

# Improving Health Research in Rural Areas: The Case of Kentucky

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see blue.  
*in everything we do.*

# The Case of Kentucky

4 M people, 120 Counties; Largest Jefferson 762,000  
Smallest Robertson 2155; Median Marion 19,820



# Kentucky Area Development Districts

## KY BRFS Data



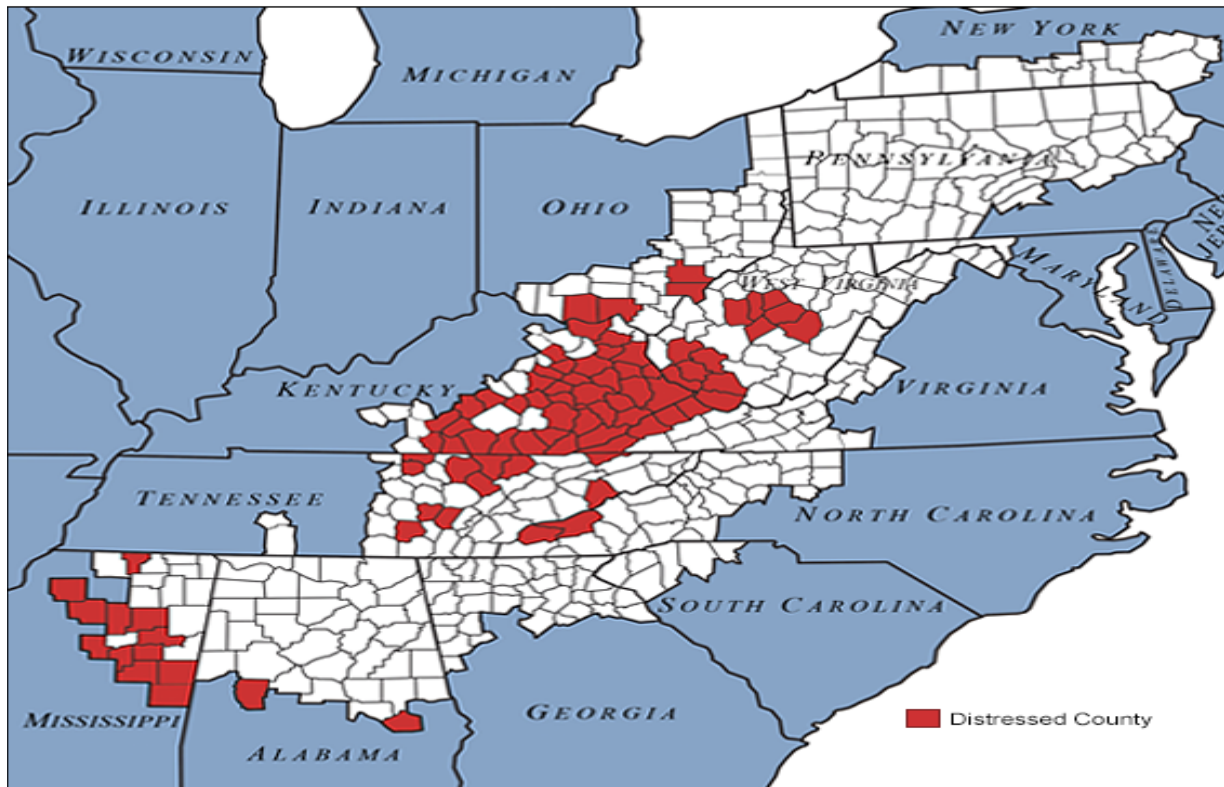
Kentucky Area Development District (ADD)  
Profiles Kentucky Behavioral Risk Factor  
Survey (KyBRFS)





# Appalachia Kentucky

ARC-Designated Distressed Counties, Fiscal Year 2018



Created by the Appalachian Regional Commission

**Data Sources:**

Unemployment data: U.S. Department of Labor, Bureau of Labor Statistics, LAUS, 2013–2015

