from this list of health topics.(Select
Cancer	Obesity/Overweight
Clinical Prevention Services	Oral Health
Diabetes	Reproductive Health (family planning)
Heart Disease & Stroke	Respiratory/Lung Diseases (asthma, COPD, etc.)
Immunization & Infectious Diseases	Sexual Health (HIV, STD/I, etc.)
Injury, Violence & Safety	Substance Abuse (alcohol, tobacco, e-cigs, drugs, etc.)
Mental Health & Mental Disorders	
Other (please specify)	

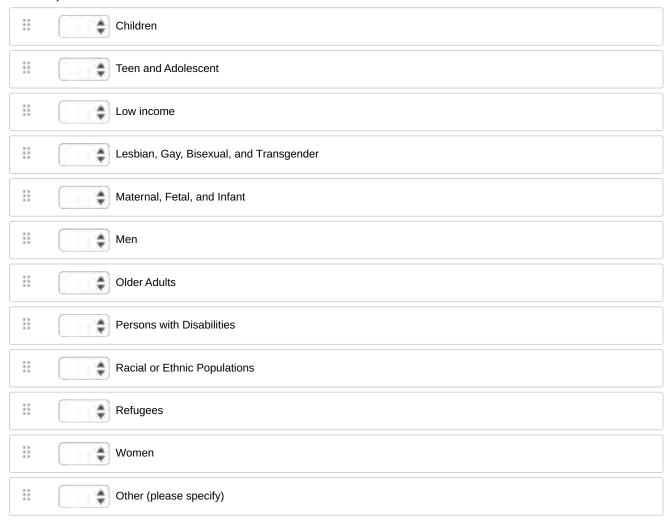


Reid Health Community Survey 2019

**Community Health Status** 

For questions 25-27, please rank your answers from questions 22-24. To rank, you may either click on a category, hold to drag, and then drop/un-click to reorder or you can click on the up/down arrows to select a number.

# 25. Please rank the most negatively affected population categories in your community.(1 is most negatively affected)



26. Please rank the most critical social determinants of health in your community.(1 having the greatest impact on the community)

*	Access to Health Services
*	Diet, Food and Nutrition
*	Economy
*	Education
#	Employment (jobs, etc.)
*	Environmental Quality (exposure to secondhand smoke, etc.)
*	Housing
*	Language Barriers I Cultural Diversity
*	Physical Activity and Exercise
*	Transportation
*	Social Environment (faith, friendship, family, etc.)
*	Other (please specify)

28. Please tell us whether you: "strongly disagree", "disagree", "feel neutral", "agree", or "strongly agree" with the following statements about your community.								
Strongly Disagree	Disagree	Feel Neutral	Agree	Strongly Agree				
Public transportation and ot	her transit opportunitie:	s make accessing health servic	ces manageable.					
I, or someone I know, have delayed seeking health care due to cost in the last 12 months.								
My community is knowledge	eable of the health reso	ources available to them.						
I, or someone I know, have	delayed seeking health	n care due to wait times or limite	ed appointment opport	unity.				
My community supports a h	nealthy lifestyle.							
I, or someone I know, have	had difficulty understar	nding a health professional bec	ause of a language ba	rrier in the last 12 months.				
There is a lack of resources	related to health impr	ovement in this community.						
I and members of my comm	nunity feel we have a v	oice in our community.						
I consider my community to	be safe.							
29. In your opinion, which your community?	ch racial or ethnic (	group is most disproportic	onately affected by	health problems in				
White								
Black or African America	ın							
American Indian or Alas	ka Native							
Asian								
Native Hawaiian and Ot	her Pacific Islander							
Hispanic/Latinos								
Multi-racial								
Other race or ethnic gro	Other race or ethnic group (please specify)							

