

2013

Fayette Regional
Health System
Community Health
Needs Assessment

Prepared by the Indiana Rural Health Association

Table of Contents

Table of Contents	1
Process	2
Community Served	3
Description of Community	3
Physical.....	3
Population – Ethnicity, Age, Households, & Income.....	3
Education.....	4
Health Summary.....	5
Primary & Chronic Diseases.....	7
Existing Healthcare Resources.....	9
Identifying Health & Service Needs	9
Summary of Findings	12
Recommendations.....	12
Appendix A – Resources & Reference Materials	
Appendix B – Steering Committee Documents	
Appendix C – Survey & Results	
Appendix D – Existing Facilities	

Process

Fayette Regional Health System (FRHS) contracted with the Indiana Rural Health Association (IRHA) to conduct the Community Health Needs Assessment (CHNA).

IRHA first identified the community served by FRHS through conversations with the hospital personnel. Based on a review of patient zip codes, the hospital was able to define the community served as anyone residing in the following zip codes: 47012, 47024, 47016, 47030, 47035, 47325, 47353, 47357, 47327, 47370, and 46127. These postal codes fall within four separate Indiana counties: Fayette, Union, Wayne, and Rush.

To quantifiably describe the community, census reports were commissioned from iVantage Health Analytics in conjunction with ESRI. Quantifiable statistics and reports for health-related community data were obtained from Fayette Regional Health System, the Community Health Rankings & Roadmaps from the Robert Wood Johnson Foundation, and the Indiana Community Asset Inventory and Rankings 2012 from the Center for Business and Economic Research and Ball State University. The full reports can be found in Appendix A. Additional reports were pulled from the Centers for Disease Control website and the Indiana State Cancer Registry. Excerpts from these reports can be found in Appendix A.

Next, a steering committee comprised of community representatives was organized with the help of the Fayette Regional Health System CFO, Skip Smith. Business owners, local officials, healthcare providers, minority leaders, clergy, student representatives, and any other interested parties were invited to attend the meeting to discuss the health-related needs of the community with a view to identifying the areas of greatest concern. The list of invitees and attendees can be found in Appendix B.

Once the information was obtained from the steering committee, a 37-question survey was developed to gain the perspective of the inhabitants of the community. Questions included queries about the effect of various factors (such as illegal drugs, teen pregnancy, and obesity), as well as probes into the perceived need for various services and facilities in the community. The survey was widely disseminated to the residents in FRHS's service area through inclusion on the hospital's website, face-to-face polling at the Connersville Wal-Mart and the county Farmers' Market, and a publically available survey posted on SurveyMonkey.com. The survey may be viewed in Appendix C.

To identify all healthcare facilities and resources that are currently responding to the healthcare needs of the community the IRHA contacted FRHS. The hospital was able to provide a list of facilities and services that are presently available to their service area. The list of existing resources can be found in Appendix D.

At this point, the entirety of the collected data was submitted to Fayette Regional Health System to explain how the needs identified by the CHNA are currently being met, as well as to write a plan of action for those needs that are not currently being met. FRHS was also able to identify the information gaps limiting the hospital's ability to assess all of the community's health needs.

The completed CHNA was then publically posted on hospital's website. Hard copies of the full report were made available to the community upon request at the hospital, as well.

Community Served

The community served by Fayette Regional Health System is defined as follows: All people living within the following zip codes: 47012, 47024, 47016, 47030, 47035, 47325, 47353, 47357, 47327, 47370, and 46127.

Description of Community

Physical

The service area of Fayette Regional Health System is located in the southeastern region of Indiana, partially sharing the Ohio border. The community is largely rural and is comprised of Fayette County, Union County, Wayne County, and Rush County.

