BOONE COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)

"Mobilize community partners to provide collaborative services through a coordinated public health system and to promote healthy lifestyles"

"To protect and promote the health of all residents and visitors of Boone County"

Boone County, Indiana 2015-2017
ACKNOWLEDGEMENTS

Boone County Health Department sincerely appreciates the following agencies that participated with prioritizing the focus areas and contributed to the planning process of the Community Health Improvement Plan.

- Alzheimer's Association of Indiana
- Aspire Indiana
- Boone County Commissioners
- Boone County Community Clinic
- Boone County Council
- Boone County Cancer Society
- Boone County Food Coalition
- Boone County Health Board
- Boone County Health Department
- Boone County Residents
- Boone County Senior Services, Inc
- Central Indiana Council on Aging (CICOA)
- Community Foundation of Boone County
- Cummins Behavioral Health Systems, Inc.
- Drug Abuse Resistance Education (DARE)
- Drug Free Boone County
- Indiana State Department of Health
- Indy Reads: Boone County
- Integrative Wellness, LLC
- Lebanon Community of Shalom
- Lebanon Community Schools
- MDwise, Inc. - Boone County
- Purdue Extension - Boone County
- St Vincent Peyton Manning Hospital
- Skjodt-Barrett Foods, Inc.
- The Arc of Greater Boone County
- The Lebanon Reporter
- Tobacco Free Boone County
- United Way of Central Indiana
- Western Boone Community Schools
- Witham Family YMCA
- Witham Health Services
- Women, Infants, and Children (WIC)
- Zionsville Community Schools
## TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledgments</td>
<td>2</td>
</tr>
<tr>
<td>Table of Contents</td>
<td>3</td>
</tr>
<tr>
<td>Executive Summary</td>
<td>4</td>
</tr>
<tr>
<td>Plan Overview</td>
<td>5</td>
</tr>
<tr>
<td>Community Health Improvement Planning Process</td>
<td>6</td>
</tr>
<tr>
<td>National Standards</td>
<td>10</td>
</tr>
<tr>
<td>County Health Ranking Model</td>
<td>10</td>
</tr>
<tr>
<td>Community Description</td>
<td>12</td>
</tr>
<tr>
<td>Healthy People 2020 Model</td>
<td>14</td>
</tr>
<tr>
<td>Action Plan for Priority Areas</td>
<td>15</td>
</tr>
<tr>
<td>Obesity and Nutrition</td>
<td>16</td>
</tr>
<tr>
<td>Mental Health and Mental Disorders</td>
<td>18</td>
</tr>
<tr>
<td>Tobacco Use</td>
<td>20</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>22</td>
</tr>
<tr>
<td>Excessive Drinking</td>
<td>22</td>
</tr>
<tr>
<td>Chronic Conditions</td>
<td>24</td>
</tr>
<tr>
<td>Cancer Related Deaths</td>
<td>24</td>
</tr>
<tr>
<td>Alzheimer’s Disease Deaths</td>
<td>26</td>
</tr>
<tr>
<td>Next Steps</td>
<td>28</td>
</tr>
</tbody>
</table>
EXECUTIVE SUMMARY

The Community Health Improvement Plan (CHIP) is the result of a collaborative effort among various community partners to prioritize the areas with opportunity for health improvements that was identified from the Community Health Assessment. Community partners were surveyed to help prioritize the focus areas for the CHIP and identify key stakeholders. The key stakeholders and Boone County Health Department got together and developed goals, objects, and strategies for each priority area.

There were five focus areas from the Community Health Assessment (CHA) were Substance Abuse (Excessive Drinking), Chronic Conditions (Cancer and Alzheimer’s mortality), Mental Health and Mental Disorders, Obesity and Nutrition, and Tobacco Use. The rates for obesity and tobacco use in Boone County were higher than the top U.S performers in 2014. The County Health Ranking identified these health behaviors as areas to explore potential opportunities for improvement. There was also an increase in the average number of poor mental health days and this number was higher than that of the top U.S performers in 2014. Cancer and Alzheimer’s accounted for approximately 30% of the deaths in Boone County. Four cancer specific deaths within the county were higher than the state and national rates and also failed to satisfy the Health People 2020 target for each one. The Alzheimer’s death rate was significantly higher than both state and national rates.

Efforts from this plan are intended to improve the overall health and well-being, as well as improve the quality of life for the county residents. The Three Year Plan (2015-2017) was developed in accordance with the Health People 2020 plan and the County Health Ranking.

The table below shows the goals for each priority area in this plan.