30. In your opinion, what are topics	s that your community needs more in	nformation on?(Check all that apply)
Alcohol and substance abuse	Fitness and physical activity	Senior health
Alternative and complementary care	Mental health	Smoking cessation
Chronic disease management	Nutrition and recipes	Stress reduction
Diabetes management	Pain management	Transportation
Emotional wellness	Pregnancy and new baby	
Family planning	Preventative health screenings	
Other (please specify)		
		_
31. Where do you get most of your	health related resource information	?(Check all that apply)
211 lines	Health and Fitness Facilities	Primary Care Provider
Books/Magazines	Health Department	School
Faith/Community	Hospital	Social Media (Facebook, Twitter, etc.)
Friends and Family	Internet	Television
Grocery Stores	Pharmacist	
Other (please specify)		
		_
32. Is it hard for you to obtain good	I information about your health?	
Yes		
O No		
33. Is there something in your neig	hborhood/community that makes yo	u healthier?



Reid Health Community Survey 2019

Thonk you	forvou	r partial	nation
Thank you	ioi you	i partici	pauon

Please be sure to click 'Done' at the bottom right to ensure your voice is heard.

The final Community Health Needs Assessment report will be completed in Summer 2019. If you remember or think of something later, feel free to email us at communitybenefit@reidhealth.org.

34. (Optional) Is there anything else you would like us to know about your community? Please feel free to
tell us below.

### **APPENDIX D. PRIORITIZATION TOOLS**

#### HEALTH NEEDS PRIORITIZATION, JUNE 17, 2019

This packet will help you assess each of the pressing health needs identified by HCI's data analysis, and how each of those health needs relate to the criteria set forth by Reid Health for prioritizing health topics in your service area. For each health need you will score how well you believe the health need meets the criteria. After you have completed the ranking, please submit your results using the Survey Monkey Link. Your results will be tabulated with those of other participants and will instantaneously show the group's collective ranking of the most pressing health needs in your service area. There will be opportunities to work individually and in groups.

#### **INSTRUCTIONS**

- 1. Use the matrix on page 2 of this packet to score each health need for how well it meets each criteria:
  - 1 = Does not meet criteria through 3 = Meets criteria
- 2. Add total scores for each health need and write total in "Total Health Topic Score" column.
- 3. Write the total scores for each topic in the table below.
- 4. Assign ranking to health needs based on total score, with highest score receiving a ranking of 1. If you have any tying scores for health topics, assign their rank as you see fit.

HEALTH TOPICS	TOTAL HEALTH TOPIC SCORE FROM PAGE 2	RANK
Cancer		
Diabetes		
Heart Disease & Stroke		
Economy		
Access to Health Services		
Mental Health & Mental Disorders		
Substance Abuse		
Exercise, Nutrition, & Weight		
Transportation		
Children's Health		
Older Adults & Aging		
Low Income & Underserved		

Health Need	Propriety	Economics	Acceptability	Magnitude	Data Tracking	Total
	1 - not in line with strategic vision/ programming	1 - does not make economic sense to address	1 - community not accepting of program for need	1 - not immediate issue and small population effected	1 - data tracking difficult, limited evidence based programs	Health Topic Score
	3 - in line with strategic vision/ programming	3 – makes economic sense to address	3 - program for need highly desired by community	3 - value in immediately intervening and large population effected	3 - data available for tracking, evidence based programs available	
Cancer						
Diabetes						
Heart Disease & Stroke						
Economy						
Access to Health Services						
Mental Health & Mental Disorders						
Substance Abuse						
Exercise, Nutrition, & Weight						
Transportation						
Children's Health						
Older Adults & Aging						
Low Income & Underserved						