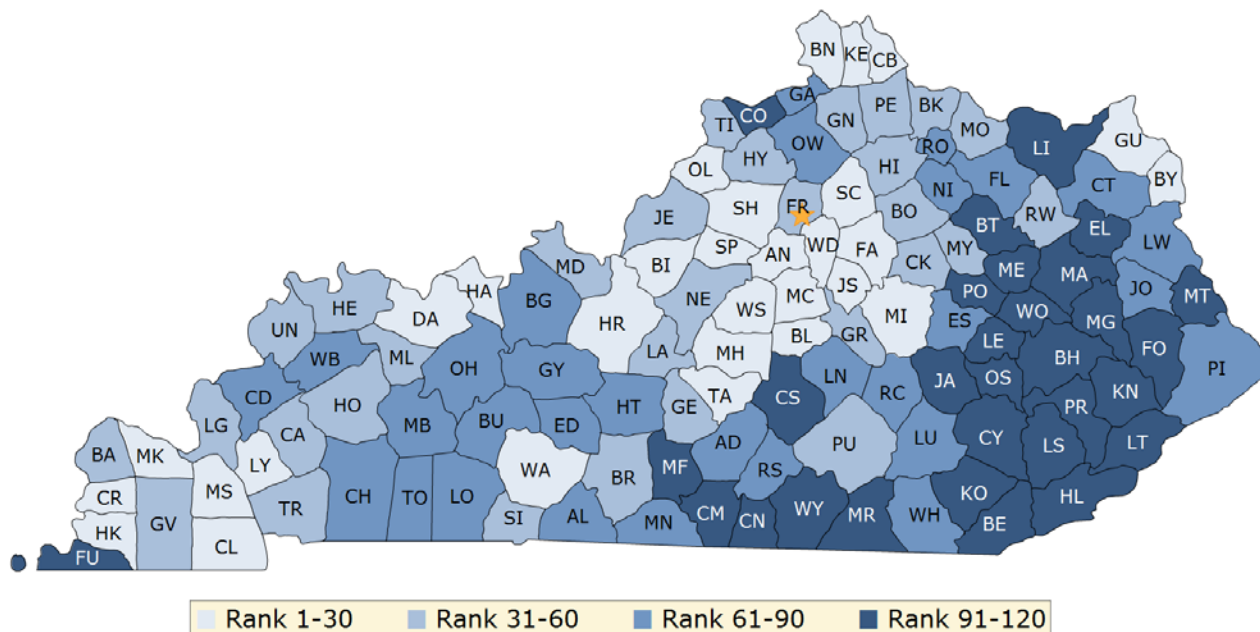
Income data: U.S. Department of Commerce, Bureau of Economic Analysis, REIS, 2015

Poverty data: U.S. Department of Commerce, Bureau of the Census, American Community Survey, 2011–2015



# County Health Rankings

2015 Health Factors - Kentucky



County Health  
Rankings & Roadmaps  
Building a Culture of Health, County by County  
A Robert Wood Johnson Foundation program



# Community engaged research

## Community Engaged Research

- is a collaborative process between the researcher and community partner designed to benefit the community and advance knowledge
- it identifies the assets of stakeholders and incorporates them in the design and conduct of the research process; asset mapping
- includes community based participatory research and participatory action research.





# Community Asset Mapping

- asset mapping is a tool that relies on a core belief of asset based community development; assets suited to advancing those communities
- assets include physical and economic assets, stories, local residents, local associations, local institutions.



