# Table of Contents

Acknowledgements .................................................................................. 3

Letter to the Community ........................................................................... 4

Executive Summary .................................................................................... 5

Community Prioritization Process ................................................................. 6

Demographics of Vanderburgh County .......................................................... 9

Community Health Improvement Plan
  Community Health Issue #1 ................................................................. 11
  Community Health Issue #2 ................................................................. 14
  Community Health Issue #3 ................................................................. 17

Next Steps ................................................................................................. 21

Appendix ..................................................................................................... 22
Acknowledgements

The Vanderburgh County Health Department would like to thank the following organizations for participating in the planning strategies that led to the community health priorities outlined in this document:

Deaconess Health System, St. Mary’s Medical Center, ECHO Community Health Care Clinic, Welborn Baptist Foundation and the United Way of Southwestern Indiana.

Prioritization Session Membership

“Never doubt that a small group of thoughtful committed citizens can change the world; Indeed, it’s the only thing that ever has.”—Margaret Mead

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Holly Smith, Director of Strategic Planning & Marketing, St. Mary’s
Faren Levell, CEO, Southwestern Behavioral Health
Janet Raisor, Executive Director, St. Mary’s
Eric Girten, Director of Community Health, St. Mary’s
Andrea Hays, Director of Move---Ment & Upgrade, Welborn Baptist Foundation
Sandee Strader McMullen, CEO, ECHO Community Health Care
Chris Allen, Lab Director/PIO, Vanderburgh County Health Department
John Greany, Vice President of Strategic Services, St. Mary’s
Letter to the Community

Dear Vanderburgh County Residents,

The 2016-2019 Vanderburgh County Health Improvement Plan (CHIP) is the result of the second Vanderburgh Community Health Assessment in which data was collected and analyzed regarding our specific community health issues and barriers to healthy activities.

A community health improvement plan provides guidance to the health department, its partners, and its stakeholders, on improving the health of the Vanderburgh County population. The plan is the backbone for developing policies and defining actions to target efforts that promote health. Community partners, including those related to health, human services, and education, will use the community health improvement to set priorities, develop policies and programs, and coordinate and target resources to improve the community health over years to come.

Determinants of health are influenced by social and economic environment, physical environment, and the individual characteristics and behaviors. The context of people’s lives determine their health. Individuals are unlikely to be able to directly control many of the determinants of health therefore it is a community that must address these determinants.

The Vanderburgh County Health Department is proud to be a cornerstone of the communities it serves. It is our goal to ensure that every person in our region has access to quality health care and the resources needed to achieve optimal health. I appreciate the community’s commitment to making Vanderburgh County the best that it can be.

Sincerely,

Dr. R. Kenneth Spear
Health Officer Vanderburgh County
Executive Summary

The Vanderburgh County Health Department (VCHD) is pleased to present the Community Health Improvement Plan. Our community is working to change the places and organizations that touch people’s lives everyday—at school, work places, health care providers and other community settings to turn the tide on natural epidemics and chronic illness. Our vision is to build a healthy, resilient, and vibrant community for every person, and every family.

Vanderburgh County Health Department and our community partners have come together to form a coalition named Southwestern Indiana Teaming Up for Community Health, SWITCH. The SWITCH coalition includes the VCHD, local hospitals, regional hospitals, health care providers, a federally qualified health clinic, and a community patient safety council. The group has developed strategies to begin closing the gaps in health equity with recommendations for policies, programs and initiatives for improving the health of individuals in Vanderburgh County. The group reviewed needs assessments, utilizing data from different sources including community focus groups, key stakeholder interviews, and surveys. Building on this information, needs have been prioritized and work plans have been developed. By examining key health issues and the social and environmental determinants of health that contribute to health disparities, priority recommendations were developed to address these areas of concern. This Community Health Improvement Plan identifies needs, goals, measurable objectives, and strategies to help us as we work together finding solutions to important issues facing our community.
Community Prioritization Process