# **2019 REID HEALTH: PRIMARY & SECONDARY DATA SYNTHESIS**

	Health Topic	Key Themes from Secondary Data  (*Indicator shows a significant race/ethnic disparity)	Key Themes from Community Input
	Cancer	Top need in 6 counties  Warning indicators: Age- Adjusted Death Rate due to Cancer and Lung and Bronchus Cancer Incidence Rate	Ranked as 4th most pressing health issue in the community survey; Higher prevalence among African American and Hispanic population, Need for preventative education/care, Individuals delay seeking treatment/diagnosis
Luc	Diabetes	Top need in 7 counties  Warning indicators: Adults with Diabetes, Diabetic Screening among Medicare Population	Ranked as <b>6</b> <sup>th</sup> most pressing health issue in survey; Higher prevalence among Hispanic population and among the poor, Need for improved access to care and preventative information and resources, Addressing health literacy
	Heart Disease & Stroke	Top need in 7 counties  Warning indicators: Heart Failure among Medicare Population and Age- Adjusted Death Rate due to Coronary Heart Disease	Ranked as <b>5</b> <sup>th</sup> most pressing health issue in survey; Delayed Care, Factors like obesity and stress, Need for improved access to care and preventative information and resources, Higher prevalence among the poor
(S)	Economy	Top need in 4 counties  Warning indicators: Families Living Below Poverty Level*, Child Food Insecurity Rate and Per Capita Income	Ranked as the #1 Social Determinant of Health issue in the survey; Insured population has access issues/barriers too,  Health issues are often ignored,  Families struggle to just cover their basic needs, lack of gainful employment opportunities
O A	Access to Health Services	Top need in 6 counties  Warning indicators: Dentist Rate, Mental Health Provider Rate, Primary Care Provider Rate	Ranked as <b>4</b> <sup>th</sup> most pressing Social Determinant of Health issue in survey; Uninsured or underinsured, Individuals not realizing they qualify for services, Stigma, cost, fear, Addressing health literacy, Greater impact among the poor

	Health Topic	Key Themes from Secondary Data  (*Indicator shows a significant race/ethnic disparity)	Key Themes from Community Input
<b>S</b> +	Mental Health & Mental Disorders	Top need in 7 counties  Warning indicators:  Depression among Medicare Population, Age-Adjusted Death Rate due to Suicide, and Age-Adjusted Death Rate due to Alzheimer's Disease	Ranked as <b>2</b> <sup>nd</sup> most pressing health issue in survey; Untreated mental health issues, Stigma prevents individuals from seeking help/treatment, Loneliness and isolation, Untreated past trauma, Lack of service providers
2	Substance Abuse	Top need in <b>7</b> counties  Warning indicators: Mothers who Smoked During Pregnancy and Adults who Smoke	Ranked as #1 most pressing health issue in survey; Community and familial financial burden, Prevention programs for youth are needed; school-based programs, Greater impact on senior citizens and youth, Barrier for employment
	Exercise, Nutrition & Weight	Top need in 4 counties  Warning indicators: Adults 20+ who are obese and Access to Exercise Opportunities	Ranked as <b>3</b> <sup>rd</sup> most pressing health issue in survey; Obesity's link to other chronic diseases, Access to low-priced, healthy, fresh food, Need for inexpensive exercise classes and nutrition/cooking classes, Greater impact on youth
	Transportation	Top need in <b>7</b> counties  Warning indicators: Workers Commuting by Public Transportation* and Workers who Walk to Work*	Ranked as <b>6</b> <sup>th</sup> most pressing social determinant of health in survey; Need more transportation options for health-related appointments and grocery shopping, Limited public transportation, Greater impact on low-income and rural communities
	Children's Health	This group did not appear in top county need areas.	Ranked as <b>2</b> <sup>nd</sup> most negatively affected population in survey; Obesity among youth, Opportunity for education in schools, Drug abuse impact, Greater impact on children living in poverty and those with disabilities

	Health Topic	Key Themes from Secondary Data  (*Indicator shows a significant race/ethnic disparity)	Key Themes from Community Input
Å	Older Adults and Aging	Top need in 6 counties  Warning indicators: Heart Failure: Medicare Population, Hypertension: Medicare Population, and Ischemic Heart Disease: Medicare Population	Ranked as <b>3</b> <sup>rd</sup> most negatively affected population in survey; Grandparents caring for grandchildren, family, extended family, Increase in kidney failure/dialysis, More accessible respite care for caregivers, Greater impact on seniors living in poverty or on fixed-incomes
†	Low Income & Underserved	This group did not appear in top county need areas.	Ranked as #1 most negatively affected population in survey; Generational poverty, Individuals sharing medications, Addressing health literacy and barriers to access, Stigma and fear of diagnosis, Greater impact on those living in rural areas and those living in poverty

Notes:

#### **APPENDIX E. COMMUNITY RESOURCES**

**Anytime Fitness** 

The follow is a list of all community resources mentioned by community input participants.