# Community Engaged Research

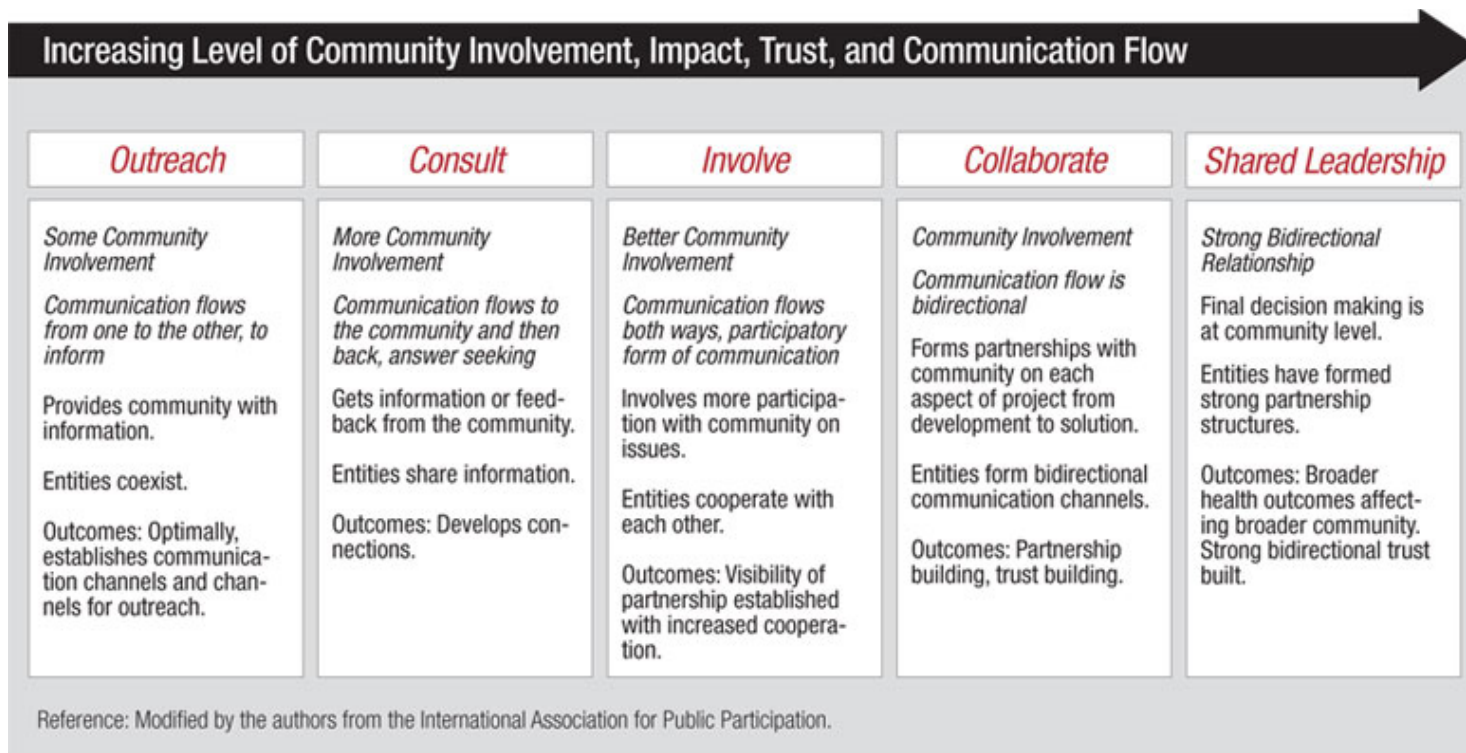


Figure 1.1. Community Engagement Continuum





# Location of Existing UK Outreach and Community Activities





# UK Research Outreach: Patient and Population Illustrations

- UK Center of Excellence in Rural Health (Hazard)
- CTSA/CCTS Research Liaison (ATRN-ETSU, Marshall, WVU, OSU, Ohio University, UC) ([Hazard and Morehead-Research Study Coordinator](#))
- UK/Kentucky Regional Medical School Program (Morehead, Bowling Green, Covington, Hazard)
- Markey Cancer Center Outreach
- UK Cooperative Extension (Project HEEL)
- Area Health Education Centers (Morehead, Hazard, Covington, Mt Vernon)
- Research Networks (KAN, KPHREN, Dentistry, Rehabilitation)





