#### **DELIVERED BY:**





## 2025-2030 PERRY COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN

**PUBLISHED AUGUST 2025** 



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## A NOTE FROM THE PERRY COUNTY HEALTH DEPARTMENT



The Perry County Health Department (PCHD) strives to bring together people and organizations to improve community wellness. The community health needs assessment process is one way we can collect citizens' health concerns and health data to establish goals addressing community wellness and the PCHD mission. In order to fulfill this mission, we must be intentional about understanding the health issues that impact residents and work together to create a healthy community.

A primary component of creating a healthy community is assessing its needs and prioritizing those needs for impact. In 2024, PCHD partnered to conduct a comprehensive Community Health Assessment (CHA) to identify primary health issues, current health status, and other health needs. These findings were then used to develop a Community Health Improvement Plan (CHIP) to describe the response to the needs identified in the CHA report.

The 2025-2030 PCHD CHIP would not have been possible without the help of numerous community organizations, acknowledged on the following pages. It is vital that assessments such as this continue, so partners know where to direct resources and how to use them in the most advantageous ways.

The goals of public health can only be accomplished through community members' commitment to themselves and to each other. PCHD believes that together, Perry County can be a thriving community of health and well-being where we live, work and play.

Importantly, this report could not exist without the contributions of individuals in the community who participated in interviews and completed the community member survey. PCHD is grateful for those individuals who are committed to the health of the community, and took the time to share their health concerns, needs, behaviors, praises, and suggestions for future improvement.

Sincerely,

#### **Angela DeRolph**

Health Commissioner
The Perry County Health Department

#### **ACKNOWLEDGEMENTS**

This Community Health Improvement Plan (CHIP) was made possible thanks to the collaborative efforts of The Perry County Health Department (PCHD), community partners, local stakeholders, non-profit partners, and community residents. Their contributions, expertise, time, and resources played a critical part in the completion of this assessment.

#### PCHD WOULD LIKE TO RECOGNIZE THE FOLLOWING ORGANIZATIONS FOR THEIR CONTRIBUTIONS TO THIS REPORT:

Allwell Behavioral Health Services

Amy Frame, Director of Job and Family Services

Annette Moore, Director of Perry County Veterans

Service Commission

Area Agency on Aging Region 9

Big Brothers/Big Sisters

Chief Doug Gill, New Lexington Police Chief

Courtney Bolyard, Southern Local Schools

Crooksville Fire Department

Dr. Frank, Lead Physician and Medical Director of

Genesis Primary Care Center

Ed Keister, Mayor of Junction City

Eric Emmert, Village of New Lexington Administrator,

Somerset-Reading Township Volunteer Fire

Department Chief, Somerset Village Mayor

Fairfield Medical Center

Family and Children First Council

Fred Redfern, Representing Crooksville/Roseville

Full Circle Recovery Services

Genesis HealthCare System

**Hocking College** 

Jamie Humphrey, Vice President of Saltlick and Coal

Alliance

Jason Adams, Genesis Perry County Medical Center

Judge Luann Cooperider, Perry County Juvenile

Court/Probate Court

Life Support Therapy Services

Melissa Marolt, Director of Perry County District Library

Mental Health and Recovery Services Board

Mobility Management

Muskingum Valley Health Center

**New Lexington Police Department** 

New Lexington School District

Ohio Air Quality Development Authority

Ohio Center for Autism and Low Incidence

(OCALI)

**Ohio Medical Aid Services** 

Ohio State University Extension Office

Ohio University

Perry Behavioral Health Choices

Perry County Access to Care Committee

Perry County Board of Health

Perry County Chamber of Commerce

Perry County Court

Perry County EMA

Perry County Food Pantry

Perry County Health Department

Perry County Longterm Care Facilities

Perry County Transit

Perry County Veterans Service Commission

Scott Owen, Perry County Commissioner

Sheriff William Barker, Perry County Sheriff

**Shrivers Pharmacy** 

South East Area Transit (SEAT)

Southeastern Ohio Regional Medical Center

Theressa Kane, Executive Director of Perry

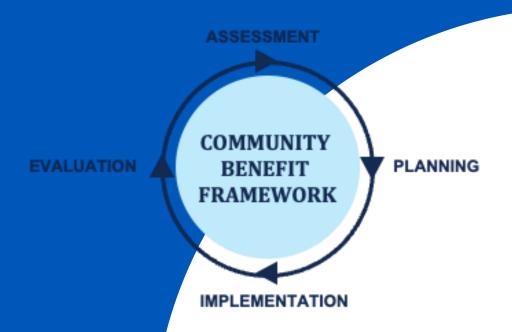
Behavioral Health Choices, INC

**YMCA** 

The 2025-2030 CHIP report was prepared by Moxley Public Health, LLC, (<a href="www.moxleypublichealth.com">www.moxleypublichealth.com</a>) an independent consulting firm that works with hospitals, health departments, and other community-based nonprofit organizations both domestically and internationally to conduct Community Health (Needs) Assessments (CHNA/CHAs) and Implementation Strategies/Community Health Improvement Plans (CHIPs).