The Community Health Needs Assessment utilized a comprehensive set of secondary data indicators measuring the health and quality of life needs of Vanderburgh County Indiana residents, and was further informed with primary data from the community input of knowledgeable persons representing the broad interests of the community. The secondary data used in the assessment was obtained and analyzed from the Healthy Community Institute (HCI) data platform, a web based community health data platform which includes a comprehensive dashboard of over 100 community health and quality of life indicators covering over 20 topics in the areas of health, determinants of health, and quality of life. The data is derived from state and national public secondary data sources. Indicator values for Vanderburgh County were compared to other counties in Indiana and nationwide to score health topics and compare relative areas of need. Other considerations for health areas needs included trends over time, Healthy People 2020 targets, and disparities by age, gender, and race/ethnicity. 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. Primary data was gathered in 9 key informant interviews and 10 focus group discussions obtaining input from persons with expertise in public health and those representing broad interests of the community. In total 84 people participated in primary data collection to provide the community input which is listed in the plan. Interviews and focus group discussions were conducted in May 2015. The interview notes were then uploaded to the web application Dedoose, a qualitative data analysis software. This information provides an overall picture of the themes that were most prominent in the community input. Table below briefly summarizes the findings by topic area.
<table>
<thead>
<tr>
<th>Disparities</th>
<th>Topic</th>
<th>Score</th>
<th>Community Input</th>
</tr>
</thead>
<tbody>
<tr>
<td>G</td>
<td>Mental Health &amp; Mental Disorders</td>
<td>2.36</td>
<td></td>
</tr>
<tr>
<td>G</td>
<td>Prevention &amp; Safety</td>
<td>2.29</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Wellness &amp; Lifestyle</td>
<td>1.97</td>
<td></td>
</tr>
<tr>
<td>R</td>
<td>Immunizations &amp; Infectious Disease</td>
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<tr>
<td>G</td>
<td>Kidney &amp; Urinary Tract Diseases</td>
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</tr>
<tr>
<td>R</td>
<td>Diabetes</td>
<td>1.81</td>
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<tr>
<td>R</td>
<td>Maternal, Fetal, &amp; Infant Health</td>
<td>1.80</td>
<td></td>
</tr>
<tr>
<td>R</td>
<td>Older Adults &amp; Aging</td>
<td>1.80</td>
<td></td>
</tr>
<tr>
<td>G</td>
<td>Substance Abuse</td>
<td>1.80</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Women’s Health</td>
<td>1.77</td>
<td></td>
</tr>
<tr>
<td>R, G</td>
<td>Respiratory Disease</td>
<td>1.76</td>
<td></td>
</tr>
<tr>
<td>G</td>
<td>Heart Disease &amp; Stroke</td>
<td>1.61</td>
<td></td>
</tr>
<tr>
<td>R, G</td>
<td>Children’s Health</td>
<td>1.60</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Exercise Nutrition &amp; Weight</td>
<td>1.49</td>
<td></td>
</tr>
<tr>
<td>G</td>
<td>Cancer</td>
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<tr>
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<td>Access to Health Services</td>
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<tr>
<td></td>
<td>Men’s Health</td>
<td>0.93</td>
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</table>
Members of the collaborative including VCHD came together to prioritize the significant community health needs of Vanderburgh County considering several criteria; circle of influence, ability to impact change; opportunity to intervene at a prevention level; magnitude, severity of health issue; and underserved and vulnerable populations.

<table>
<thead>
<tr>
<th>Priority Areas</th>
<th>Community Health Improvement Goals 2016-2019</th>
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<tbody>
<tr>
<td>Exercise, Nutrition, &amp; Weight</td>
<td>Reduce the impact of obesity and sedentary lifestyle on morbidity and mortality by increasing the number of adults and children who are a healthy weight.</td>
</tr>
<tr>
<td>Maternal, Infant &amp; Children’s Health</td>
<td>Improve health related services available to women, infants, and children to impact our infant and child mortality</td>
</tr>
<tr>
<td>Behavior Health</td>
<td>Improve mental health in Vanderburgh County through prevention, education and improving access to appropriate mental health services.</td>
</tr>
</tbody>
</table>
Community Description
Vanderburgh County