# Illustrations of opportunities and Mature Coalitions





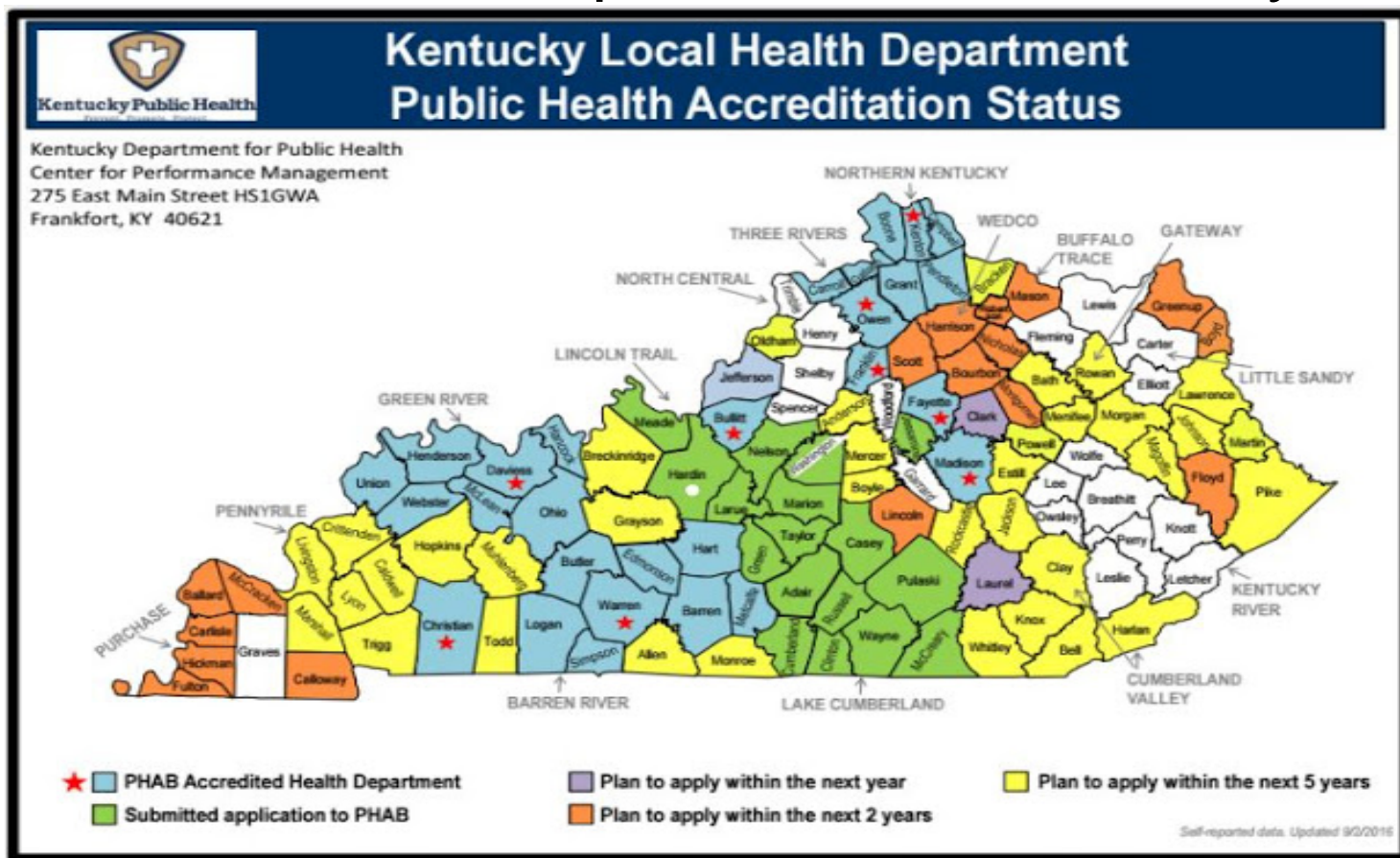
# PHAB Accreditation Standards

**Standard 1.1 Participate in or Lead a Collaborative Process Resulting in a Comprehensive Community Health Assessment**

**Standard 5.2 Conduct a Comprehensive Planning Process Resulting in a Tribal/State/Community Health Improvement Plan**



# PHAB Accreditation of Local Health Departments in Kentucky



# Non-profit Hospitals and CHNA

- **Recent changes in legislation (ACA) now require that non-profit hospitals explicitly and publicly demonstrate community benefit by conducting a community health needs assessment (CHNA) and adopting an implementation strategy to meet the identified community health needs.**
- **ACA added new requirements that 501(c)(3) hospitals must conduct a CHNA at least once every three years in order to assess community need and annually file information regarding progress toward addressing identified needs.**
- **This can involve partnerships with other clinical, public health, and population health focused organizations**





## MODELS OF COLLABORATION INVOLVING HOSPITALS, PUBLIC HEALTH DEPARTMENTS, AND OTHERS Improving Community Health through Successful Partnerships

- To identify, compare, and contrast exceptional models of collaboration involving community hospitals, public health departments, and other stakeholders who share commitment to improving community health and determine the key lessons learned from their experience.
- Identify models of collaboration in improving community health that are operational and considered to be highly successful;
- Produce insights that will assist policy makers and leaders of public and private organizations in building strong, successful partnerships designed to improve community health.
- <http://www.uky.edu/publichealth/studyOverview.php>





# Illustrative Coalition Effort: Markey Cancer Center and Cancer Coalitions



# Kentucky Regional Comprehensive Cancer Control

- The Kentucky Cancer *Consortium* (KCC) focuses on multi-regional and state-level efforts in cancer control. KCC is funded through CDC.
- The [Kentucky Cancer Program \(KCP\)](#) is a state-funded, university-affiliated, and community-based regional cancer control program, focused at the regional and local level.
- KCP operates through a network of 13 regional offices staffed by cancer control specialists who lead cancer prevention and control initiatives for all of Kentucky's 120 counties.
- KCP works closely with 15 District Cancer Councils across the state to analyze local cancer data, identify and prioritize the community's cancer needs, and develop interventions/solutions.
- KCP is jointly administered by the University of Kentucky [Lucille Parker Markey Cancer Center](#) and the University of Louisville [James Graham Brown Cancer Center](#).