#### **INTRODUCTION**

## WHAT IS A COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)?



A Community Health Improvement Plan (CHIP) is part of a framework that is used to guide community benefit activities, policy, advocacy, and program-planning efforts. For health departments, the Improvement Plan (CHIP) fulfills the mandates of the Public Health Accreditation Board (PHAB).

#### **OVERVIEW**

#### **OF THE PROCESS**



In order to develop a Community Health Improvement Plan (CHIP), Perry County Health Department followed a process that included the following steps:

STEP 1: Plan and prepare for the CHIP.

STEP 2: Develop goals/objectives and identify indicators to address health needs.

STEP 3: Consider approaches/strategies to address prioritized needs, health disparities, and social determinants of health.

STEP 4: Select approaches with community partners.

STEP 5: Integrate CHIP with community partners and health department.

STEP 6: Develop a written CHIP.

STEP 7: Adopt the CHIP.

STEP 8: Update and sustain the CHIP.

Within each step of this process, the guidelines and requirements of both the state and federal governments are followed precisely and systematically.

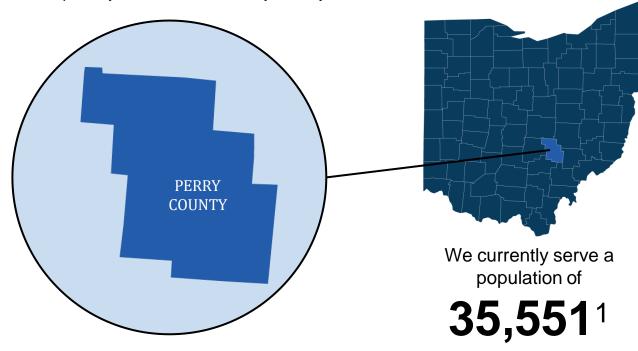
#### THE 2025-2030 PERRY COUNTY CHIP MEETS ALL PHAB REGULATIONS.



#### **DEFINING THE**

#### PERRY COUNTY SERVICE AREA

For the purposes of this report, Perry County Health Department defines their primary service area as Perry County, Ohio.

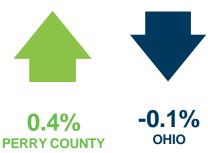


PERRY COUNTY SERVICE AREA			
GEOGRAPHIC LOCATION	ZIP CODE	GEOGRAPHIC LOCATION	ZIP CODE
Bearfield Township	43731	New Lexington	43764
Clayton Township	43764	New Straitsville	43766
Coal Township	43766	Pike Township	43764
Corning	43730	Pleasant Township	43764
Crooksville	43731	Reading Township	43783
Glenford	43739	Rendville	43730
Harrison Township	43731	Roseville	43777
Hemlock	43730	Rushville	43150
Hopewell Township	43739	Saltlick Township	43782
Jackson Township	43748	Shawnee	43782
Junction City	43748	Somerset	43783
Madison Township	43760	Thorn Township	43076
Monday Creek Township	43766	Thornville	43076
Monroe Township	43730		

#### PERRY COUNTY SERVICE AREA

#### **AT-A-GLANCE**

The Perry County population is **35,551**. The populations of both the county and Ohio remained relatively the same in the past 3 years<sup>1</sup>

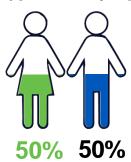




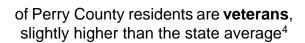
Perry County is ranked 58th of 88 ranked counties in Ohio, according to social, economic, and health factors (with 1 being the best), placing it in the **bottom** 

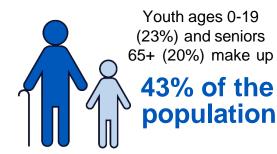
third of the state's counties<sup>2</sup>

The % of males and females is approximately equal3







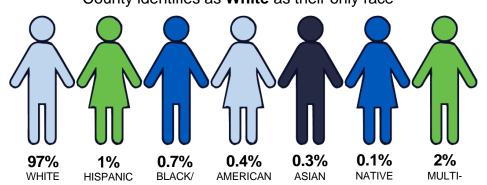


In Perry County, nearly 1 in 5 residents are age 65+3

**97%** of the population in Perry

County speaks only English. 0.6% are foreign-born<sup>4,5</sup>

The majority (94%) of the population in Perry County identifies as White as their only race3



**RESIDENTS OR LATINO** RESIDENTS AMERICAN

**AFRICAN** RESIDENTS

INDIAN/ ALASKA NATIVE **RESIDENTS** 

RESIDENTS HAWAIIAN/

PACIFIC ISLANDER RESIDENTS

RACIAL/ **OTHER RESIDENTS** 





#### shorter than it is for the state of ${\color{red}Ohio^6}\\ {\tiny 2025-2030\ PERRY\ COUNTY\ COMMUNITY\ HEALTH\ IMPROVEMENT\ PLAN}$

#### 1 in 189

Perry County residents will die prematurely, which is lower than the Ohio state rate of 1 in 1956

8

## PRIORITY HEALTH NEEDS FOR PERRY COUNTY







#### **ACCESS TO CARE**

Perry County is considered both a primary care provider and dental health professional shortage area.<sup>7</sup>

**50%** of community survey respondents say that **specialist healthcare access is lacking** in the community, while **14%** ranked it as a priority.





