

PROMEDICA

**TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC &
SPINE AND ARROWHEAD BEHAVIORAL HOSPITALS**

2016 JOINT COMMUNITY HEALTH NEEDS ASSESSMENT



Approved and Adopted by Arrowhead Behavioral Hospital – December 7, 2016
Approved and Adopted by Flower Hospital – December 20, 2016
Approved and Adopted by ProMedica Toledo and Wildwood Orthopaedic & Spine Hospitals on
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I. INTRODUCTION

This Community Health Needs Assessment (CHNA) is a joint assessment between ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals, and Arrowhead Behavioral Hospital, all member hospitals of ProMedica Health System serving the primary service area of Lucas County, Ohio. These hospitals are committed healthcare resources for the larger area of northwest Ohio and southeast Michigan community, with the acute care hospitals providing acute emergency services, medical and surgical inpatient care, and outpatient ambulatory services, as well as mental health and skilled nursing services on various campuses. Arrowhead Behavioral Hospital provides treatment for mental health and substance abuse. The acute care hospitals are also teaching sites for students in medicine, nursing, and the allied health professions. In addition to inpatient and outpatient services, the acute care hospitals serve the surrounding community with both primary and specialty clinics, including safety net clinics that serve uninsured and underinsured residents of the Toledo metropolitan area.

ProMedica's mission is to improve the health and well-being of the communities we serve. Significantly, the ProMedica Toledo Hospital is the region's largest employer, and has a dedicated community reinvestment plan that has coincided with significant upgrades in highway infrastructure, redevelopment of vacant buildings, and renewal of an older neighborhood, and is a driver of employment and associated community stability, with a concentrated focus on the social determinants of health, as a system.

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals, and Arrowhead Behavioral Hospital conducted and adopted the current CHNA in 2016. ProMedica system staff represented these hospitals by participating in the 2013/2014 Lucas County Needs Assessment process, which included collection and analysis of child, adolescent and adult data. One area of weakness of the CHNA was the relative age of available secondary and public health data. Following the formal county assessment survey process, ProMedica system staff joined multiple community organizations to collaborate to develop a community health improvement plan (CHIP) for Lucas County. A resource assessment and gap analysis was compiled as part of this process.

Following the Lucas County CHIP process, each of these ProMedica hospitals organized a CHNA committee to review the county CHNA and plan, select and prioritize key indicators for their hospital's role in the ProMedica joint CHNA and plan for Lucas County, and developed implementation plans to address these health issues in the community over the next three years. Strategic plans were developed with feedback from the Toledo Lucas County Health Department, to confirm these needs from a community perspective.

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals, and Arrowhead Behavioral Hospital will specifically implement programs to address the following health needs (listed in priority order) for each hospital:

Toledo Hospital

- Trauma - Education and Fall Prevention
- Cardiovascular Disease

Flower Hospital

- Mental Health
- Cancer

ProMedica Orthopaedic and Spine Hospital

- Hunger
- Obesity

Arrowhead Behavioral Hospital

- Substance abuse
- Mental Health

These four hospitals are part of ProMedica, a regional health system that initiates community health programs that are developed and implemented at the system level; with diabetes, infant mortality mental health and obesity/nutrition identified as focal points for 2016. Business units, such as hospitals, within ProMedica develop plans and implement programs that are complimentary to each other while trying to reduce duplication, which is the driving force behind this joint CHNA. The ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals, and Arrowhead Behavioral Hospital joint CHNA may be accessed online at <https://www.promedica.org/Pages/about-us/default.aspx> .

II. PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS COMMUNITY SERVICE AREA

The definition of the primary community served by ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals, and Arrowhead Behavioral Hospital for this assessment is Lucas County, Ohio, with the majority of these hospitals' inpatients residing in Lucas County. The Toledo Hospital has served Lucas County and the surrounding Toledo Metropolitan region for over one hundred years. These four hospitals are community hospitals meeting the needs of the immediate Lucas County catchment area, with Toledo Hospital also serving as a regional tertiary referral hospital to a 27 county area in northwest Ohio and southeast Michigan. The secondary service area that is served by the hospitals includes the contiguous counties of Wood and Fulton, located in the northwestern region of Ohio, with a total population estimated 168,186; and Lenawee and Monroe Counties, located in the southeastern region of Michigan, with a total population of 114,534 (Source: <http://www.census.gov/quickfacts/table/PST045215/39095,00>).