Population – Ethnicity, Age, Households & Income

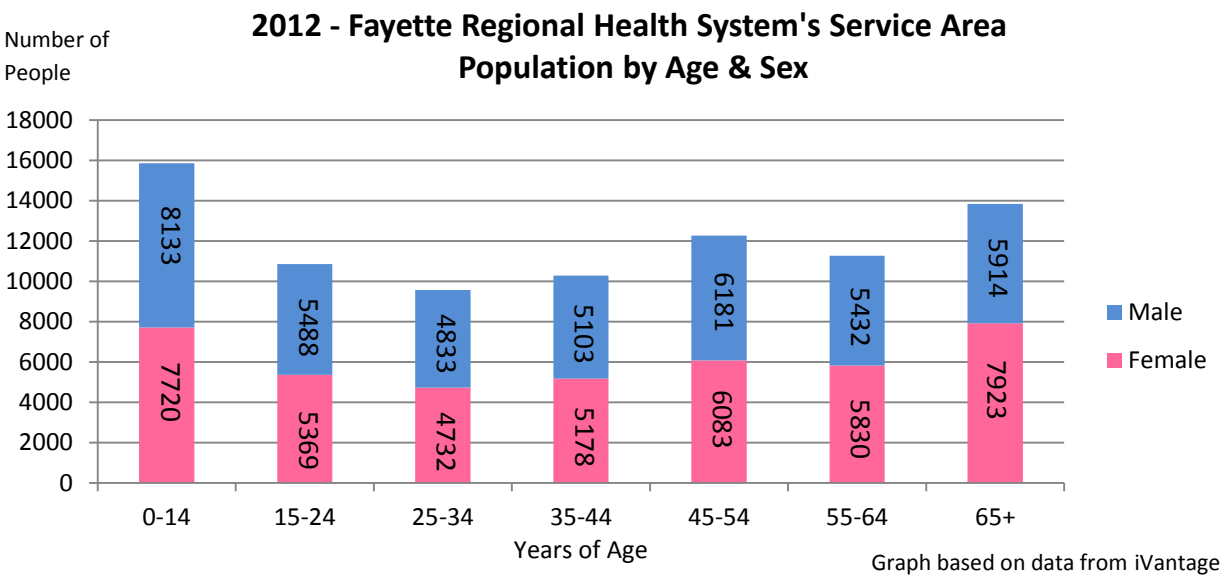
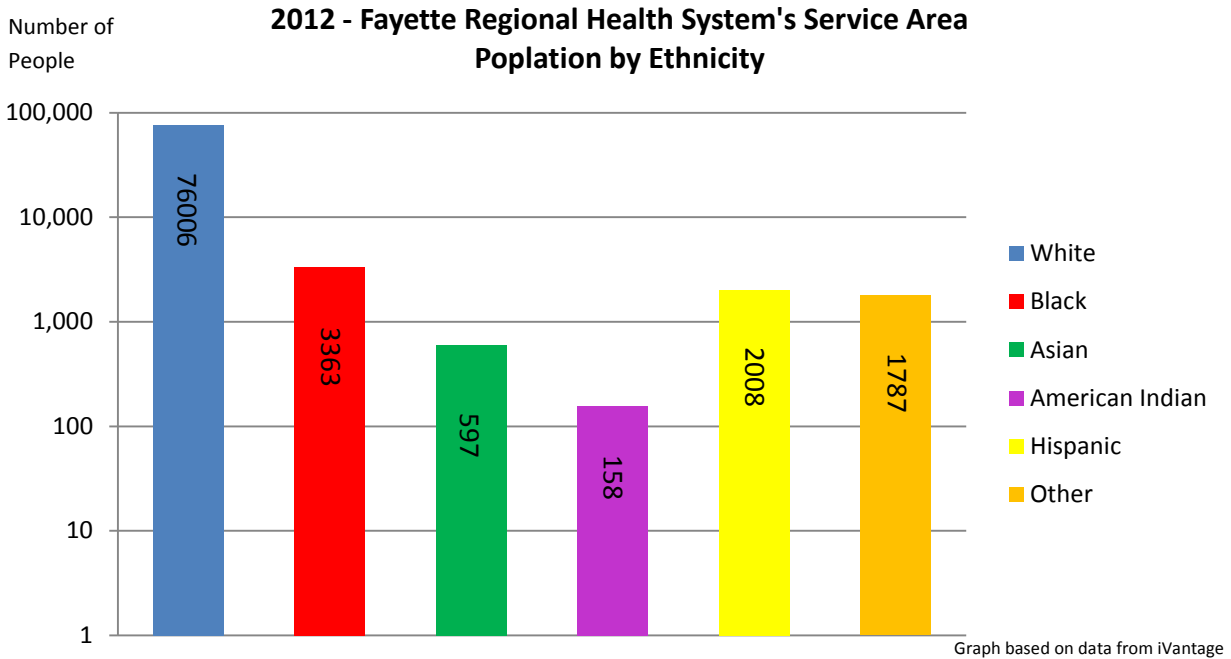
According to iVantage Health Analytics, in conjunction with 2011 ESRI data, the total population of the community as of 2012 is 83,919; and the average median age in the county is 40.7 years old. Females make up 51.04% of the overall populace. Minority populations make up 9.43% of the total inhabitants of the county. There are 33,215 households comprised of approximately 2.53 persons each. The average household income is \$56,466; and the average per capita income is \$22,462.