#### **CHRONIC DISEASE**

**60%** of community survey respondents chose **chronic diseases** as a top community health need.

Heart disease is the **leading** cause of death in Perry County.8



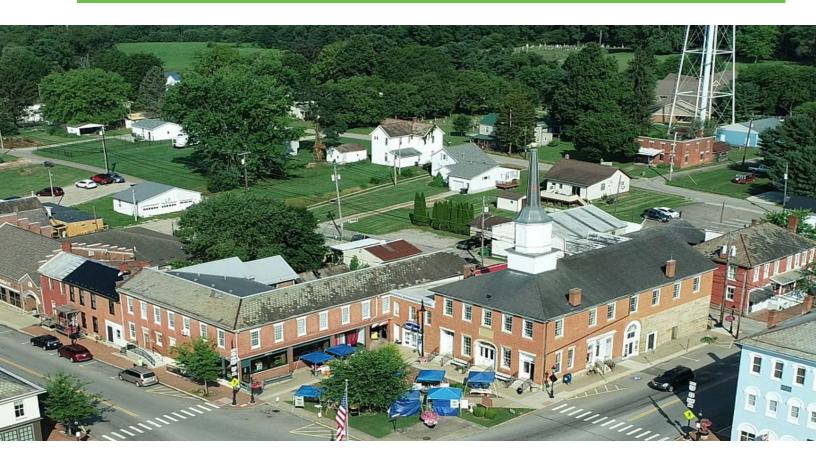




#### **MATERNAL AND CHILD HEALTH**

28% of survey respondents say that maternal, infant, and child healthcare resources are lacking in the community.

10% of community survey respondents say that addressing maternal and child health in the community is a top concern.



# STEP 1 PLAN AND PREPARE FOR THE COMMUNITY IMPROVEMENT PLAN (CHIP)



## IN THIS STEP, THE PERRY COUNTY HEALTH DEPARTMENT:

- DETERMINED WHO WOULD PARTICIPATE IN THE DEVELOPMENT OF THE COMMUNITY HEALTH IMPROVEMENT PLAN
- ENGAGED BOARD AND EXECUTIVE LEADERSHIP
- REVIEWED THE COMMUNITY HEALTH ASSESSMENT





### Perry County Health Department

Working to keep you healthy where you live, work, and play.



740-342-5179 perrycountyhealth.info



#### PLAN AND PREPARE FOR THE 2025-2030 PERRY COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN

Secondary and primary data were collected to complete the 2024 Perry County Community Health Assessment (Available at <a href="https://perrycountyhealth.info/community-health-assessment/">https://perrycountyhealth.info/community-health-assessment/</a>). Secondary data were collected from a variety of local, county, and state sources to present community demographics, social determinants of health, healthcare access, birth characteristics, leading causes of death, chronic disease, health behaviors, mental health, substance use, and preventive practices. The analysis of secondary data yielded a preliminary list of significant health needs, which then informed primary data collection.

Primary data were collected through key informant interviews with 11 experts from various organizations serving Perry County and included leaders and representatives of medically underserved, low-income, and minority populations, or local health or other departments or agencies. A community member survey was distributed via a QR code and link with 191 responses. The survey responses (from community members) were used to prioritize the health needs, answer in-depth questions about the health needs in the county, and to identify health disparities present in the community. Finally, there were 3 focus groups held across Perry County, representing a total of 40 community members from priority populations. The primary data collection process was designed to validate secondary data findings, identify additional community issues, solicit information on disparities among subpopulations, ascertain community assets potentially available to address needs, and prioritize health needs. More detail on methodology can be found in the 2024 Perry County Community Health Assessment.



A CHIP is a long-term, systematic effort to address public health problems based on the results of community health assessment activities and the community health improvement process.

- Centers for Disease Control and Prevention (CDC)



## STEP 2 DEVELOP GOALS AND OBJECTIVES AND IDENTIFY INDICATORS FOR ADDRESSING COMMUNITY HEALTH NEEDS



## IN THIS STEP, THE PERRY COUNTY HEALTH DEPARTMENT:

- DEVELOPED GOALS FOR THE COMMUNITY HEALTH IMPROVEMENT PLAN BASED ON THE FINDINGS FROM THE CHA
- SELECTED INDICATORS TO ACHIEVE GOALS



#### **OVERVIEW**

#### OF THE PROCESS (CONTINUED)



#### Ohio Department of Health (ODH) Requirements

The following image shows the framework from ODH that this report followed while also adhering to federal requirements and the community's needs.