There are 11 acute care hospitals serving the Toledo metro area and 6 acute care hospitals serving the five county adjacent service area (see Table 1 below) - leaving the individual community outreach efforts within the other four counties to the hospitals located in each. For

purposes of this plan, the health statistics and factors for the primary county of Lucas County were reviewed and used in completing this community health assessment.

Demographic review of Lucas County, Ohio (Source: Census, 2010), shows that it is home to 441,815 residents, 13.1% of the population 65 year and over, with 24% of the population under 18 years of age, and 6.7% of the population were children under the age of 5. The majority of the population is Caucasian (74%), with African American (19%), Hispanic (6.1%), Asian (1.5%) and individuals having two or more races (3.1%) comprising the rest of the population. The mean household income in Lucas County (in 2014 dollars) is \$41,751. 20.7% of all Lucas County residents had an income below the poverty level in 2010. 9.7% of Lucas County residents are uninsured. Demographics for the secondary service area counties may be found at <http://hcno.org/community/reports.html>.

Existing health care facilities and resources within the community that are available to respond to the health needs of the community are listed in Table 1 below. Due to the presence of other hospital entities in each of the five counties, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals, and Arrowhead Behavioral Hospital, focuses most of their community health efforts within the Lucas County area - leaving the individual community efforts to the hospitals located in each county.

Table 1 - Hospitals Serving the Five County Service Area	
Fulton County Health Center	Wauseon, OH (Fulton)
ProMedica Bixby Hospital	Adrian, MI (Lenawee)
ProMedica Herrick Hospital	Tecumseh, MI (Lenawee)
Arrowhead Behavioral Hospital	Maumee, OH (Lucas)
Mercy St. Anne's Hospital	Toledo, OH (Lucas)
Mercy St. Charles Hospital	Oregon, OH (Lucas)
Mercy St. Vincent/Mercy Children's Hospital	Toledo, OH (Lucas)
ProMedica Bay Park Hospital	Oregon, OH (Lucas)
ProMedica Flower Hospital	Sylvania, OH (Lucas)
ProMedica Toledo Hospital	Toledo, OH (Lucas)
ProMedica Toledo Children's Hospital	Toledo, OH (Lucas)
ProMedica Wildwood Ortho & Spine Hospital	Toledo, OH (Lucas)
St. Luke's Hospital	Maumee, OH (Lucas)
University of Toledo Medical College Hospital	Toledo, OH (Lucas)
ProMedica Monroe Hospital	Monroe, MI (Monroe)
Wood County Hospital	Bowling Green, OH (Wood)
Magruder Hospital	Port Clinton, OH (Ottawa)

ProMedica hospitals also collaborate with other entities to address issues in our service area. Community organizations who participated in the health assessment and strategic planning process include, but are not limited to: American Cancer Society, Exchange Club, Family & Children First Council, local pediatricians, Lucas County Educational Service Center, Lucas

County Help Me Grow, Lucas County Juvenile Court, Mental Health and Recovery Services Board of Lucas County, Mercy Health Partners, Parish Nurse Association, Susan G. Komen Breast Cancer Foundation, Toledo Community Foundation, Toledo-Lucas County Health Department, Sylvania Schools, United Way of Greater Toledo, University of Toledo/University of Toledo Medical Center, and YMCA. (Refer to pages 15-17 for a full listing of participating organizations.)

III. IMPACT OF PREVIOUS COMMUNITY HEALTH NEEDS ASSESSMENT PLANS

In the 2013 CHNA, the ProMedica Toledo Hospital CHNA implemented programs in Lucas County to address the following health needs, listed in order of priority, with the following impact demonstrated (complete 2016 activities were not available at the time of this publication):

1. Access to Care

- Both CareNet and uninsured visits made at the following areas: 719 patient visits seen in adult specialty clinics, 187 patient visits seen in ambulatory surgical clinic, 100 patient visits to comprehensive clinic, 452 patient visits to stroke clinic, 262 patients seen by primary care physicians, and 1281 radiology and laboratory procedures provided.