BROOKVILLE HEALTHCARE						iVantage Health Analytics					
Demographic Profile - Service Area by ZIP Code All Zip Codes											
Description	2010	2012	2017	Volume Change	Percent Change	Description	2010	2012	2017	Volume Change	Percent Change
Total Population	83,431	83,919	83,355	-564	(0.67%)	Total Female Population	42,670	42,835	42,498	-337	(0.79%)
White	75,693	76,006	74,975	-1,031	(1.36%)	Female Population 15-44	15,418	15,279	14,684	-595	(3.89%)
Black	3,336	3,363	3,353	-10	(0.30%)	Total Households	33,122	33,215	33,158	-57	(0.17%)
Asian	571	597	672	75	12.58%	Average Household Size	2.52	2.53	2.51	-0	(0.79%)
American Indian	153	158	163	5	3.16%	Median Household Income	40,949	46,468	5,519	13.48%	
Hispanic	1,909	2,008	2,311	303	15.09%	Average Household Income	51,499	56,468	4,967	9.64%	
Other	1,769	1,787	1,881	94	5.28%	Per Capita Income	20,383	22,462	2,079	10.20%	
Median Age	40.25	40.70	41.34	1	1.57%	Household Income					
Total Population by Age						\$ 0 - \$ 14,999	5,345	5,180	-165	(3.09%)	
00-14	15,951	15,853	15,641	-212	(1.34%)	\$ 15,000 - \$ 24,999	4,426	3,457	-969	(21.89%)	
15-24	11,000	10,857	10,143	-714	(6.58%)	\$ 25,000 - \$ 34,999	4,417	3,581	-836	(18.93%)	
25-34	9,385	9,565	9,511	-54	(0.56%)	\$ 35,000 - \$ 49,999	5,699	5,156	-543	(9.53%)	
35-44	10,510	10,281	9,904	-377	(3.67%)	\$ 50,000 - \$ 74,999	6,784	8,112	1,328	19.58%	
45-54	12,543	12,264	11,205	-1,059	(8.64%)	\$ 75,000 - \$ 99,999	3,130	3,898	768	24.54%	
55-64	10,761	11,262	11,595	333	2.98%	\$100,000 - \$149,999	2,431	2,681	250	10.28%	
65+	13,289	13,837	15,356	1,519	10.98%	\$150,000 - \$199,999	538	630	92	17.10%	
Female Population by Age						\$200,000 +	445	463	18	4.04%	
00-14	7,764	7,720	7,618	-102	(1.32%)						
15-24	5,439	5,369	5,028	-341	(6.35%)						
25-34	4,666	4,732	4,664	-38	(0.80%)						
35-44	5,313	5,178	4,962	-216	(4.17%)						
45-54	6,242	6,083	5,536	-547	(8.99%)						
55-64	5,576	5,830	5,988	158	2.71%						
65+	7,673	7,923	8,672	749	9.45%						

Source: ESRI Business Information Solutions

Prepared on October 24, 2013, by iVantage Health Analytics, Inc. 615-932-8400 Copyright 2013
Reports Center Location: Demographics\Service Area

www.iVantageHealth.com



Education

The Robert Wood Johnson Foundation reports that an average of 86.5% of the community residents have high school diplomas compared with a statewide average of 86%. Additionally, an average of 49.75% of the community has at least some college education compared with a statewide average of 59%.