<table>
<thead>
<tr>
<th>Priority Areas</th>
<th>Targeted Health Improvement Goal 2015-2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity and Nutrition</td>
<td>Decrease obesity rates and promote healthy choices</td>
</tr>
<tr>
<td>Mental Health and Mental Disorders</td>
<td>Increase accessibility and affordability to Mental Health Services</td>
</tr>
<tr>
<td>Tobacco Use</td>
<td>Decrease smoking rates and eliminate secondhand smoke</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>Reduce Substance Abuse, specifically Excessive Drinking</td>
</tr>
<tr>
<td>Chronic Conditions</td>
<td>Decrease Cancer Related Deaths, Decrease Alzheimer Related Deaths</td>
</tr>
</tbody>
</table>
PLAN OVERVIEW

Boone County Community Health Improvement Plan (CHIP) was developed by community partners who would assist with the implementation of activities for each priority area. The plan contains goals, outcome objectives, strategies and activities to help accomplish the goals, a timeline, responsible partners and resources.

The plan is intended to serve as a roadmap to improve the overall health and well-being as well as improve the quality of life of the county residents. The Healthy People 2020 and County Health Ranking were used as standards to indicate where we are now and where we would want to be over the course of the Plan cycle (2015-2017). These standards would be used to either identify or address social determinants of health and causes of poorer health outcomes.

The action plan for this document involves community partners who would assist with the implementation and evaluation of activities. The plan would be evaluated annually and updated as goals and objectives are achieved for each priority area.
2008

- Local Public Health System (LPHS) Assessment was conducted using a national instrument utilizing model standards of each of the Ten Essential Public Health Services for systematic determination of identification of community health needs. The County’s LPHS scored the lowest in Essential Service #4 “Mobilize Community Partnerships to Identify and Solve Health Problems”.

Local Public Health System Illustration, CDC, [http://www.cdc.gov/od/ocphp/nphpsp/](http://www.cdc.gov/od/ocphp/nphpsp/)
2009

- Boone County Healthy Coalition (BCHC) conducted a summit vision survey intended to raise public awareness of the County’s health needs and fill gaps in what health services the public needs and wants.

- BCHC was formed after the LPHS assessment with the help of a Center for Disease Control (CDC) Block Grant through the Indiana State Department of Health and their Public Health System’s Quality Improvement Program. With the coalition, Boone County Health Department (BCHD) was be able identify partners in the public health system.

**Mission Statement**

*To form a structured and sustainable healthy coalition that mobilizes community partners to provide collaborative services through a coordinated public health system and to promote healthy lifestyles.*
2010

- Healthcare Providers survey was conducted to identify what gaps exist and how those gaps can be filled.

2011

- Indiana State Department of Health Public Health Accreditation conducted a gap analysis. Developing a Community Health Improvement Plan (CHIP) and Community Health Assessment (CHA) were the top two priorities for improvement.
2012

- Joined the Top 10 by 2025 coalition. The long-term goal of the coalition is to help the Metropolitan Indianapolis Area become one of the Top 10 healthiest communities by 2025. Their CHIP has four focus areas:
  
  - Increasing Physical Activity
  - Improving Nutrition
  - Decreasing Smoking
  - Improving the Wellness Environment

2014

- The Community Health Assessment (CHA) was created using information from a community health needs assessment conducted on behalf of Witham Health Services by Professional Research Consultants, Inc. (PRC), County Health Ranking, and Boone County Healthcare Provider survey. The five areas to explore opportunity for health improvement from the CHA:
  
  - Obesity and Nutrition
  - Mental Health and Mental Disorders
  - Tobacco Use
  - Substance Abuse (Excessive Drinking)
  - Chronic Conditions: Cancer Deaths and Alzheimer Deaths

- The findings from the CHA were then presented to various community partners and stakeholders July through September.

- The community partners were surveyed after the presentation to prioritize the focus areas for the CHIP.

- A series of sessions were scheduled with key stakeholders to discuss goals, objectives and strategies for meeting the identified health needs. The CHIP is the product of the various sessions.
NATIONAL STANDARDS

COUNTY HEALTH RANKING MODEL

The County Health Rankings measure the health of nearly all counties in the nation and rank them within states. The Rankings are compiled using county-level measures from a variety of national and state data sources. These measures are standardized and combined using scientifically-informed weights. These Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play.

The Rankings are based on summary composite scores calculated from the individual measures below.

![Diagram of Health Factors and Policies & Programs]

Boone County was ranked 3rd healthiest county in Indiana according to the 2014 County Health Rankings report. Boone County is located in the metropolitan Indianapolis region of Indiana. Vital records showed during 2011, there were 701 births and 446 deaths in Boone County. It is the second fastest-growing county with a 2.5 percent increase in 2013. The County has a highly educated population with 93.4% of adults 25 and older having a high school diploma or higher and 39.5% with a B.A. or higher degree. The table below shows the 2014 County Health Rankings snapshot for the county.