# Kentucky Cancer Consortium

- The mission of the Kentucky Cancer Consortium shall be to achieve reductions in the incidence, morbidity and mortality of cancer in Kentucky through a comprehensive, integrated and coordinated approach to cancer control. This approach covers the cancer continuum from prevention, early detection, treatment and care.
- The Consortium is Kentucky's state comprehensive cancer control coalition - a statewide partnership of 70+ diverse organizations united to reduce the burden of cancer in Kentucky.
- The Consortium provides a common forum for like-minded organizations to take collective action. Through group consensus at Consortium meetings, statewide cancer control events, and evaluation, the Consortium determines common priorities, prevents overlap, maximizes resources, and evaluates impact.

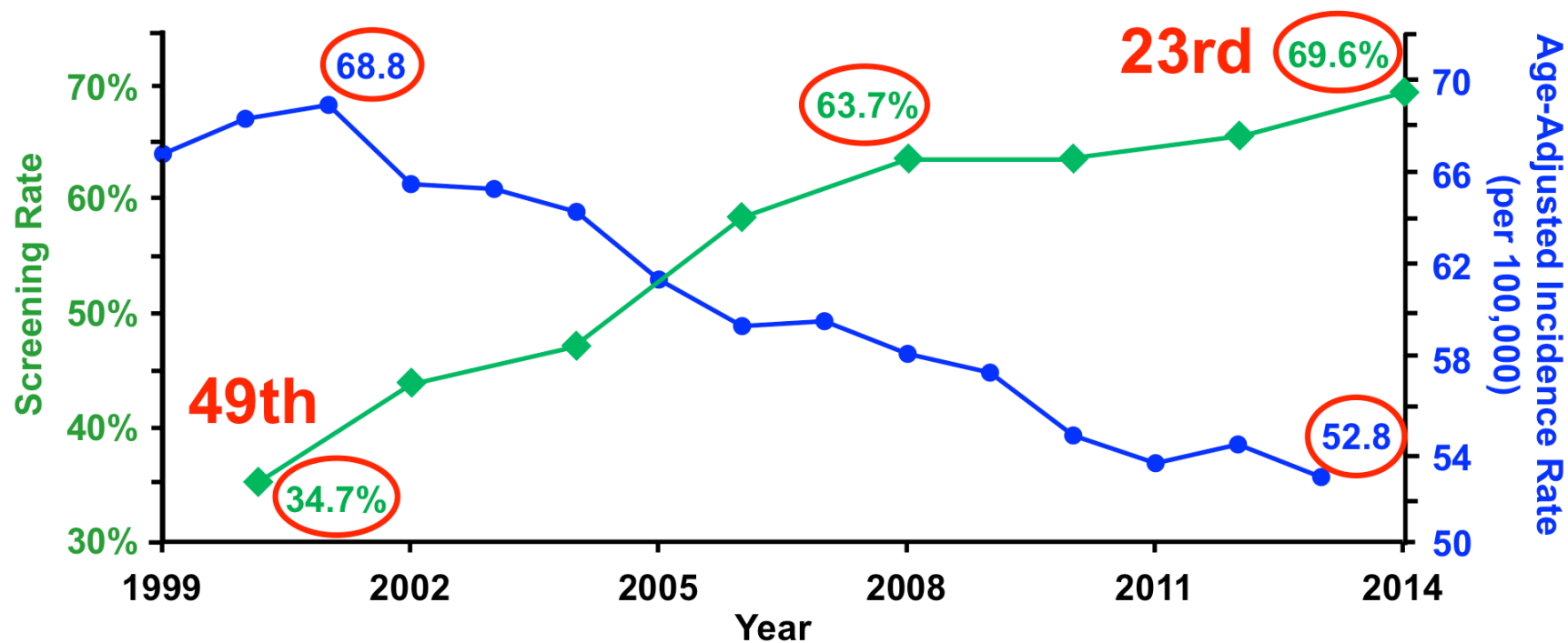




# Markey Cancer Center Clinical Liaison



## Measures of Success: Colorectal Cancer Screening and Incidence





# Keys to Success

- Rural focused dissemination and implementation science
  - Extensive formative research, training, resources, funding, technical assistance
- Sustainability
- Coordination of activities and players / silos of funding and initiatives within CRC
  - Benefit of KCC to *bring together and lead* all of these partners
- Innovative use of “other settings”, community-based networks and staff, and health communication *in combination* with personal-touch
- Capitalize on community-clinical linkages
- Patient-centered communication / patient navigation





That's all folks!  
Questions?  
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