Fayette Regional Health System Service Area Average Education Attained



Graph based on data from the Robert Wood Johnson Foundation

The full reports from iVantage Health Analytics, the Robert Wood Johnson Foundation, and the Center for Business and Economic Research and Ball State University can be viewed in Appendix A.

Health Summary

The overall average health grade for FRHS's service area from the CAIR report stands at a D+. The CAIR provides a detailed asset inventory of variables that describe the education attainment and health of Hoosier citizens, as well as the availability of natural resources and cultural amenities. All of the data has been carefully selected from secondary sources and is reviewed as to the contribution to the quality of life for the residents within the county. The data sets have been aggregated and an average of the grades given to the counties in Fayette Regional Health System's service area is noted above. Based on data from the 2012 County Health Rankings & Roadmaps report, Fayette County ranks 90st in Health Outcomes and 91st in Health Factors out of a total of 92 counties in the state, Rush County ranks 74th in Health Outcomes and 33rd in Health Factors, Union County ranks 51st in Health Outcomes and 60th in Health Factors, and Wayne ranks 59th in Health Outcomes and 82nd in Health Factors. This results in an average ranking of 69th in Health Outcomes and 67th in Health Factors for FRHS's community.

The Health Outcomes ranking was based on a reported average of 3.5 days of poor physical health by the residents of the service area compared to a national average of 2.6 and a statewide average of 3.6 and a reported average of 4.7 days of poor mental health days by service area residents compared to a nation average of 2.3 and statewide average of 3.6. These above average scores combined with bottom third performances across the board in the Mortality category (Fayette is 90th, Rush is 80th, Union is 77th, and Wayne is 60th out of 92 Indiana counties) resulted in the average rank of 69th in the state.

The Health Factors ranking was based on Health Behaviors, Clinical Care, Social and Economic Factors, and Physical Environment. Instances of adult smoking, adult obesity, and physical inactivity all slightly exceed state averages, though they well above national rates. The average rate of adult smoking in the service area is 25.6% versus 24% statewide and 13% nationally. The average rate of adult obesity is 31.7% compared to 31% statewide and 25% nationally. The average rate of physical inactivity is 29.75% versus 27% statewide and 21% nationally.

The average percentage of excessive drinking was below average for Indiana at 9.25% in the community opposed to 16% statewide but still came in above the national benchmark of 7%. Sexually transmitted infections mirrored this pattern with an average rate of only 211.75 compared to 351 statewide; however

the national rate is only 92. Teen birth rates and motor vehicle crash death rates both exceeded state and national averages with a rate of 51 teen births compared to 41 in Indiana and 21 nationally and 17.5 crash deaths compared to 13 in Indiana and 10 nationally.

The community posted an average ranking of 66th out of 92 counties in Clinical Care. An excessively high patient-to-primary physician ratio at 3644:1 compared with the national average of 1067:1 and the statewide average of 1557:1; an equally high ratio of dentists to patients at 3926:1 compared with the national average of 1516:1 and the statewide average of 2165:1; and another excessive rate of preventable hospital stays at 98.5 compared with the national average of 47 and the statewide average of 76 all combined to negatively affect the Clinical Care ranking.

FRHS’s community was on par with state averages in high school graduates at 86.5% of the community compared to a statewide average of 86%. However, a high unemployment average (10.5% compared to 9% statewide and 5% nationally) and a low number of residents with at least some college education (50% opposed to the statewide average of 59% and national average of 70%) combined to produce an average ranking of 64 out of all 92 Indiana counties in Social and Economic Factors.