Boone (BO), 2014

<table>
<thead>
<tr>
<th>Category</th>
<th>Boone County</th>
<th>Error Margin</th>
<th>Top U.S. Performers*</th>
<th>Indiana Rank (of 92)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Outcomes</td>
<td></td>
<td></td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Length of Life</td>
<td></td>
<td></td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Premature death</td>
<td>5,695</td>
<td>4,977-6,412</td>
<td>5,317</td>
<td>7,520</td>
</tr>
<tr>
<td>Quality of Life</td>
<td>11%</td>
<td>8-15%</td>
<td>10%</td>
<td>16%</td>
</tr>
<tr>
<td>Poor or fair health</td>
<td>2.6</td>
<td>1.8-3.4</td>
<td>2.5</td>
<td>3.6</td>
</tr>
<tr>
<td>Poor physical health days</td>
<td>2.8</td>
<td>2.0-3.5</td>
<td>2.4</td>
<td>3.7</td>
</tr>
<tr>
<td>Poor mental health days</td>
<td>6.4%</td>
<td>5.7-7.1%</td>
<td>6.0%</td>
<td>8.3%</td>
</tr>
<tr>
<td>Low birthweight</td>
<td>17%</td>
<td>12-23%</td>
<td>14%</td>
<td>23%</td>
</tr>
<tr>
<td>Health Factors</td>
<td>28%</td>
<td>23-34%</td>
<td>25%</td>
<td>31%</td>
</tr>
<tr>
<td>Health Behaviors</td>
<td>8.9</td>
<td>8.7</td>
<td>7.5</td>
<td></td>
</tr>
<tr>
<td>Adult smoking</td>
<td>8%</td>
<td>23-35%</td>
<td>21%</td>
<td>28%</td>
</tr>
<tr>
<td>Adult obesity</td>
<td>47%</td>
<td>85%</td>
<td>64%</td>
<td></td>
</tr>
<tr>
<td>Access to exercise opportunities</td>
<td>19%</td>
<td>13-26%</td>
<td>10%</td>
<td>16%</td>
</tr>
<tr>
<td>Excessive drinking</td>
<td>19%</td>
<td>14%</td>
<td>26%</td>
<td></td>
</tr>
<tr>
<td>Alcohol-impaired driving deaths</td>
<td>174</td>
<td>123</td>
<td>427</td>
<td></td>
</tr>
<tr>
<td>Sexually transmitted infections</td>
<td>22</td>
<td>20-25</td>
<td>20</td>
<td>40</td>
</tr>
<tr>
<td>Teen births</td>
<td>10%</td>
<td>9-12%</td>
<td>11%</td>
<td>17%</td>
</tr>
<tr>
<td>Clinical Care</td>
<td>558:1</td>
<td>1,051:1</td>
<td>1,539:1</td>
<td></td>
</tr>
<tr>
<td>Dentists</td>
<td>2,480:1</td>
<td>1,439:1</td>
<td>2,073:1</td>
<td></td>
</tr>
<tr>
<td>Mental health providers</td>
<td>1,751:1</td>
<td>536:1</td>
<td>916:1</td>
<td></td>
</tr>
<tr>
<td>Preventable hospital stays</td>
<td>67</td>
<td>60-74</td>
<td>46</td>
<td>76</td>
</tr>
<tr>
<td>Diabetic screening</td>
<td>88%</td>
<td>81-96%</td>
<td>90%</td>
<td>84%</td>
</tr>
<tr>
<td>Mammography screening</td>
<td>66%</td>
<td>59-74%</td>
<td>71%</td>
<td>61%</td>
</tr>
<tr>
<td>Social &amp; Economic Factors</td>
<td></td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>High school graduation</td>
<td></td>
<td></td>
<td></td>
<td>67%</td>
</tr>
<tr>
<td>Some college</td>
<td>77%</td>
<td>72-82%</td>
<td>70%</td>
<td>60%</td>
</tr>
<tr>
<td>Unemployment</td>
<td>6.7%</td>
<td>4.4%</td>
<td>8.4%</td>
<td></td>
</tr>
<tr>
<td>Children in poverty</td>
<td>8%</td>
<td>6-10%</td>
<td>13%</td>
<td>22%</td>
</tr>
<tr>
<td>Inadequate social support</td>
<td>17%</td>
<td>12-24%</td>
<td>14%</td>
<td>20%</td>
</tr>
<tr>
<td>Children in single-parent households</td>
<td>17%</td>
<td>14-20%</td>
<td>20%</td>
<td>33%</td>
</tr>
<tr>
<td>Violent crime</td>
<td>23</td>
<td>64</td>
<td>329</td>
<td></td>
</tr>
<tr>
<td>Injury deaths</td>
<td>46</td>
<td>38-54</td>
<td>49</td>
<td>61</td>
</tr>
<tr>
<td>Physical Environment</td>
<td></td>
<td></td>
<td></td>
<td>73</td>
</tr>
</tbody>
</table>
### Air pollution - particulate matter