The Perry County Health Department (PCHD) desired to align with the priorities and indicators of the Ohio Department of Health (ODH). To do this, they used the following guidelines when prioritizing the health needs of their community.

First, PCHD used the same language as the state of Ohio when assessing the factors and health outcomes of their community in the 2024 Perry County Community Health Assessment (CHA).

#### Figure 1: Ohio State Health Improvement Plan (SHIP) Framework

**Equity** 

Health equity is achieved when all people in a community have access to affordable, inclusive, and quality infrastructure and services that, despite historical and contemporary injustices, allow them to reach their full health potential.

**Priorities** 

The SHIP identifies three priority factors (community conditions/social determinants or drivers of health) and three priority health outcomes that affect the overall health and well-being of children, families, and adults of all ages.

#### What shapes our health and well-being?

Many factors, including these three SHIP priority factors\*:

#### **Community Conditions**

- · Housing affordability and quality
- Poverty
- K-12 student success
- Adverse childhood experiences

#### **Health Behaviors**

- Tobacco/nicotine use
- Nutrition
- Physical activity

#### **Access to Care**

- · Health insurance coverage
- Local access to healthcare providers
- · Unmet need for mental healthcare

#### How will we know if health is improving in Ohio?

The SHIP is designed to track and improve these **three SHIP** 

#### priority health outcomes:

#### **Mental Health & Addiction**

- Depression
- Suicide
- Youth drug use
- · Drug overdose deaths

#### **Chronic Disease**

- Heart disease
- Diabetes
- Childhood conditions (asthma, lead exposure)

#### Maternal, Infant & Child Health

- Preterm births
- Infant mortality
- Maternal morbidity

### All Ohioans achieve their full health potential

- Improved health status
- Reduced premature death

Vision: Ohio is a model of health, wellbeing, and economic vitality

#### **Strategies**

The SHIP provides state and local partners with a menu of effective policies and programs to improve Ohio's performance on these priorities.

<sup>\*</sup> These factors are sometimes referred to as the social determinants of health or the social drivers of health.

Next, with the data findings from the community health needs assessment process, the Perry County Health Department used the following guidelines/worksheet to choose priority health factors and priority health outcomes (worksheet/guidelines continued to next page).

#### ALIGNMENT WITH PRIORITIES AND INDICATORS

STEP 1: Identify at least one priority factor and at least one priority health outcome.

PRIORITY FACTORS	PRIORITY HEALTH OUTCOMES	
	✓Mental Health and Addiction	
	✓ Maternal and Infant Health	

**STEP 2:** Select at least 1 indicator for each identified priority factor.

PRIORITY FACTORS				
	CONDITIONS			
TOPIC	INDICATOR NAME			
Housing Affordability and Quality	☐ Affordable and Available Housing Units			
Dovorty	☐ Child Poverty			
Poverty	☐ Adult Poverty			
K-12 Student Success	☐ Chronic Absenteeism (K-12 students)			
K-12 Student Success	☐ Kindergarten Readiness			
	✓Adverse Childhood Experiences			
Adverse Childhood Experiences	(ACEs)			
·	☐ Child Abuse and Neglect			
Food Insecurity				
Environmental Conditions	☐ Air Quality			
	☐ Water Quality			
HEALTH B	HEALTH BEHAVIORS			
TOPIC	INDICATOR NAME			
Tobacco/Nicotine Use				
Tobacco/Nicotifie Ose				
Nutrition				
Nutrition	✓ Vegetable Consumption			
Physical Activity				
•				
	TO CARE			
TOPIC	INDICATOR NAME			
Health Insurance Coverage	☐ Uninsured Adults			
Health insurance Coverage	☐ Uninsured Children			
Local Access to Healthcare Services	Shortage Areas			
Local Access to Healthcare Services	✓Mental Health Professional Shortage			
	Areas			
	☐ Youth Depression Treatment Unmet			
Unmet Need for Mental Healthcare	Need			
	☐ Adult Mental Healthcare Unmet Need			

#### ALIGNMENT WITH PRIORITIES AND INDICATORS (CONTINUED)

STEP 2 (continued): Select at least one indicator for each identified priority health outcome.

PRIORITY HEALTH OUTCOMES			
MENTAL HEALTH AND ADDICTION			
TOPIC	INDICATOR NAME		
Donrossion	☐ Youth Depression		
Depression	☐ Adult Depression		
Suicida Dootha	☐ Youth Suicide Deaths		
Suicide Deaths	☐ Adult Suicide Deaths		
Vouth Drug Llos	☐ Youth Alcohol Use		
Youth Drug Use	☐ Youth Marijuana Use		
Drug Overdose Deaths	✓ Unintentional Drug Overdose Deaths		
CHRONIC DISEASE			
TOPIC	INDICATOR NAME		
Heart Disease			
Diabetes	<b>☑</b> Diabetes		
Harmful Childhaad Canditions	☐ Child Asthma Morbidity		
Harmful Childhood Conditions	☐ Child Lead Poisoning		
MATERNAL AND INFANT HEALTH			
TOPIC	INDICATOR NAME		
Preterm Births			
Infant Mortality	✓Infant Mortality		
Maternal Morbidity/Mortality	✓ Severe Maternal Morbidity/Mortality		

## ADDRESSING THE **HEALTH NEEDS**



The 2024 Community Health Assessment identified the following significant health needs from an extensive review of the primary (community survey, interviews, and focus groups) and secondary data (existing data). The significant health needs were ranked as follows through the community member survey (191) responses from community members).