The Physical Environment score for Fayette Regional Health System’s community was, once again, in the bottom third of rankings for the state of Indiana. An average rank of 64 out of 92 counties resulted from middling scores in drinking water safety, access to recreational facilities, and access to healthy foods, but suffered from a high percentage of fast food restaurants at 59% opposed to 50% in Indiana and only 27% nationally. The County Health Rankings measures the population living with limited access to healthy foods using the USDA Food Environment Atlas. Individuals are counted who have both low access to a supermarket or large grocery store and a low income. “Low access” is greater than ten miles away in a rural county.

The full County Health Rankings & Roadmaps report conducted by the Robert Wood Johnson Foundation can be viewed in Appendix A.



	Indiana	Fayette (FA) X	Rush (RU) X	Union (UN) X	Wayne (WY) X
Health Outcomes		90	74	51	59
Mortality		90	80	77	60
Premature death	7,520	10,848	9,158	9,000	8,063
Morbidity		88	62	12	60
Poor or fair health	16%	24%	17%	21%	16%
Poor physical health days	3.6	3.5	3.1	3.5	3.8
Poor mental health days	3.6	6.9	3.0	4.5	4.5
Low birthweight	8.3%	8.1%	9.4%	5.0%	8.2%



	Indiana	Fayette (FA) ✘	Rush (RU) ✘	Union (UN) ✘	Wayne (WY) ✘
--	---------	----------------	-------------	--------------	--------------

Health Factors		91	33	60	82
Health Behaviors		83	36	45	37
Adult smoking	24%	28%	21%		28%
Adult obesity	31%	34%	32%	33%	28%
Physical inactivity	27%	32%	32%	26%	29%
Excessive drinking	16%	12%	8%	7%	10%
Motor vehicle crash death rate	13	13	18	29	10
Sexually transmitted infections	351	185	253	120	289
Teen birth rate	41	61	45	46	52
Clinical Care		54	68	87	56
Uninsured	17%	17%	17%	17%	19%
Primary care physicians	1,557:1	3,037:1	2,480:1	7,530:1	1,530:1
Dentists	2,165:1	3,083:1	2,923:1	7,597:1	2,102:1
Preventable hospital stays	76	87	103	113	91
Diabetic screening	83%	86%	88%	79%	85%
Mammography screening	64%	66%	62%	63%	63%
Social & Economic Factors		90	32	44	89
High school graduation	86%	83%	96%	83%	84%
Some college	59%	42%	47%	61%	49%
Unemployment	9.0%	12.7%	8.9%	9.1%	11.2%
Children in poverty	23%	31%	21%	23%	34%
Inadequate social support	20%		22%	16%	22%
Children in single-parent households	32%	33%	27%	22%	42%
Violent crime rate	327		86		243
Physical Environment		89	17	83	65
Daily fine particulate matter	13.0	13.3	13.2	13.3	13.3
Drinking water safety	2%	0%	4%	0%	0%
Access to recreational facilities	9	8	12	0	7
Limited access to healthy foods	6%	9%	1%	0%	6%
Fast food restaurants	50%	74%	44%	71%	47%

Primary and Chronic Diseases

Fayette Regional Health System generated a report of the Most Common Diagnosis for patients from January 1, 2012 through December 31, 2012. From this report, the top ten most common diagnoses for their service area were identified. A further examination of the payer mix for each diagnosis resulted in an additional report to identify the issues that were most often seen in low-income, disabled, and/or older

populations. (*Note: It is important to understand the key characteristics of the FRHS service area. This includes identifying the low-income, disabled and/or elderly population. The population trends help provide an indication of patterns within the residents of the community and assist in identifying the needs around this populace.)