<table>
<thead>
<tr>
<th></th>
<th>Boone County</th>
<th>Indiana</th>
</tr>
</thead>
<tbody>
<tr>
<td>13.6</td>
<td>9.5</td>
<td>13.5</td>
</tr>
<tr>
<td>9%</td>
<td>0%</td>
<td>2%</td>
</tr>
</tbody>
</table>

### Severe housing problems

<table>
<thead>
<tr>
<th></th>
<th>Boone County</th>
<th>Indiana</th>
</tr>
</thead>
<tbody>
<tr>
<td>11%</td>
<td>9-12%</td>
<td>9%</td>
</tr>
<tr>
<td>9%</td>
<td>14%</td>
<td></td>
</tr>
</tbody>
</table>

### Driving alone to work

<table>
<thead>
<tr>
<th></th>
<th>Boone County</th>
<th>Indiana</th>
</tr>
</thead>
<tbody>
<tr>
<td>86%</td>
<td>84-87%</td>
<td>71%</td>
</tr>
<tr>
<td>71%</td>
<td>83%</td>
<td></td>
</tr>
</tbody>
</table>

### Long commute - driving alone

<table>
<thead>
<tr>
<th></th>
<th>Boone County</th>
<th>Indiana</th>
</tr>
</thead>
<tbody>
<tr>
<td>40%</td>
<td>37-43%</td>
<td>15%</td>
</tr>
<tr>
<td>15%</td>
<td>30%</td>
<td></td>
</tr>
</tbody>
</table>

* 90th percentile, i.e., only 10% are better.  
Note: Blank values reflect unreliable or missing data.

<table>
<thead>
<tr>
<th></th>
<th>Boone County</th>
<th>Indiana</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Demographics

<table>
<thead>
<tr>
<th></th>
<th>Boone County</th>
<th>Indiana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>58,944</td>
<td>6,537,334</td>
</tr>
<tr>
<td>% below 18 years of age</td>
<td>27%</td>
<td>24%</td>
</tr>
<tr>
<td>% 65 and older</td>
<td>12%</td>
<td>14%</td>
</tr>
<tr>
<td>% Non-Hispanic African American</td>
<td>1%</td>
<td>9%</td>
</tr>
<tr>
<td>% American Indian and Alaskan Native</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>% Asian</td>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>% Native Hawaiian/Other Pacific Islander</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>% Hispanic</td>
<td>2%</td>
<td>6%</td>
</tr>
<tr>
<td>% Non-Hispanic white</td>
<td>94%</td>
<td>81%</td>
</tr>
<tr>
<td>% not proficient in English</td>
<td>1%</td>
<td>2%</td>
</tr>
<tr>
<td>% Females</td>
<td>51%</td>
<td>51%</td>
</tr>
<tr>
<td>% Rural</td>
<td>34%</td>
<td>28%</td>
</tr>
</tbody>
</table>

### Health Outcomes

<table>
<thead>
<tr>
<th></th>
<th>Boone County</th>
<th>Indiana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes</td>
<td>9%</td>
<td>11%</td>
</tr>
<tr>
<td>HIV prevalence rate</td>
<td>53</td>
<td>159</td>
</tr>
<tr>
<td>Premature age-adjusted mortality</td>
<td>299</td>
<td>382</td>
</tr>
<tr>
<td>Infant mortality</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>Child mortality</td>
<td>51</td>
<td>64</td>
</tr>
</tbody>
</table>

### Health Behaviors

<table>
<thead>
<tr>
<th></th>
<th>Boone County</th>
<th>Indiana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food insecurity</td>
<td>11%</td>
<td>16%</td>
</tr>
<tr>
<td>Limited access to healthy foods</td>
<td>1%</td>
<td>6%</td>
</tr>
<tr>
<td>Motor vehicle crash deaths</td>
<td>12</td>
<td>13</td>
</tr>
<tr>
<td>Drug poisoning deaths</td>
<td>8</td>
<td>12</td>
</tr>
</tbody>
</table>

### Health Care

<table>
<thead>
<tr>
<th></th>
<th>Boone County</th>
<th>Indiana</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uninsured adults</td>
<td>13%</td>
<td>20%</td>
</tr>
<tr>
<td>Uninsured children</td>
<td>5%</td>
<td>8%</td>
</tr>
<tr>
<td>Health care costs</td>
<td>$9,541</td>
<td>$9,901</td>
</tr>
<tr>
<td>Could not see doctor due to cost</td>
<td>11%</td>
<td>14%</td>
</tr>
<tr>
<td>Other primary care providers</td>
<td>1,551:1</td>
<td>2,045:1</td>
</tr>
<tr>
<td>Social &amp; Economic Factors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Median household income</td>
<td>$69,919</td>
<td>$46,954</td>
</tr>
<tr>
<td>Children eligible for free lunch</td>
<td>17%</td>
<td>39%</td>
</tr>
<tr>
<td>Homicide rate</td>
<td>3</td>
<td>5</td>
</tr>
</tbody>
</table>