COMMUNITY CONDITIONS RANKING FROM COMMUNITY MEMBER SURVEY	1
#1 Income/poverty and employment	42%
#2 Access to childcare	27%
#3 Food insecurity	24%
#4 Adverse childhood experiences	24%
#5 Housing and homelessness	22%
#6 Internet/Wi-Fi access	22%
#7 Access to mental healthcare	21%
#8 Access to primary healthcare	16%
#9 Crime and violence	16%
#10 Access to specialist healthcare	14%
#11 Overweight and obesity	13%
#12 Physical health/exercise	12%
#13 Health insurance coverage	9%
#14 Education	8%
#15 Access to social engagement and volunteer opportunities	7%
#16 Transportation	7%
#17 Nutrition	7%
#18 Environmental conditions	6%
#19 Access to dental/oral healthcare	4%
#20 Preventive care and practices	4%
#21 Health literacy	4%
#22 Access to public/safe water and other utilities	2%
#23 Access to vision healthcare	2%

HEALTH OUTCOMES RANKING FROM COMMUNITY MEMBER SURVEY		
#1 Substance use disorder	85%	
#2 Mental health	77%	
#3 Chronic diseases	60%	
#4 Tobacco and nicotine use/smoking/vaping	43%	
#5 Suicide	15%	
#6 Maternal, infant, and child health	10%	
#7 Injuries	7%	
#8 HIV/AIDS and Sexually Transmitted Infections (STIs)	1%	

## ADDRESSING THE **HEALTH NEEDS**



From the significant health needs, the Perry County Health Department chose health needs that considered the health department and community partners' capacity to address community needs, the strength of community partnerships, and those needs that correspond with the health department and community partners' priorities.

#### THE THREE PRIORITY HEALTH NEEDS THAT WILL BE ADDRESSED IN THE 2025-2030 COMMUNITY HEALTH IMPROVEMENT PLAN ARE:

**Priority Area 1: Access to Care Priority Area 2: Chronic Disease** 

**Priority Area 3: Maternal and Child Health** 



#### **STEPS 3 & 4**

CONSIDER AND SELECT
APPROACHES/STRATEGIES TO
ADDRESS PRIORITIZED NEEDS,
HEALTH DISPARITIES, AND SOCIAL
DETERMINANTS OF HEALTH WITH
COMMUNITY PARTNERS



## IN THESE STEPS, THE PERRY COUNTY HEALTH DEPARTMENT:

- SELECTED APPROACHES/ STRATEGIES TO ADDRESS PERRY COUNTY PRIORITIZED HEALTH NEEDS, HEALTH DISPARITIES, AND SOCIAL DETERMINANTS OF HEALTH
- DEVELOPED A WRITTEN COMMUNITY HEALTH IMPROVEMENT PLAN REPORT



## #1

### PRIORITY AREA ACCESS TO CARE



Includes transportation, mobile healthcare services, and overdose prevention

#### **STRATEGIES**

Increase the proportion of females who get screened for breast cancer by one in 2025. Increase the rate of use of bystanders deploying automated external defibrillators (AEDs) for nontraumatic cardiac arrests occurring in public locations by deploying 45 AEDS in 2025.

Increase the number of heart-safe businesses in Perry County by one in 2025.

Increase the number of heart-safe parks by one in 2025. Increase
cardiopulmonary
resuscitation (CPR)
training and
education by
providing 300
people with CPR
training in 2025.

#### **PARTNERS**

Perry County Health
Department (PCHD),
The Ohio State
University
Comprehensive
Cancer Center
(OSUCCC) - The
James, Perry County
Access to Care
Committee

Perry County Access to Care Committee, Community Heart Watch Perry County Access to Care Committee, Community Heart Watch Perry County Access to Care Committee, Community Heart Watch Perry County Access to Care Committee, Community Heart Watch

#### **PRIORITY POPULATIONS**

Females ages 50-74

All populations

All populations

All populations

All populations

DESIRED OUTCOMES OF STRATEGIES Increase access and utilization of nonemergency healthcare services and existing healthcare resources

Health education

Delayed care

Health screenings

OVERALL IMPACT OF STRATEGIES

Quality of life

Access to healthcare

ER visits and hospitalizations

Unmet care needs

Premature mortality and morbidity

#### PRIORITY AREA **ACCESS TO CARE (continued)**



Includes transportation, mobile healthcare services, and overdose prevention

#### **STRATEGIES**

Implement countywide measures to reduce drug overdose deaths by increasing the number of naloxone kits distributed by one in 2025.