2. Tobacco Cessation

- Forty-four (44) participants in tobacco cessation programs; in collaboration with other ProMedica hospitals the following public education activities were provided: Twenty (20) outreach events and five (5) tobacco presentations.
- The lung screening program was initiated at a \$99 rate in October 2014. Fifteen (15) patients were screened based on specific evidence based criteria.
- Funding for OTC nicotine products was not obtained, but ProMedica, through a local hospital collaboration called Fostering Healthier Communities, provided \$7,500 in the community toward tobacco cessation programs for the underserved - under insured and uninsured.
- Out of the 144 people scanned at Toledo Hospital in 2015, there were forty (40) patients that required an additional scan due to suspicious findings and two (2) of those patients had a positive finding for lung cancer.

3. Cancer Screening

- Provided colorectal cancer prevention education and prevention and mammography prevention and education.
- Provided 1,183 pap smears, 286 mammograms, and 44 colonoscopies for CareNet patients.
- 15 lung cancer screenings performed.
- Provided 500 colorectal education bags.
- 144 low dose lung cancer screenings completed, with two patients diagnosed with lung cancer.

4. **Cardiovascular Disease – Stroke**

- Provided stroke awareness education at 36 community events, touching over 10,000 lives.
- Two (2) stroke education articles were placed on www.promedica.org
- Utilized our newsletter, Health Connect, to educate about various aspects of stroke, including "FAST" signs and symptoms of stroke. Published one article in Healthy Connection, one newspaper article on stroke care in the Toledo Blade and had television coverage on local news station on a 6-year-old stroke patient.
- Implemented and educated 480 Lucas County and surrounding area EMS on a new stroke scale (RACE).
- Evaluate community education to determine if there is a correlation with increased tPA administration - an indicator that stroke patients arrived at the emergency department in a timely fashion to reduce stroke impact. tPA administration has increased from 30 patients in 2013 to 35 patients in 2015. Average time for patients arriving to the emergency department has decreased from 88 average minutes to 78 average minutes. Decreased door to needle time averages to 52 minutes; 68% of the tPA patients were administered in under 60 minutes. Although a scientific correlation was not measured, the intended end result of increased use of tPA and decreased arrival time to the emergency department was achieved.
- Prevention focused activities with cardiovascular and nutrition outreach were provided at eight (8) events in the Greater Toledo community. 92 Healthy Conversation Map sessions were provided to 1,061 elementary school age children in northwest Ohio.

In the 2013 CHNA, ProMedica Flower Hospital CHNA implemented programs in Lucas County to address the following health needs, listed in order of priority, with the following impact demonstrated (complete 2016 activities were not available at the time of this publication):

1. **Cancer Screenings – Skin, Breast and Colorectal**

- Provided skin cancer screenings in eight locations in the community screening over 200 participants
- Provided education on the importance of skin cancer screening at Spanish speaking Mass with translator for approximately 300 participants
- Attended four predominantly African American churches and one Latino community center to distribute colorectal cancer educational materials and answer questions
- Staffed giant Super Colon at Mud Hens game, Huntington Center and Lucas County Farm Bureau to raise awareness of colorectal cancer
- Participated in local walks and hosted a Summit to provide colorectal cancer education
- Staff participated on local related coalitions
- Used Susan G Komen funds to provide free screening mammograms at thirteen regional sessions.

2. **Mental Health – Depression/Anxiety and Drug/Alcohol**

- NAMI Family to Family Education provided for 12 weeks at Flower Hospital
- Participated in three local walks and events to heighten awareness of suicide
- Provided presentations about suicide and opioid abuse to staff at Flower Hospital

- Provided mental health screenings and drug alcohol screenings at two events

3. Cardiovascular Health – Stroke

- Distributed “Code FAST” and “SUDDEN” education to ER patients with risk factors
- Provided stroke education and materials at fourteen events in the community
- In 2015, provided stroke education to 98.1% of admitted patients

4. Obesity/Hunger Initiatives

- Offered three Healthy Kids Conversation Map classes at Elmwood Elementary and one group at Sylvania Family Services
- Increased map facilitators, using Public Health interns to facilitate
- Held two food drives collecting 955 pounds of food and \$601, donated to a local food bank
- “Healthy Eating in the Real World” conversation map education to thirty inpatients – planned and implemented food insecurity questions on admission to provide food at discharge, as needed.