* Data supplied on behalf of state  
Note: Blank values reflect unreliable or missing data

1 STATS-Indiana  
http://www.stats.indiana.edu/profiles/profiles.asp?scope_choice=a&county_changer=18011&button1=Get+Profile&id=2&page_path=Area+Profiles&path_id=11&panel_number=1

2 Indiana Business Research Center at Indiana University’s Kelley School of Business  
http://news.indiana.edu/releases/iu/2014/03/indiana-population-estimates.shtml

3 county health ranking  
http://www.countyhealthrankings.org/app/#!/indiana/2014/rankings/boone/county/outcomes/overall/snapshot
HEALTHY PEOPLE 2020 MODEL

Healthy People provides science-based, 10-year national objectives for improving the health of all Americans. Healthy People has established benchmarks and monitored progress over time in order to:

- Encourage collaborations across communities and sectors.
- Empower individuals toward making informed health decisions.
- Measure the impact of prevention activities.

ACTION PLAN FOR PRIORITY AREAS
**OBESITY AND NUTRITION**

Although the obesity rates for Boone County are more favorable than Indiana findings and similar to the US findings, the 2014 County Health Ranking identified obesity as a health behavior to explore potential opportunities for improvement. Studies have shown that being overweight or obese increases the risk of health conditions such as: coronary heart disease, type 2 diabetes, some types of cancers, hypertension, dyslipidemia, stroke, liver and gallbladder disease, sleep apnea and respiratory problems, osteoarthritis, and other health problems.\(^1,2\)

### Relationship of Overweight With Other Health Issues

(\textit{By Weight Classification; Boone County, 2012})

<table>
<thead>
<tr>
<th>Health Category</th>
<th>Healthy Weight</th>
<th>Overweight/Not Obese</th>
<th>Obese</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood Pressure</td>
<td>21.70%</td>
<td>32.60%</td>
<td>47.90%</td>
</tr>
<tr>
<td>Cholesterol</td>
<td>24.00%</td>
<td>35.20%</td>
<td>40.80%</td>
</tr>
<tr>
<td>Arthritis/Rheumatism</td>
<td>21.50%</td>
<td>30.10%</td>
<td>48.40%</td>
</tr>
<tr>
<td>Activity Limitations</td>
<td>8.40%</td>
<td>15.80%</td>
<td>38.40%</td>
</tr>
<tr>
<td>Chronic Depression</td>
<td>16.70%</td>
<td>20.90%</td>
<td>37.40%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>3.60%</td>
<td>6.30%</td>
<td>18.70%</td>
</tr>
<tr>
<td>“Fair/Poor” Health</td>
<td>8.80%</td>
<td>12.00%</td>
<td>16.20%</td>
</tr>
</tbody>
</table>

Source: Assessment Prepared for Witham Health Services by Professional Research Consultants, Inc.

According to the 2014 County Health Ranking, 28% of adult population (age 20 and older) had a body mass index (BMI) greater than or equal 30 kg/m\(^2\). Sixty one percent of healthcare providers surveyed in the county in 2012 identified obesity as a significant health behavior. The Community Health Needs Assessment (CHNA) prepared for Witham Health Services by Professional Research Consultants, Inc. (PRC) indicated that men, respondents age 40 and above, and white adults had a higher prevalence of obesity. The community partners also identified childhood obesity as a problem that could lead into adult obesity if not addressed in children.

OBESITY AND NUTRITION

GOAL

1. Reduce obesity rates and promote healthy choices

OBJECTIVES

1. Reduce the adult obesity rate from 28% to 25% by 2017
2. Establish the childhood obesity rates in Boone County by the end of 2015

STRATEGIES

1. Create a taskforce to address Boone County’s obesity rates in 2015 and increase awareness of available resources and activities occurring in our community
2. Ensure that the food pantries and their customers are educated on healthier food choices for food pantry items beginning in 2015
3. Develop an initiative to address childhood obesity using the data (height, weight, and BMIs) from the Fitness Gram in 2015
4. Implement United Way’s new initiative “Jump In”, to address obesity
5. Engage and collaborate with school systems, community organizations, churches, and businesses to promote a countywide health campaign by 2017

IDENTIFIED COMMUNITY PARTNERS

- Boone County Community Clinic*
- Boone County Food Pantries*
- Boone County Health Department*
- Boone County Healthy Coalition*
- Boone County School Districts
- Integrative Wellness, LLC*
- Lebanon Area Boys and Girls Club
- Lebanon Community Schools
- Local Media/Social Media
- Medical Providers
- Purdue Extension – Boone County*
- United Way of Central Indiana*
- Western Boone Community Schools
- Witham Health Services*
- Witham Family YMCA*
- Zionsville Boys and Girls Club
- Zionsville Community Schools

*Partners at the CHIP development meetings
MENTAL HEALTH AND MENTAL DISORDERS

The World Health Organization (WHO) defines mental health as “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.”