County Health Rankings

County Health Rankings provided by the Robert Wood Johnson Foundation in collaboration with the University of Wisconsin Population Health Institute uses a model of population health that emphasizes multiple factors which if improved, will increase the health of a community. Health rankings are broken down into two main categories that include Health Factors and Health Outcomes. Health Outcomes include length and quality of life and are impacted by Health Factors such as clinical care, social and economic factors, as well as physical environment. These factors provide data to support the overall rankings. According to the 2016 County Health Rankings, Vanderburgh County ranks 60th for overall Health Factors and 77th in Health Outcomes, out of 92 counties in Indiana. ²
Demographics

Vanderburgh County’s population is similar to the statewide population, with 85.6% of the population being White, 9% Black/African American, 1.2% Asian, and the remainder being of other or 2 or more races. There are also fewer Hispanic/Latinos, at 2.7% of the population.

Approximately 10.5% of families are living in poverty, which is slightly lower than the state. The median household income for Vanderburgh County is $44,396 is about $5,000 lower than the state overall. 

<table>
<thead>
<tr>
<th>Demographic</th>
<th>47708</th>
<th>47710</th>
<th>47711</th>
<th>47712</th>
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<th>47715</th>
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<td>Socioeconomic Need</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>Families below poverty level</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Unemployment</td>
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<td>X</td>
<td>X</td>
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<td>X</td>
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<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>High School and Bachelor’s Degree Attainment</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Limited Access to a Vehicle</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

Highest X  Lowest X
Community Health Improvement Plan

Priority Area: Exercise, Nutrition, & Weight

Current Situation

Poorest performing indicators and rankings Vanderburgh County include those related to obesity. The percentage of obese adults is an indicator of the overall health and lifestyle of a community. Those who are overweight or obese are at increased risk for serious health conditions, coronary heart disease, type 2 diabetes, cancers, hypertension, stroke, premature death and other chronic conditions. Being obese also carries significant economic costs due to increased healthcare spending and lost earnings. The Healthy People 2020 national health target is to reduce the proportion of adults aged 20 and older who are obese to 30.5%. 5

Adults who are sedentary are at an increased risk of many serious health conditions. These conditions include obesity, heart disease, diabetes, colon cancer, and high blood pressure. In addition, physical activity improves mood and promotes healthy sleep patterns. Recommendations are that The American adults perform physical activity three to five times each week for 20 to 60 minutes at a time to improve cardiovascular fitness and body composition. The Healthy People 2020 national health target is to reduce the percentage of adults (ages 18 and up) who do not engage in any leisure-time physical activity to 32.6%. Seven out of nine key informants and 9 out of 10 focus groups cited Exercise, Nutrition & Weight as a need for Vanderburgh County. Building a community where people have access to healthy foods and can lead physically active lives requires a multidisciplinary approach. This means bringing together partners from more traditional disciplines such as education and health care, with nontraditional partners from transportation, city planning, recreation, worksites and environmental health.
Goal: Reduce the impact of obesity on morbidity and mortality by increasing the number of adults and children who are a healthy weight.

Objectives
- By 2019, decrease the percentage of overweight individuals in Vanderburgh County from 33.3% to 30%
- By 2019, decrease the percentage of sedentary individuals in Vanderburgh County from 26.8% to 24%

Strategies
- Development of a wellness program for VCHD
- Initiation of wellness for Vanderburgh County government
- Offer Weigh Down Program to Vanderburgh County Residents
- Initiate and offer Diabetes Programs to Vanderburgh County Residents
- Continue to offer educational programs in the preschools and Evansville Vanderburgh School Corporation
- Promote breast feeding
- Support resources that supply the socioeconomic at risk families with food
- Work with city planning to halt the rise in fast food restaurants
- Support workplace/school/church policies and programs that increase physical activity
- Facilitate safe accessible and affordable sites for physical activity by developing new sites and promoting and maintaining current sites

Outcome Indicators
- B/P at initiation and completion of the Weigh Down Programs
- HbgA1C at initiation and completion of the Diabetes Program
- County government adoption of a Wellness Program
- Breast Feeding rates at 6 mos. from WIC partners compared to initiation rates
- Number of private practice health care facilitates that recommend the use of walking guides in individualized wellness plan for patients.
Partners