5. Alzheimer’s Disease

- Nine community education and screening programs provided about memory and dementia with blood pressure screenings
- Day care and charity care programs continued for patients with dementia/Alzheimer’s Disease
- Two memory screenings for the community during Memory Screening Week, with free monthly dementia education
- Educational materials distribute at two senior events

In the 2013 CHNA, ProMedica Wildwood Orthopaedic & Spine Hospital CHNA implemented programs in Lucas County to address the following health needs, listed in order of priority, with the following impact demonstrated (complete 2016 activities were not available at the time of this publication):

1. Obesity/Hunger

- Offered three educational sessions with a total of 159 participants.
- Conducted biannual food drives with a total of 100 pounds of food donated.

2. Tobacco Use

- ProMedica wellness (tobacco treatment center) offered five (5) educational cessation programs in 2015 with a total of 239 participants.

3. Arthritis

- Due to licensure restriction, Wildwood Orthopaedic & Spine Hospital did not participate in "Own the Bone" program but provided other education listed in strategy #2.
- Staff presented three (3) programs in schools in 2015 with a total of 297 participants.

- For fall prevention, physical therapy staff and nursing staff designed and implemented a fall prevention program that can be shared with local ECF/nursing homes.
- Staff presented at three programs at ECF/nursing homes in 2015 with a total number of 33 participants.

In the 2013 CHNA, Arrowhead Behavioral Hospital CHNA implemented programs in Lucas County to address the following health needs, listed in order of priority, with the following impact demonstrated (complete 2016 activities were not available at the time of this publication):

1. Mental Health

- Attended eight (8) National Alliance on Mental Illness (NAMI) Town Hall meetings that focused on mental health education. Each event averaged 30 - 40 participants.
- Attended NAMI of Toledo Health Fair.
- Attended NAMI of Toledo Walk 2015 - provided \$2,500 as a Silver Sponsor and provided information at a vendor booth.
- Arrowhead hosted two (2) NAMI Family-to-Family Meetings - a 12-week program with 12 sessions where 10 families participated in the family sessions.
- Participated in the Mercy St. Anne's and St. Vincent's Hospital Mission Fair with thirty (30) community organizations attending focusing on addiction and mental health.
- Staff attended monthly Lucas County Mental Health Recovery Board meetings.

2. Substance Abuse

- Attended the Latin American and African American NAMI Town Hall meetings that focused on substance abuse education - each event averaged 20 - 25 participants.
- Worked with Sylvania Community Action Team (SCAT) and AWAKE to A Safe and Healthy Community Coalition (AWAKE) to provide "tool kits" full of resource information for substance abuse treatment.
- Attended the Lucas County Coalition quarterly meetings with twenty (20) mental health organizations represented.

IV. LUCAS COUNTY COMMUNITY HEALTH NEEDS ASSESSMENTS

The ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals **process for identifying and prioritizing community health needs and services included:**

- Review Lucas County Health Needs Assessment and Community Health Improvement Plan (CHIP);
- Selected and prioritized health needs to address over the next three years;
- Reviewed resources and gaps for related health needs;
- Identified programs to improve health needs; and
- Developed final CHNA and three year implementation plan to present to the hospital board(s).

The health areas that were examined by the formal county needs assessment survey include, but are not limited to: health status, health care coverage, health care access, cardiovascular health, cancer, diabetes, asthma, arthritis, weight control, tobacco use, alcohol use, substance abuse, women's health, men's health, mental health, preventive screenings and immunizations, sexual behavior, perceived quality of life, youth safety, youth violence, youth perceptions, oral health, early childhood (0-5 years) issues, middle childhood (6-11 years) issues, family functioning, neighborhood and community characteristics, and parental health.