From 2011 to 2014, the County Health Ranking showed an increase in the average number of days an adult reported their mental health “as not good” from 2.6 to 2.8. The CHNA prepared for Witham Health Services by Professional Research Consultants, Inc. (PRC) showed a significantly high rate of adults with low income and Non-Whites reported “fair” or “poor” mental health in 2012.

Fifty seven percent of Boone County’s healthcare providers surveyed indicated mental health disorders as one of the top ranking unmet needs or need for additional healthcare resources in the County. Sixty six percent of the providers viewed the lack of access to mental health services as highly and moderately significant barriers.

Lack of Access To Mental Health Services

![Lack of Access To Mental Health Services Chart]

Source: Healthcare Providers Survey

MENTAL HEALTH AND MENTAL DISORDERS

GOAL

1. Increase awareness and accessibility of Mental Health Services

OBJECTIVES

1. Decrease the percentage of healthcare providers in Boone County that view the lack of access to Mental Health Services as highly or moderately significant from 66% to less than 50% by 2017
2. Collaboratively conduct two Mental Health Service awareness events in Boone County annually and conduct pre and post awareness surveys

STRATEGIES

1. Improve the visibility of mental health services by continuing to promote available mental health services in Boone County
2. Continue to promote and utilize the Crisis Intervention Team (CIT) in Boone County
3. Continue to collaborate with the school systems and public safety to provide public awareness events on mental health issues.
4. Utilize existing community newsletters and local media outlets to promote Mental Health Services in Boone County during 2015
5. Pursue after hours transportation options and alternatives for clients seeking Mental Health Services
6. Conduct a follow up survey with healthcare providers on access to Mental Health Services in Boone County during 2017

IDENTIFIED COMMUNITY PARTNERS

- Aspire Indiana*
- Boone County Community Clinic
- Boone County Health Department*
- Boone County Healthy Coalition*
- Boone County Senior Services, Inc
- Boone Area Transportation System
- Cummins Behavioral Health Systems, Inc.*
- Integrative Wellness, LLC*
- Local Media/Social Media
- Medical Providers
- Mental Health America of Boone County
- The Arc of Greater Boone County*
- Witham Health Services

*Partners at CHIP development meeting
TOBACCO USE

Tobacco use is a health behavior the 2014 County Health Ranking identified as an area to explore opportunities for health improvement. The adults smoking rates of 17% failed to satisfy the Healthy People 2020 target of 12% or lower.\(^1\)\(^2\) Boone County CHA showed 18.5% of women aged 18-44 currently smoke.

Tobacco use increases the risk factor for heart disease, cancer, stroke, respiratory conditions, low birth weight and other adverse health outcomes.\(^3\) It is the leading preventable cause of death and disease in the United States. Each year cigarette smoking causes approximately 480,000 deaths, more deaths than AIDS, alcohol, car accidents, illegal drug use, murders and suicides, combined.\(^3\)

Current Smokers
(Boone County, 2012)

![Current Smokers Chart]

Source: Assessment Prepared for Witham Health Services by Professional Research Consultants, Inc.

\(^1\)County Health Ranking. 2014 Boone County Snapshot. [http://www.countyhealthrankings.org/app/#/indiana/2014/rankings/boone/county/outcomes/overall/snapshot](http://www.countyhealthrankings.org/app/#/indiana/2014/rankings/boone/county/outcomes/overall/snapshot)


Tobacco Use

Goal

1. Decrease smoking rates and eliminate secondhand smoke

Objective

1. Decrease adult smoking rate from 17% to 12% by 2017

Strategies

1. Contact health care providers to discuss the benefits of 1-800 Quit Now
2. Work with Witham to electronically embed 1-800 Quit Now with Witham’s EMRs
3. Continue efforts towards a Comprehensive Smoke Free Air Law
4. Support an increase in taxes on tobacco and e-cigarette products
5. Continue local coalition building efforts of the Tobacco Free Boone County (TFBC)
6. Continue educating the public, utilizing the VOICE teen program, through providing awareness of the effects of nicotine and e-cig vaping