The following list contains the top ten most common diagnoses and the percentage of Medicare and Medicaid patients for each diagnosis:

- Hypertension – 7819 cases (67.21% Medicare & Medicaid)
- Tobacco Use Disorder – 5621 cases (45.17% Medicare & Medicaid)
- Hyperlipidemia – 5083 cases (72.02 % Medicare & Medicaid)
- Diabetes w/o Complications Type 2 – 4984 cases (70.73% Medicare & Medicaid)
- Urinary Tract Infection – 2250 cases (68.49% Medicare & Medicaid)
- Atrial Fibrillation – 2033 cases (78.6% Medicare & Medicaid)
- Other Malaise and Fatigue – 2027 cases (61.17% Medicare & Medicaid)
- Benign Hypertension – 1976 cases (78.8% Medicare & Medicaid)
- Coronary Atherosclerosis of Unspecified Vessel – 1915 cases (70.55% Medicare & Medicaid)
- Chronic Airway Obstruction – 1911 cases (79.28% Medicare & Medicaid)

The full list of discharge diagnoses and payer mix reports can be found in Appendix A.

The cancer rates in Fayette Regional Health System's service area are slightly below average when compared to the state averages. The Indiana State Cancer Registry reports an average rate of 424.9 people (per 100,000 people) with any type of cancer in contrast to Indiana's higher average rate of 475.6 people with any type of cancer. Lower than average rates were also posted in FRHS's prostate cancer (116 compared to the state's 136), colon and rectum cancer (48.7 compared to the state's 51.4), and breast cancer (91.4 versus Indiana's 116). However, a slightly higher average was posted in lung cancer rates (82.2 in comparison to the statewide rate of 80). Cancer mortality rates in the community are higher than state averages in every category. The average mortality rate for any kind of cancer in the service area is 214.7 (compared to 195.8 in Indiana), for prostate cancer it is 29.4 (compared to 25.1 in Indiana), for breast cancer it is 27.3 (compared to 23.8 in Indiana), for lung cancer it is 72.5 (compared to 61.6 in Indiana), and for colon and rectum cancers is it 18.7 (compared to 18.5 in Indiana).

According to data from the Centers for Disease Control and Prevention Division for Heart Disease and Stroke Prevention Fayette Regional Health System's average county rank is 52nd out of Indiana's 92 counties in all heart disease mortality rates. The service area has an average mortality rate of 202.6 per 100,000 which is slightly above the state's rate of 199.7 per 100,000 and is somewhat higher than the national average of 185.2 per 100,000.

The CDC's Diabetes Data & Trends report also relates that the FRHS community comes in below the state average in rates of diabetes. FRHS's service area has an average, age-adjusted rate of 9.1 compared to an Indiana-wide average of 9.5.

Portions of the Indiana State Cancer Registry's Indiana Cancer Facts & Figures 2011, as well as both CDC reports can be found in Appendix A.

Existing Healthcare Resources

Fayette Regional Health System compiled a list of existing healthcare facilities available in their service area. FRHS will be able to use this listing when creating their action plan to fully incorporate all available resources.

Ackerman, Gerald DDS
Anytime Fitness
Bernzott & Wynn Chiropractic
Brian Moore Family Dentistry
Caroleton Manor
Center for Relaxation & Rehab
Christie Family Dentistry
Cutting Edge Therapy
CVS Pharmacy
Gary Weber DDS Family & Cosmetic
GrandView Pharmacy
Heritage House Rehabilitation & Healthcare Center
Hickory Creek
Kroger Pharmacy
Lincoln Centers
Optimum Health Spinal Care
Pflum Chiropractic
Roberts, John DDS
Walmart Pharmacy
Whitewater Eye Center
Whitewater Valley Medical Center & Urgent Care
Whitewater Valley Rehab
Yaryan Eye Center

A complete listing of the facilities including addresses and phone numbers can be found in Appendix D.

Identifying Health & Service Needs

A steering committee, including representatives from FRHS's service area, was organized with the help of Fayette Regional Health System CFO, Skip Smith. Business owners, local officials, healthcare providers, minority leaders, clergy, student representatives, and any other interested parties were invited to attend the meeting to discuss the health-related needs of the community with a view to identifying the areas of greatest concern. The list of both those invited and those who attended can be found in Appendix B.