Area Businesses, CAPE, Deaconess Health System, Diocesan Schools, Evansville Christian Life Center, Evansville In Motion, Evansville Trails Coalition, Evansville Vanderburgh County School Corporation, Farmer's Markets, Local Food Pantries, Purdue University Cooperative Extension Service, St. Mary's Medical Center, WIC, Vanderburgh County Health Department, YMCA,

Recommended Policy Changes

- Development of VCHD Wellness Policy

Alignment

- Improve communication, team work, and collaboration within and outside the VCHD including workplace development
- Reduce the burden of chronic disease and prevent and reduce the spread of communicable disease
- Continuously examine/analyze measures of public health of the community
Priority Area: Maternal, Infant & Children’s Health

Current Situation
The State of Indiana has one of the highest Fetal\Infant Mortality rates in the country. Southwestern Indiana and specifically Vanderburgh County has one of the highest rate in the State at 11.2\1000.7 The State and our region have determined our number one priority is reducing Fetal\Infant Mortality. The primary factors that contribute to infant mortality in Vanderburgh County include smoking while pregnant, limited prenatal care, obesity and unsafe sleep practices. Racial disparities affect our infant mortality in Vanderburgh County and is reflected in the poorest zip codes. Focus interventions in the at risk zip codes of 47710, 47711, 47713, 47714 may allow for a greater impact in mortality.9 We know that the health trajectory of one’s life is established very early on in child development. Children should all have the opportunity to participate in ongoing, scientifically proven, educational opportunities and programs that establish positive health and emotional behaviors. Indiana ranks 32nd in the nation’s overall child well-being by the Annie E. Casey Foundation.1 Children’s Health is an issue that will impact our community for years to come.

Goal: Improve health related services available to women, infants, and children to impact our infant and child mortality.

Objectives

- Reduce infant mortality in at risk zip codes 47710 and 47711 and 47713 by 2% by 2019.
- Promote breastfeeding through policies and programs to increase the number of infants who breastfeed at birth and the proportion still breast feeding at six months.
- Provide in home services to at risk prenant women and their infants as identified by our community partners.
- Determine trends in mortality and morbidity to provide appropriaite anticpatory guidance to Vanderburgh County providers.
Strategies

- Provide stop smoking effort in Vanderburgh County by the VCHD smoking cessation programs including Baby and Me Tobacco Free
- Provide education on factors affecting infant mortality to the community
- Support the FIMR process to access trends in fetal infant mortality
- Explore funding options for home visiting services
- Support WIC services to at risk populations
- Obtain data from local trauma centers, ISDH and vital records in regards to mortality and morbidity of youth
- Play an active role in the CARE Force in the identification of Child Abuse, review of CDR cases and offer in home services to at risk families
- Support initiatives of Baby Friendly Accredited sites

Outcome Indicators

- CO2 levels of participating Baby and me Tobacco Free participants
- Lower Infant Mortality rates in 47710 and 47711 and 47713
- Breast Feeding rates at 6 mos. from WIC partners compared to initiation rates
- Individualized wellness plans utilized in 5 pediatric provider’s office as anticipatory guidance for injury prevention
- Individualized wellness plans utilized in 5 prenatal provider’s office including smoking cessation, nutrition, and prenatal vitamin uptake
- Number of local business breast feeding policies initiated yearly

Partners

Diocesan Schools, CARE Task Force Members. Child Death Review Team, Deaconess, ECHO clinic, Evansville Vanderburgh County School Corporation, Fetal Infant Mortality Review Team, St. Mary’s Medical Center, SafeKids, Vanderburgh County Health Departments, Welborn Foundation, The Women’s Hospital, WIC
Recommendations in Policy Changes

- Support Indiana State legislation for the integration of state FIMR with CDR programs
- Support local and state initiatives to legislate for ATV helmet law

Alignment

- Improve communication, team work, and collaboration within and outside the VCHD including workplace development
- Continued quality improvement throughout the VCHD
- Continuously examine/analyze measures of public health of the community
Priority Area: Behavioral Health

According to the Behavioral Health’s Poorest Performing Indicators and Rankings Vanderburgh County ranks in the worst quartile in the US and Indiana counties for Depression in the Medicare Population. The suicide rate in Vanderburgh County is 21.6 deaths per 100,000 population. More than 33,000 people kill themselves each year according to the Centers for Disease Control and Prevention, but suicide deaths only account for part of the problem. An estimated 25 attempted suicides occur per every suicide death, and those who survive suicide may have serious injuries, in addition to having depression and other behavioral conditions. The Healthy People 2020 national health target is to reduce the suicide rate to 10.2 deaths per 100,000 population.