Provide education and establish relationships with the Amish population in Perry County by holding one health and safety day event in 2025.

Develop a plan to quantify the need for dialysis services in Perry County by May 2026.

Increase the number of mobile healthcare services provided throughout Perry County.

Research the feasibility of implementing the Community Paramedic Concept with local Fire Departments.

**Perry County** Health Department

(PCHD), Project DAWN, Integrated Harm, Perry County Access to Care Committee

PCHD, Genesis Healthcare System, Perry County Access to Care Committee

PCHD, Genesis Healthcare System, Perry County Access to Care Committee

**PARTNERS** 

PCHD, Perry County Access to Care Committee

PCHD, local fire departments. **Emergency** Management Agency (EMA), Genesis Healthcare System, Perry County Access to Care Committee

#### PRIORITY POPULATIONS

People who use substances or those who have substance use disorder

Amish communities

People who receive dialysis services

All populations; people with barriers to care

All populations

**DESIRED OUTCOMES OF STRATEGIES** 

Increase access and utilization of nonemergency healthcare services and existing healthcare resources

Health education

Delayed care

Drug overdoses

**OVERALL IMPACT OF STRATEGIES** 

Quality of life

Access to healthcare

ER visits and hospitalizations

Unmet care needs

Premature mortality and morbidity

## #2 PRIORITY AREA CHRONIC DISEASE

Includes food insecurity, obesity, physical activity, and public transportation



#### **STRATEGIES**

Develop and complete surveys with community residents with a goal of determining needs, desires, and hesitations regarding public transit by May 2025. Engage community residents to pilot proposed transit interventions to garner feedback and determine any needed adjustments by June 30, 2025.

Begin implementation and complete chosen transit interventions with a goal of increasing ridership and ease of use based on outcomes of the assessment and community engagement efforts by July 1, 2025.

Plan and implement three Rest and Ride parks that are considered everyday destinations through the modification of existing parks or the building of new parks by September 1, 2025.

#### **PARTNERS**

Perry County Health
Department (PCHD),
Health Education/Creating
Healthy Communities

Perry County Health
Department (PCHD), Health
Education/Creating Healthy
Communities, Perry County
Transit, Perry County
Mobility Management

Perry County Health
Department (PCHD),
Health Education/Creating
Healthy Communities
Perry County Transit, City
of New Lexington

Perry County Health
Department (PCHD),
Health Education/Creating
Healthy Communities,
Perry County Transit,
Village of New Lexington

#### **PRIORITY POPULATIONS**

All populations, New Lexington residents

All populations

All populations, New Lexington residents

All populations, New Lexington residents

DESIRED OUTCOMES
OF STRATEGIES

Community engagement

Transportation barriers

Reliable transportation

Access to community resources

OVERALL IMPACT OF STRATEGIES

1

Access to healthcare

1

Mental and physical health

Quality of life

Chronic disease

Unmet care needs

## PRIORITY AREA CHRONIC DISEASE (continued)

Includes food insecurity, obesity, physical activity, and public transportation

Build ADAcompliant raised garden beds at Sugartree Apartments by April 1, 2025. Organize first meeting of partners and community members to hire a community garden manager and to develop the "rules and regulations" by March 1, 2025.

#### **STRATEGIES**

Begin implementation of community garden including planting readiness, curriculum education, development and maintenance of the site and orientation of the garden manager by April 30, 2025.

Promote the outcome of the community garden through social media, flyer and community meetings by August 1, 2025.

Teach community residents to search out and apply for additional funding to ensure sustainability of the garden area by August 30, 2025.

#### **PARTNERS**

Ohio Health Improvement Zone Saltlick and Coal Alliance, Perry County Health Department, Creating Healthy Communities, Sugartree Apartment management

#### PRIORITY POPULATIONS

Southern Perry County, Sugartree Apartment residents **DESIRED** Education and Community Food Access to **OUTCOMES OF** engagement insecurity awareness of resources nutritious food **STRATEGIES OVERALL** Premature Overweight and Chronic Quality Access to **IMPACT OF** Nutrition mortality and disease obesity resources **STRATEGIES** morbidity

## #3

### PRIORITY AREA MATERNAL AND CHILD HEALTH

Includes child passenger safety, vaccinations, and safe sleep



#### **STRATEGIES**

Increase the percentage of correct car seat usage and installation through car seat check events and education by December 31, 2025.

Work with the Amish population to provide handson car seat educational sessions and installation demonstrations by December 31, 2025. Continue ongoing partnership with OBB Car Seat Program in 2025 to provide infant seats, car seats and booster seats to eligible families. Continue ongoing partnership with New Lexington Police Department in 2025 to provide Car Seat Basics training to law enforcement.