LUCAS COUNTY HEALTH NEEDS ASSESSMENT PROCESS

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals, and Arrowhead Behavioral Hospital utilized the data provided in the Lucas County Health Status Assessment as the basis for their community health needs assessment. To begin the formal county assessment process, the Hospital Council of Northwest Ohio Data Division, in conjunction with the University of Toledo Health and Human Services Department, conducted the formal county health assessment utilizing the following methodology (refer to pages 15-17 for a list of collaborating organizations).

DESIGN

This community health assessment was cross-sectional in nature and included a written survey of adults, adolescents, and parents within Lucas County. From the beginning, community leaders were actively engaged in the planning process and helped define the content, scope, and sequence of the study. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

INSTRUMENT DEVELOPMENT

Four survey instruments were designed and pilot tested for this study: one for adults, one for adolescents in grades 7-12, one for adolescents in grades 5-6, and one for parents of children ages 0-11. As a first step in the design process, health education researchers from the University of Toledo and staff members from the Hospital Council of NW Ohio met to discuss potential sources of valid and reliable survey items that would be appropriate for assessing the health status and health needs of adults and adolescents. The investigators decided to derive the majority of the adult survey items from the BRFSS. The majority of the survey items for the adolescent survey were derived from the YRBSS. The majority of the survey items for the parents of children 0-11 were derived from the NSCH. This decision was based on being able to compare local data with state and national data. The Project Coordinator from the Hospital Council of NW Ohio conducted a series of meetings with the planning committee from Lucas County. During these meetings, banks of potential survey questions from the BRFSS, YRBSS, and NSCH surveys were reviewed and discussed. Based on input from the Lucas County planning committee, the Project Coordinator composed drafts of surveys containing 117 items for the adult survey, 85 items for the adolescent grades 7-12 survey, 72 items for the adolescent

grades 5-6 survey, and 88 items for the 0-11 survey. The drafts were reviewed and approved by health education researchers at the University of Toledo.

SAMPLING | Adult Survey

Adults ages 19 and over living in Lucas County were used as the sampling frame for the adult survey. Since U.S. Census Bureau age categories do not correspond exactly to this age parameter, the investigators calculated the population of those 18 years and over living in Lucas County. There were 335,666 persons ages 18 and over living in Lucas County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding margin of error of 5% (i.e., we can be 95% sure that the “true” population responses are within a 5% margin of error of the survey findings.) A sample size of at least 384 adults was needed to ensure this level of confidence. The random sample of mailing addresses of adults from Lucas County was obtained from American Clearinghouse in Louisville, KY. 7

SAMPLING | Adolescent Survey

A sample size of 384 adolescents was needed to ensure a 95% confidence interval with a corresponding 5% margin of error. Students were randomly selected and surveyed in the schools.

SAMPLING | 0-11 Survey

Children ages 0-11 residing in Lucas County were used as the sampling frames for the surveys. Using U.S. Census Bureau data, it was determined that 69,902 children ages 0-11 reside in Lucas County. The investigators conducted a power analysis based on a post-hoc distribution of variation in responses (70/30 split) to determine what sample size was needed to ensure a 95% confidence level with corresponding confidence interval of 5% (i.e., we can be 95% sure that the “true” population responses are within a 5% margin of error). Because many of the items were identical between the 0-5 and 6-11 surveys, the responses were combined to analyze data for children 0-11. The sample size required to generalize to children ages 0-11 was 381. The random sample of mailing addresses of parents of children 0-11 from Lucas County was obtained from American Clearinghouse in Louisville, KY.

PROCEDURE | Adult Survey

Prior to mailing the survey to adults, an advance letter was mailed to 3,600 adults in Lucas County. This advance letter was personalized, printed on Healthy Lucas County stationery and was signed by David Grossman, M.D., Health Commissioner, Lucas County Health Department and W. Scott Fry, President and CEO, Hospital Council of Northwest Ohio. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents’ confidentiality would be protected and encouraged the readers to complete and return the survey promptly if

they were selected. Three weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter (on Healthy Lucas County stationery) describing the purpose of the study; a questionnaire printed on colored paper; a self-addressed stamped return envelope; and a \$2 incentive. Approximately three weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging them to reply, another copy of the questionnaire on colored paper, and another reply envelope. A third wave postcard was sent three weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent. The response rate for the entire mailing, including all three groups was 31% (n=1,005: CI=± 3.09). The response rate for the general population survey was 38% (n=427: CI=± 4.74). The response rate for the African American mailing was 26% (n=273: CI= ± 5.92). The response rate for the Hispanic mailing was 28% (n=305: CI= ± 5.56). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