The steering committee was encouraged to brainstorm all areas of need or concern in the health field in FRHS's community in both large and small group settings. Once a master list of all concerns was agreed upon by the full group, attendees were separated into two smaller groups (Group A and Group B). The small groups were asked to list what they perceived to be as the greatest strengths and values in their community. Then, they were asked to identify the highest priorities from the master list of concerns.

By analyzing both prioritized lists from the small groups, the IRHA was able to pull out the items that appeared most frequently and identified sixteen areas of need or concern to the community:

- Teen pregnancy
- Unemployment
- Poverty
- Lack of work ethic
- Illegal drug use
- Prescription drug abuse
- Preventative care
- Diabetes
- Obesity
- Tobacco use
- Access to healthy foods
- Nutritional awareness
- Mental abuse
- Physical abuse
- Child abuse/neglect
- Suicide

The master list, each group's priority list, and the list of areas that were determined to be of the greatest need can be found in Appendix B.

The identified areas of greatest need were used to create a 37-question survey, addressing demographics, issues and community services and amenities, which can be found in Appendix C. The survey was widely disseminated via internet access, community bulletins, and the local newspaper to the residents within FRHS's community through inclusion on the Fayette Regional Health System website and a publically available survey posted on SurveyMonkey.com. Face-to-face polling was also implemented at the Connersville Wal-Mart and the county Farmers' Market. To conduct the in-person survey, two members of the IRHA staff greeted all Wal-Mart shoppers as they entered the store and walked around the Farmers' Market asking for their participation in the survey. The general public was alerted to the face-to-face and online polls through FRHS newsletters and an announcement in the local newspaper. At the end of polling, there were a total of 240 online responses and 33 face-to-face responses. The majority or 69.6% of the respondents are from zip code 47331, 96.3% identified as white, and 71.4% of all respondents were in the 36-65 age range.

Respondents were first asked to assess the effect of various factors on their community by selecting "very negative effect, some negative effect, no effect, some positive effect, or very positive effect." The second portion of the survey required respondents to assess the need for various services and facilities in their community by selecting "no need, slight need, definite need, or extreme need." In the needs section, respondents were also able to select "no opinion."

When asked "how do these issues affect your county," the top five answers by all respondents were:

1. Unemployment – 91.5% responded either some negative effect or very negative effect
2. Illegal drug abuse – 91.1% responded either some negative effect or very negative effect
3. Poverty – 90.4% responded either some negative effect or very negative effect
4. Prescription drug abuse – 90% responded either some negative effect or very negative effect
5. Teen pregnancy – 89.7% responded either some negative effect or very negative effect

When asked “do you see a need for the following services/facilities in your community,” the top five responses were:

1. Job creation – 90.8% responded either definite need or extreme need
2. Prescription drug education – 87.8% responded either definite need or extreme need
3. Illegal drug education – 86.7% responded either definite need or extreme need
4. Mental health services – 85.2% responded either definite need or extreme need
5. Abuse counseling services – 84.1% responded either definite need or extreme need

The most common responses in the open comments portion of the survey dealt with employment, the need for increasing awareness/improving currently available programs and services, and education, especially relating to drug abuse. A sampling of the comments from the survey is below and the full results for the online survey, face to face survey, and the combined results of the online and face-to-face surveys can be found in Appendix C.

Open comments regarding employment:

“WE NEED MORE JOBS BROUGHT TO THIS COMMUNITY.”

“Our community is in dire need of job creation. The community needs a good lift for once all the way around. The negative needs to leave and add positive to this town in order for it to thrive and succeed again!”

“More job opportunities in this town would bring more business all around. Connersville used to be a "booming" place but ever since Visteon shut down, people had to find job/home elsewhere and their need for business/services went elsewhere or they can't afford them at all...”

Open comments regarding currently available programs and services:

“My rating of these services as a slight need is such because all of these programs exist in one form or another throughout our county and the surrounding counties. The problem exists with the population that does not take advantage of the programs nor do they take the personal responsibility to follow through with what they may learn from these programs...”