Continue ongoing partnership with Cribs for Kids in 2025 to provide Safe Sleep Environments for infants whose family qualifies for WIC.

Continue
working with
the Get
Vaccinated
Program in
2025 to
increase
vaccination for
children under
the age of 18.

#### **PARTNERS**

Health Education
Child Injury,
Prevention
Program, Child
Injury Prevention
Coalition, New
Lexington Police
Department, Ohio
Buckles
Buckeyes (OBB),
Ohio Department
of Health (ODH)

Perry County
Health
Department
(PCHD) Health
Education,
Perry County
Mobility, OBB,
ODH

PCHD Health Education, Perry County Jobs and Family Services, OBB, ODH PCHD Health
Education, New
Lexington Police
Department, Perry
County Police
Chiefs Association,
Perry County Safe
Communities,
Perry
Neighborhood
Connection, Ohio
Department of
Health

PCHD Health Education, Perry County Help Me Grow, Perry County Women, Infants, and Children (WIC)

PCHD Nursing
Department
PCHD Health
Education, Ohio
Department of
Health

#### PRIORITY POPULATIONS

Children, vulnerable populations

Children, Amish communities

Children, lowincome populations

Law enforcement

Infants, parents who qualify for WIC

Children

DESIRED OUTCOMES
OF STRATEGIES

Education and awareness of resources

Vaccinations

Decrease child injuries and fatality

OVERALL IMPACT OF STRATEGIES

1 Health status

Access to resources

Child injury and fatality

Infectious disease

#### **CURRENT RESOURCES**

#### **ADDRESSING PRIORITY HEALTH NEEDS**

#### **PERRY COUNTY**



Information was gathered on assets and resources that currently exist in the community. This was done using feedback from the community and an overall assessment of the service area. While this list strives to be comprehensive, it may not be complete.

#### **Access to Healthcare**

Fairfield Medical Center

Annual Drive Thru Flu Clinic

Family Health Services of East Central Genesis Healthcare System Hocking College Dental Hygiene Clinic Hopewell - Primary Health Care Clinic The Ohio State University Comprehensive Cancer Center (OSUCCC) - The James Perry County Family Practice **Shrivers Pharmacy** 

#### **Community & Social Services**

Alzheimer's Alliance

Back to school bash "Blessing Box" Project Buckeye Hills Regional Council Harcum House Hocking, Athens, Perry County Community Action (HAPCAP) Mount Aloysius Corp Mount Perry Presbyterian Church PerCo Inc. Perry County Cancer Alliance

**Perry County Commissioners** Perry County Courthouse Perry County District Library Perry County Emergency Management

Perry County Health Department Perry County Juvenile Court Perry County Law Enforcement Perry County Ohio Chamber of Commerce

Perry County Senior Center Perry County Sheriff's Office Perry County Tribune

Perry County Veterans Extravaganza

Perry County Veterans Service Commission

Perry County Villages and Townships Saint Vincent de Paul Center

#### **Community & Social Services (continued)**

Senior Expo and Health Fair South Central Power Survivor Advocacy Outreach Program (SAOP) Transitions Inc.

#### **Education**

Alpha Program Crooksville Exempted Village Schools Hocking College Perry Campus Muskingum Valley Educational Service System New Lexington City School District New Lexington Head Start Center Northern Local School District Southern Local School District

#### **Employment**

Ohio Means Jobs Center - Perry County

#### **Food Insecurity**

Thornville Food Pantry

Global Meals Homestyle Direct Hopewell-Madison Township Food Pantry Junction City Community Building - food pantry Meals on Wheels New Lexington Food Pantry (PEAP) - Pike, Bearfield, Clayton, and Pleasant Townships Perry County Senior Center - congregate dinina Roseville Community Food Pantry Saint Vincent De Paul County Conference Food Pantry Senior Farmer's Market Nutrition Program -**Buckeye Hills Regional Council** Shawnee Farmer's market Somerset Food Pantry Southeast Ohio Regional Food Bank and Southeast Perry County Food Pantry

#### **Housing & Homelessness** Fairview Assisted Living

Integrated Services for Behavioral Health - housing Perry Housing Coalition

Perry Metropolitan Housing Authority

#### **Mental Health & Addiction**

Integrated Services for Behavioral Health - New Lexington Never Alone - Ohio Perry Behavioral Health Choices Perry County Suicide Prevention Coalition

#### **Nutrition & Physical Health**

Amish Ridge Bulk Foods & Variety Store Carpenter's Market Clark's Grocery Crooksville Recreation Center John's Place (DJ's) Kroger **K&J Market** 

Millcreek Market (Bulk Foods, Deli, Bakery) **New Dimensions** 

Outdoor fitness equipment

Perry County Bike Lending Program

Perry County Park District

Perry Recreation Road Dog

Save A Lot

**Shawnee Crossing** 

T C Market Inc.