PROCEDURE | Adolescent Survey

The survey was approved by all superintendents. Schools and grades were randomly selected. Each student in that grade had to have an equal chance of being in the class that was selected, such as a general English or health class. Classrooms were chosen by the school principal. Passive permission slips were mailed home to parents of any student whose class was selected to participate. The response rate was 95% (n=1,328: CI=± 2.65).

PROCEDURE | Children 0-5 and 6-11

Prior to mailing the survey to parents of 0-11 year olds, an advance letter was mailed to 2,400 parents in Lucas County. This advance letter was personalized, printed on Healthy Lucas County stationery and was signed by David Grossman, M.D., Health Commissioner, Lucas County Health Department and W. Scott Fry, President and CEO, Hospital Council of Northwest Ohio. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected. Three weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter (on Healthy Lucas County stationery) describing the purpose of the study; a questionnaire printed on colored paper; a self-addressed stamped return envelope; and a \$2 incentive. Approximately three weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging them to reply, another copy of the questionnaire on colored paper, and another reply envelope. A third wave postcard was sent three weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent. Because much of the output combines identical items from the 0-5 and the 6-11 surveys, the number of returned surveys needed for power of the combined

population (69,902 children) was 381 and this was exceeded by having a combined 490 surveys (24%, CI= ± 4.41).

DATA ANALYSIS

Individual responses were anonymous and confidential. Only group data are available. All data was analyzed by health education researchers at the University of Toledo using SPSS 17.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Lucas County, the adult data collected was weighted by age, gender, race, and income using 2010 Census data. Multiple weightings were created based on this information to account for different types of analyses. For more information on how the weightings were created and applied, see Appendix III of the Lucas County Health Assessment that may be found at <http://www.hcno.org/pdf/counties/LucasCounty2014HealthAssessment.pdf> .

LIMITATIONS

As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Lucas County adult assessment had a high response rate. However, if any important differences existed between the respondents and the non-respondents regarding the questions asked, this would represent a threat to the external validity of the results (the generalizability of the results to the population of Lucas County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation. Second, it is important to note that, although several questions were asked using the same wording as the CDC questionnaires and the NSCH questionnaire, the adult and parent data collection method differed. CDC adult data and NSCH child data were collected using a set of questions from the total question bank and adults were asked the questions over the telephone rather than as a mail survey. The youth CDC survey was administered in schools in a similar fashion as this county health assessment. Finally, this survey asked parents questions regarding their young children. Should enough parents feel compelled to respond in a socially desirable manner which is not consistent with reality, this would represent a threat to the internal validity of the results.

CONSULTING PERSONS AND ORGANIZATIONS

The process for consulting with persons representing the community's interests and public health expertise began when local community agencies were invited to participate in the county wide health assessment process, including choosing questions for the surveys, providing local data, reviewing draft reports and planning the community event, release of the data and setting priorities. The needs of the population, especially those who are medically underserved, low-income, minority populations and populations with chronic disease needs were taken into account through the sample methodology that surveyed these populations and over-sampled minority populations.

As evidenced by the list of participating organizations below, **the hospital facility took into account input from persons who represent the community** by participating with other organizations in Lucas County who contracted with the Hospital Council of Northwest Ohio, a non-profit hospital association, located in Toledo, Ohio, to coordinate and manage the county health assessment and strategic planning process. The Hospital Council has been completing comprehensive health assessments since 1999. The Project Coordinator from the Hospital Council of NW Ohio holds a Master's degree in Public Health and conducted a series of meetings with the planning committee from Lucas County. In addition, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals requested feedback on this CHNA and implementation plan from the Toledo Lucas County Health Department to confirm these needs from the community's perspective.