Family Fitness Works Connect2Help 2-1-1

321Go Family Family Health Physicians

Fayette Pregnancy Resource Center Alcoholics Anonymous

**Fayette Senior Services** 

Indiana Association of Adult Day Services

Indiana Department of Natural Resources

Amigos Latino Center Fayette Regional Health System

**Food Pantries** Applied Behavior Center for Autism

Area 9 Agency Gateway Youth Programs

Area Agencies on Aging Genesis of Richmond

Girls Incorporated **ASPIN Health Navigator** 

**Backpack Blessings** Golay Community Center

Better Life Wellness Center Birth to Five **Guiding Good Choices** BirthRight International Hagerstown Library

Boys and Girls Club of Wayne County Hayes Arboretum

Boys and Girls Clubs of America Head Start

Healthy Families Indiana Cambridge City Public Library

Cancer Association of Darke County Help me Grow

Cardinal Greenway Hope Crisis Center

Hope House Care-a-Van Celebrate Recovery Centerstone

Circles Hope Pregnancy Care Center

Communities in Schools Hopeline

Communities That Care (CTC) House of David

House of Ruth **Community Corrections** 

Council on Rural Service Programs

Darke County General Health District

Cope Environmental Center Independent Living Center of Eastern Indiana

Indiana Balance of State Continuum of Care

Cross Road Christian Recovery Center for Women

Indiana Community Action Association Curves

Indiana Department of Veterans Affairs Indiana First Darke County Health Department

Steps

Darke County Job and Family Services

Indiana Healthy Weight Initiative Darke County Mental Health Clinic

Indiana State Games Darke County Senior Center Committee

InsideOut Dad® Ending Poverty in Our Community (EPIC)

Just Us Kids Outdoors (JUKO) Families United for Support and Encouragement

Laundry Project Family and Social Services Administration

Reid Ready Care (Meijer Clinic)

Meridian Health Services

Mid America Health

Morrison-Reeves Library

Narcotics Anonymous

NATCO Community Empowerment

Center Syringe Exchange Program

Northern Connection

Ohio Health WorkHealth

One Cent Ministry

Open Arms Ministries

Parents as Teachers

Partnership for a Drug Free Wayne County

Planet Fitness

Planned Parenthood

Preble County Council on Aging

Preble County Senior Center

**Premier Physicians** 

Presbyterian Church 3B Program

Recovery Works

Reid Health

Reid Health Heroin is Here Committee

Reid Health Mother-Baby Care Center

Reid Health Physician Associates

Reid Health — Outpatient Care Center (OCC)

Reid Rehab Services Reid Urgent Care

Rent a Librarian Program

Richmond Comprehensive Treatment Center

**Richmond Family Fitness** 

Richmond Farmers Market

**Rock Solid Ministries** 

Rose View Transit System

SafeHaven Inc.

Second Helpings Inc.

Siloam Health and Wellness Center

St. Paul's Church

St. Vincent Hospital

State of the Heart Care — Hospice and Palliative Care

Talented Tykes

Telehealth

The Excel Center

The Haven

The Recovery and Wellness Centers of Midwest Ohio

The Special Supplemental Nutrition Program for

Women, Infants, and Children (WIC)

Thinking for a Change 4.0 (T4C)

**Townsend Center** 

Tri County Crisis Line and Team

United Way of Central Indiana

Veteran's Administration Clinic

Victory Lane Camp

Wayne County Drug Task Force

Wayne County Foundation

Wayne County Health Clinic

Wayne County Indiana Health Department

Wayne HealthCare

Wernle Youth and Family Treatment Center

Y's Owl Preschool

YMCA

Youth as Resources (YAR)