Identified Community Partners

- Boone County Cancer Society*
- Boone County Community Clinic*
- Boone County Community Schools
- Boone County Health Department*
- Boone County Healthy Coalition*
- Boone REMC
- Boone County Sheriff’s Dept and D.A.R.E.
- Drug Free Boone County
- Head Start (pre-school program)
- Indiana Tobacco Prevention and Cessation*
- Integrative Wellness, LLC*
- Lebanon Area Boys and Girls Club
- Local Media/Social Media
- Medical Providers
- Tobacco Free Boone County (TFBC)*
- Witham Family YMCA
- Witham Health Services
- Zionsville Boys and Girls Club

*Partners at CHIP development meeting
Excessive drinking can lead to increased risk of health problems such as injuries, violence, liver diseases, and cancer. According to the 2014 County Health Ranking, 19% of Boone County adults engage in excessive drinking. The CHNA prepared for Witham Health Services by Professional Research Consultants, Inc. (PRC) showed men especially those under age 40, adults under 40, and individuals in the middle/high income category were more likely to drink excessively in 2012. The rate of drinking in men under age 40 (25.0%) failed to satisfy the health people 2020 target of 24.3% or lower.

In Boone County, there are 2 alcohol outlets for every 1,000 people and this is higher than the state average\(^1\). There were over 160 arrests for DUI, 125 for alcohol violations within the county\(^1\).

Source: County Health Ranking

\(^1\)Boone County Local Coordinating Council. 2014 Boone County Comprehensive Community Plan. Governor’s Commission For A Drug Free Indiana Website [http://www.in.gov/cji/2358.htm#boone](http://www.in.gov/cji/2358.htm#boone)
SUBSTANCE ABUSE

EXCESSIVE DRINKING

GOAL

1. Reduce Substance Abuse, specifically Excessive Drinking

OBJECTIVES

1. Decrease the rate of Boone County adults engaging in Excessive Drinking from 19% to 16% or below by 2017.
2. Ensure that a campaign to educate the youth in Boone County on the effects of Substance Abuse is available in all three school systems in Boone County by 2017.

STRATEGIES

1. Increase awareness on the definition of Excessive Drinking
2. Increase access to treatment for Substance Abuse in Boone County
3. Collaborate with the school systems and public safety to continue to provide awareness events on Excessive Drinking
4. Educate the public on the “lifeline law” through providing community outreach
5. Educate adults on the consequences of contributing to the delinquency of a minor
6. Continue to support and promote local twelve step programs

IDENTIFIED COMMUNITY PARTNERS

- Aspire Indiana*
- Boone County Community Clinic
- Boone County Health Department*
- Boone County Healthy Coalition*
- Community Schools of Boone County
- Cummins Behavioral Health Systems, Inc.*
- D.A.R.E (Drug Abuse Resistance Education)*
- Drug free Boone County*
- Integrative Wellness, LLC*
- Local Media/Social Media
- Medical Providers
- The Arc of Greater Boone County*

*Partners at the CHIP development meetings
CHRONIC CONDITIONS

After heart disease, cancer is the second leading cause of death in the United States.\(^1\) Alzheimer’s disease is the 6\(^{th}\) leading cause of deaths in the United States.\(^2\) Cancer and Alzheimer’s related deaths accounted for about 30% of the deaths in 2012 in Boone County.

CANCER RELATED DEATHS

Cancer deaths can be prevented and reduced in different ways. Screening and early detection of certain cancers helps prevent the diseases from becoming cancerous when treatment is received early. Reducing risk factors such as: use of tobacco products, excessive exposure to ultraviolet rays, obesity/poor nutrition and physical inactivity can prevent cancer related deaths.\(^3\)

The CHNA prepared for Witham Health Services by Professional Research Consultants, Inc. (PRC) showed the annual age adjusted mortality rate of 188.2 deaths per 100,000 populations was similar to the statewide rate but worse than the national rate and failed to satisfy the Healthy People 2020 target of 160.6 or lower.

Each of the cancer death rates shown in the table below failed to satisfy the related Healthy People 2020 target.

### Age-Adjusted Cancer Death Rates by Site

\((2007-2009\ Annual\ Average\ Deaths\ per\ 100,000\ Population)\)

<table>
<thead>
<tr>
<th>Cancer Type</th>
<th>Boone County</th>
<th>Indiana</th>
<th>US</th>
<th>HP2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lung Cancer</td>
<td>63.4</td>
<td>60.9</td>
<td>49.5</td>
<td>45.5</td>
</tr>
<tr>
<td>Prostate Cancer</td>
<td>35.9</td>
<td>23.3</td>
<td>22.6</td>
<td>21.2</td>
</tr>
<tr>
<td>Female Breast Cancer</td>
<td>28.3</td>
<td>23.7</td>
<td>22.6</td>
<td>20.6</td>
</tr>
<tr>
<td>Colorectal Cancer</td>
<td>17.0</td>
<td>17.6</td>
<td>16.4</td>
<td>14.5</td>
</tr>
</tbody>
</table>

Source: Assessment Prepared for Witham Health Services by Professional Research Consultants, Inc.