Vanderburgh County ranks in the worst quartile in the US and Indiana counties for Death Rate due to Drug Poisoning with 23.6 deaths per 100,000 population. Drug overdose deaths are the leading cause of injury death in the United States, with over 100 drug overdose deaths occurring every day. Community input included eight out of nine key informants and 10 out of 10 focus groups cited both Mental Health & Mental Disorders and Substance Abuse as a pressing health concerns in Vanderburgh County. Key informants cited many concerns with respect to Behavioral Health, including a shortage of providers, stigma around seeking treatment for mental health issues, rising suicide rates, and the relationship between substance abuse and mental health. The other aspect of substance abuse is that of tobacco abuse and the attendant costs in Loss of Productive life Years, increased medical costs and longer term chronic illness and cancer.
Goal: Improve mental health in Vanderburgh County through prevention, education and improving access to appropriate mental health services

Objectives:

- By end 2017, improve mental health in Vanderburgh County through conducting a mental health resource gap analysis to identify key gaps in services, education, and awareness.
- Convene alcohol, tobacco, and drug prevention stakeholders to create a countywide strategy to address alcohol, tobacco and other drugs by the end of 2017.

Strategies:

- Establish a system to identify practitioners, services and businesses providing mental health services for children and adults.
- Mapping of all applicable assets addressing Behavioral and Mental Health Assistance for community use.
- Develop, conduct and promote culturally competent educational programs, Adult and Child Mental Health First Aid training, to reduce the stigma and fears that prevent individuals from seeking mental health services.
- Reduce barriers to access to substance abuse and mental health services.
- Wellness plans within Vanderburgh County to address substance abuse and smoking
- Collaboration with local partners to initiate behavioral health policy and programs

Outcome Indicators:

- Number of First Aid Workers to complete training
- Number of referrals made by trained First Aid Workers
- Utilization of resource guides by community partners in 10 private practices
- Evansville Vanderburgh School Corporation to address behavior health strategies in yearly action plan
Partners:

AID Resource Group, Community Health Needs Assessment Participants, CAPE, Deaconess, Deaconess Cross Pointe, Evansville Police & Sherriff’s Department, Evansville Prosecutor, Evansville Vanderburgh School Corporation, Indiana Behavioral Health, Mayors office, Minority Health Group, St. Mary's Medical Center, Smoke Free Evansville, Southwestern United Way, Youth First

Recommended Policy

- Community collaborative policy to complete mental health training for 700 professionals

Alignment

- Improve communication, team work, and collaboration within and outside the VCHD including workplace development
- Reduce the burden of chronic disease and prevent and reduce the spread of communicable disease
- Continuously examine/analyze measures of public health of the community
Next Steps

Sustaining implementation efforts of the Community Health Improvement Plan as well as ongoing participation in the community health improvement implementation process has been built into this plan using several strategies. At the center of this plan is the strengthening the local public health system partnerships and structure. The SWITCH 2 Health structure has been created and will provide a platform for ongoing community health improvement. This coalition has been created to foster regional initiatives and Vanderburgh County components of the collation will address local initiatives of the Community Health Improvement Plan. The collaboration for implementing the Community Health Improvement Plan is essential for the success of the plan. Leadership of the efforts and resources needed to implement the plan will be shared across local collaborative effort. Community health improvement is not a static process. We promote a collaborative approach to community health planning and are therefore looking for partners in a variety of sectors interested in partnering across the local public health system in the Evansville, Indiana area to assist in the development of recommendations, implementation of programs, and evaluation of our efforts. In order to meet and exceed public health standards, the Vanderburgh County Health Department is committed to the implementation of the Community Health Improvement Plan. During the creation of the plan, significant efforts were made to keep the strategies and actions as realistic and manageable for the capacity of our community and collaborative.
Vanderburgh County Community Health Improvement Plan

Development Committee

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Appendix