“Some of the above where I put no need for services is because they already exist; more people just need to use them.”

“SERVICES THAT ARE ALREADY IN PLACE JUST MAY NEED SOME SRUCEING UP”

“Reasoning for the "No Need" or "Slight Need" is because Fayette County has those programs, just not sure how well they are attended or known about.”

“More community awareness for where to seek help for a child in need etc. (food, clothing, shelter)”

Open comments regarding education:

“Lack of education causes most of the problems.”

“Lot of education needed but also all the education doesn't help unless you have the means (income, etc.) to utilize the education it is futile. We have high teen pregnancy, drug abuse, etc. in this county and high poverty level”

“NEED JOBS, BIRTH CONTROL EDUCATION, DRUG EDUCATION, SMOKING INFO, ETC”

Summary of Findings

Based on the information gathered as part of the Community Health Needs Assessment, the Indiana Rural Health Association has identified the areas of greatest need in the service area of Fayette Regional Health System. Through the collection of health data and community input on their assets, values, and weaknesses within the hospital's service area, the following needs were identified as being of the highest importance:

Identified Needs

- Drugs: Illegal drug use/ prescription drug abuse / tobacco use
- Healthcare: Urgent care, mental health services, youth sex education
- Living conditions: Low cost healthcare options, employment opportunities
- Chronic Disease: Obesity and diabetes; hypertension and hyperlipidemia
- Assistance/Activity: Activity opportunities all ages, education programs, nutrition education

Additionally, to aid Fayette Regional Health System in the creation of an action plan, the IRHA has made preliminary recommendations for dealing with the defined areas of need.

Recommendations

Drugs:

- Focus on education regarding the effects of drugs on health
 - Discuss individual responsibility and ways to enhance it
- Market specific drug education classes
 - Engage previous offenders in the program. Have them share stories and reveal effects.
 - Involve social service agencies
 - Create parent groups
- Create a culture of health

Healthcare:

- Market availability of services and cost comparisons
 - HC Marketplace has created opportunity to educate constituents on how they can be in control of their HC and you are able to support their efforts
- Education regarding affordable health screening tools
 - Educate regarding risk factors: Smoking/obesity/inactivity
- Review target of educational tools
- Create a culture of health – all ages
- Focus on new methods of communicating with residents
 - Evaluate opportunity for monthly citizens roundtable

Living Conditions:

- Focus on improving what is already in place
 - How well do your constituents know and understand the services at Fayette Regional Health System? Provide a monthly update/highlight of a service or doctor to constituents.

- HC Marketplace has created opportunity to educate constituents on how they can be in control of their HC and you are able to support their efforts
- Healthy Workforce Education -- share with constituents what employers are looking for in a workforce. Communicate to residents that a healthy workforce will help draw potential employers. Have current employers, possibly from outside your county or secure assistance from the EDC, stand in the gap and support the education initiative.

Chronic Disease:

- Focus education on the benefits of screening and early detection
- Focus education efforts on behavioral changes proven to help
 - Healthy eating and weight reduction
 - Exercise programs
 - Farm to family programs
 - Farmers' market
 - Organic or natural foods vs. processed
 - Develop support groups for various disease
 - Create age group appropriate / Stage appropriate
 - Create newsletter per disease

Assistance/Activity:

- Evaluate opportunity to create walking/biking paths in community
- Wellness programs
 - Screenings for blood pressure/heart rate and BMI
 - Community activities
 - Events in the park, on the farm or at the community center
 - Family nights out, treasure hunts and fruit/vegetable foraging – engages local farmers and families
 - Seasoned senior adventure and activity nights—include churches, clubs, foundations and local business to participate
 - Monthly fitness newsletter—include senior activities, easy recipes, dietician notes and secure incentives from local fresh produce farms/markets

Fayette Regional Health System has a unique opportunity to become more focused in the health and well-being of its constituents. These efforts can become more successful by focusing on the community they are trying to touch and evaluating different methods to reach them. This can include upgrading current efforts, including newsletters or publications, websites and other communication methods.