---


CHRONIC CONDITIONS

CANCER RELATED DEATHS

GOAL

1. Decrease Cancer Related Deaths

OBJECTIVE

1. Decrease Cancer Related Deaths in Boone County from 188.2 to 160.6 per 100,000 population or lower by 2017

STRATEGIES

1. Improve prevention efforts through awareness and education events during 2015 and annually
2. Survey community members on their perspective of cancer health services in Boone County and identify existing barriers in 2015
3. Promote Cancer Support Communities in Boone County during 2015
4. Continue tobacco cessation efforts
5. Expand the screening for at risk women for breast and cervical cancer
6. Incorporate cancer education and awareness into existing fundraising events during 2015
7. Become involved with the Indiana Cancer Consortium in 2015
8. Recognize and promote men’s health

IDENTIFIED COMMUNITY PARTNERS

- Boone County Cancer Society*
- Boone County Community Clinic
- Boone County Health Department*
- Boone County Healthy Coalition*
- Indiana Cancer Consortium
- Local Media/Social Media
- Medical Providers
- Tobacco Free Boone County (TFBC)*
- Witham Health Services*

*Partners at the CHIP development meetings
Dementia is not a specific disease but is term used to describe the loss of cognitive functioning—thinking, remembering, and reasoning—to a degree that it interferes with a person’s daily life.\(^2\),\(^4\) Alzheimer’s disease is the most common form of dementia and accounts for 60 to 80 percent of dementia cases.\(^2\),\(^4\)

### Alzheimer's Disease: Age-Adjusted Mortality

(2007-2009 Annual Average Death per 100,000 Population)

<table>
<thead>
<tr>
<th></th>
<th>Boone County</th>
<th>Indiana</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death Rate</td>
<td>35.1</td>
<td>26.4</td>
<td>23.5</td>
</tr>
</tbody>
</table>

Source: Assessment Prepared for Witham Health Services by Professional Research Consultants, Inc.

**After consulting with the Executive Director, Indiana Alzheimer Association, it could be surmised that since Boone County is progressive with a robust geriatric care system including a gerontologist, and trained personnel, that the diagnosis, and eventual cause of death reporting exceeds the accuracy norm, i.e.: state and national levels.**

---


CHRONIC CONDITIONS

ALZHEIMER’S DISEASE DEATHS

GOAL

1. Decrease Alzheimer’s disease by reducing associated risk factors

OBJECTIVES

1. Create a focus group in 2015 and identify risk factors for Alzheimer’s disease
2. Conduct at least 2 community awareness events annually beginning in 2015

STRATEGIES

1. Establish incidence of dementia in Boone County
2. Provide support to effected caregivers and family members through education
3. Educate the public on symptoms for earlier detection
4. Explore known risk factors for developing Alzheimer’s Disease
5. Utilize Boone County Healthy Coalition (BCHC) as an avenue of awareness to community organizations (present Alzheimer’s education at a monthly meeting)
6. Promote Support group through Witham Health Services for families and caregivers
7. Promote Caregiver Support Initiative: Dinner & Dialog events in Zionsville
8. Create online resources for families and caregivers to access
9. Collaboration with Senior Services, Alzheimer’s Association of Indiana and Witham Health Services to conduct Community Events & Workshops
   • Topics may include:
     o “Memory Loss is Not a Normal Part of Aging”
     o What if Alzheimer’s was preventable?
     o Education of Symptoms
     o How to prepare for the doctor’s visit and diagnosis process
     o Support for families and caregivers

IDENTIFIED COMMUNITY PARTNERS

- Alzheimer's Association of Indiana*
- Boone County Community Clinic
- Boone County Health Department*
- Boone County Healthy Coalition*
- Boone County Senior Services, Inc*
- Local Media/Social Media
- Medical Providers
- Witham Health Services

*Partners at the CHIP development meetings
NEXT STEPS

Each priority area will have ongoing review and evaluation conducted by community partners involved with implementation.

Additionally, the Boone County Healthy Coalition Advisory Committee will meet annually to evaluate the plan by tracking progress made towards achieving the goals and objectives listed in the plan. During the evaluation process, all ineffective strategies will be revised and the CHIP will be updated.

If you’re interested in more information on how to get involved with the CHIP, or the Boone County Healthy Coalition, please contact:

Boone County Health Department
116 W. Washington St.
Lebanon, IN 46052
Phone: 765-482-3942

bchc06@gmail.com

http://www.boonecounty.in.gov/health