The G1 Fitness Complex Underground Athletics, LLC Walking trails

#### **Transportation**

Perry County Mobility Management Perry County Transit Region 8 Mobility Solution Center

# STEPS 5-8 INTEGRATE, DEVELOP, ADOPT, AND SUSTAIN COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)



## IN THIS STEP, THE PERRY COUNTY HEALTH DEPARTMENT WILL:

- INTEGRATE CHIP WITH COMMUNITY PARTNER AND HEALTH DEPARTMENT PLANS
- ADOPT THE CHIP
- UPDATE AND SUSTAIN THE CHIP



## THE PERRY COUNTY HEALTH DEPARTMENT

#### **NEXT STEPS**

The Community Health Assessment and this resulting Community Health Improvement Plan identify and address significant community health needs and help guide community-led activities. This Community Health Improvement Plan explains how The Perry County Health Department (PCHD) plans to address the selected priority health needs identified by the CHA.

This CHIP report was adopted by the PCHD Board of Health in July 2025.

This report is widely available to the public on the PCHD website:

https://Perrycohd.org/data-resources/

Written comments on this report are welcomed and can be made by emailing: <a href="mailto:angela.derolph@perrycountyohio.gov">angela.derolph@perrycountyohio.gov</a>

#### **EVALUATION OF IMPACT**

PCHD will monitor and evaluate the programs and actions outlined above. We will track the actions taken to address significant health needs, improve health knowledge, behaviors, and status, increase access to care, and overall help support good health. PCHD is committed to monitoring key indicators to assess impact. Our reporting process includes the collection and documentation of tracking measures in Clear Impact Scorecard, such as the number of people reached/served and collaborative efforts to address health needs. A review of the impact of PCHD's actions to address these significant health needs will be reported in the next scheduled CHA.



## APPENDIX A PUBLIC HEALTH ACCREDITATION BOARD (PHAB) CHECKLIST: IMPROVEMENT PLAN

#### MEETING THE PHAB REQUIREMENTS FOR THE CHIP:

The PHAB Standards & Measures serve as the official guidance for PHAB national public health department accreditation and include requirements for the completion of Community Health Assessments and CHIPs for local health departments. The following page demonstrates how this CHIP meets the PHAB requirements.



#### **APPENDIX B:**

## PHAB COMMUNITY HEALTH IMPROVEMENT PLAN REQUIREMENTS CHECKLIST



	PUBLIC HEALTH ACCREDITATION BOARD (PHAB) REQUIREMENTS FOR CHIPs			
YES	PAGE#	PHAB REQUIREMENTS CHECKLIST	NOTES/ RECOMMENDATIONS	
		MEASURE 5.2.1 A: Adopt a community health improvement plan.		
_	18-23	A community health improvement plan (CHIP), which includes all of the following:     a. At least two health priorities.		
	18-23	b. Measurable objective(s) for each priority.		
<b>*</b>	18-23	c. Improvement strategy(ies) or activity(ies) for each priority. i. Each activity or strategy must include a timeframe and a designation of organizations or individuals that have accepted responsibility for implementing it. ii. At least two of the strategies or activities must include a policy recommendation, one of which must be aimed at alleviating causes of health inequities.	A detailed work plan (living document) has been developed that included strategies, SMART objectives, annual activities, indicators, partners, and priority populations.	
	24	<ul> <li>d. Identification of the assets or resources that will be used to address at least one of the specific priority areas.</li> </ul>		
	26	Description of the process used to track the status of the effort or results of the actions taken to implement CHIP strategies or activities.		
		The CHIP must address the jurisdiction as described in the description of Standard 5.2.		

## APPENDIX B REFERENCES



#### APPENDIX B: REFERENCES

- <sup>1</sup>U.S. Census Bureau, Decennial Census, P1, 2018-2022. Http://Data.Census.Gov/
- <sup>2</sup> County Health Rankings & Roadmaps, 2023 Data Set, http://www.Countyhealthrankings.org/
- <sup>3</sup> U.S. Census Bureau, American Community Survey, Dp05, 2018-2022 5-Year Estimate.

Http://Data.Census.Gov/

<sup>4</sup>U.S. Census Bureau, American Community Survey, Dp02, 2018-2022 5-Year Estimate.

Http://Data.Census.Gov/

<sup>5</sup> U.S. Census Bureau, Decennial Census, S1601 American Community Survey, 2018-2022 5-Year Estimate. Http://Data.Census.Gov/

<sup>6</sup> County Health Rankings & Roadmaps, 2024 Data Set, http://www.Countyhealthrankings.org/

7 Health Resource Service Administration. Health Professional Shortage Areas. Retrieved from:

https://data.hrsa.gov/tools/shortage-area/hpsa-find

8 U.S. Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Division of Vital Statistics, Mortality public-use data 2018-2022\*, on CDC WONDER. \*Except for COVID-19, which is a 3-Year Average, 2020-2022. https://wonder.cdc.gov/Deaths-by-Underlying-Cause.html





www.moxleypublichealth.com stephanie@moxleypublichealth.com