The needs of the population, especially those who are medically underserved, low-income, minority populations and populations with chronic disease needs were taken into account through the sample methodology that surveyed these populations and over-sampled minority populations. In addition, the organizations that serve these populations participated in the health assessment and community planning process, such as Toledo-Lucas County CareNet, Toledo-Lucas County Commission on Minority Health, United Way of Greater Toledo, etc.

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals, and Arrowhead Behavioral Hospital conducted the Lucas County Health Assessment with the following hospitals:

- Mercy Children's Hospital
- Mercy St. Anne Hospital
- Mercy St. Charles Hospital
- Mercy St. Vincent Hospital
- ProMedica Bay Park Hospital
- St. Luke's Hospital (formerly ProMedica St. Luke's Hospital)
- University of Toledo Medical Center

There were over 100 key leaders from the community that represented public health, law enforcement, schools, churches, local officials, social service agencies and other various community members in attendance at the public release of the community health needs assessment. At the event, participants participated in focus groups and priorities were chosen for Lucas County to focus on. Community participants were invited to join the Community Health Improvement Planning (CHIP) process through invitations via email and at the public release event.

LUCAS COUNTY STRATEGIC PLANNING PROCESS

The Lucas County Strategic Planning Committee met eight (8) times and this community health improvement plan (CHIP) was approved by the Lucas County Strategic Planning Committee in July 2015.

Following the community assessment data release in February, 2014, the Toledo-Lucas County Health Department along with the local hospitals, invited key community leaders to participate in an organized process of community health improvement planning (CHIP) to improve the health of residents of the county. The National Association of City County Health Officer's (NACCHO) strategic planning tool, Mobilizing for Action through Planning and Partnerships (MAPP), was used throughout this process.

The MAPP Framework includes six phases which are listed below

- Organizing for success and partnership development
- Visioning
- Conducting the MAPP assessments
- Identifying strategic issues
- Formulating goals and strategies
- Taking action: planning, implementing, and evaluation

The MAPP process includes four assessments, Community Themes & Strengths, Forces of Change, the Local Public Health System Assessment and the Community Health Status Assessment. These four assessments were used by the Lucas County CHIP Committee to prioritize specific health issues and population groups which are the foundation of this plan. The diagram below illustrates how each of the four assessments contributes to the MAPP process.

Strategies - Priority Health Issues for Lucas County

1. Increase healthy weight status
2. Decrease chronic disease
3. Decrease youth mental health issues and bullying
4. Decrease infant mortality
5. Increase school readiness

Lucas County trans-strategies that will work toward addressing all five priority areas include: 1) Increase cultural competency, 2) Increase efforts to address social determinants of health and 3) Increase public and partner education messages promoting improved health.

The Lucas County CHIP process and groups included input from organizations and their staff who represent the community. Collaborating participants included:

Adam Klugh, Toledo Fire and Rescue Department
Alcy Barakat, Toledo-Lucas County Health Department Intern
Alia Kadri, Toledo-Lucas County Health Department
Alicia Komives, Lucas County Juvenile Court
Andrea Masters, University of Toledo
Ann Cipriani, Toledo Public Schools
Ann Mary Mercier, University of Toledo
Barbara Gunning, Toledo-Lucas County Health Department
Barry Cousino, Springfield Township Fire
Bethany Deakins, Live Well
Bonita Bonds, City of Toledo, Department of Neighborhoods

Brandon Palinski, Toledo-Lucas County Health Department
Brian Byrd, Toledo Fire
Britney Ward, Hospital Council of Northwest Ohio
Carly Miller, Hospital Council of Northwest Ohio
Carol Haddix, Toledo-Lucas County Health Department
Celeste Smith, Toledo-Lucas County Health Department
Cynthia Ball, Lucas County Children Services
Daryl McNutt, Whitehouse
Dave Lindstrom, ProMedica
Dee Geer, Hospital Council of Northwest Ohio
Dennis Cole, Lucas County EMA
Dr. Donald L Perryman, Center for Hope
Doni Miller, Neighborhood Health Association
Doreen Pant, Harbor
Elijah Jones, University of Toledo
Eric Zgodzinski, Toledo- Lucas County Health Department
Faith Yingling, Bowling Green State University/Healthy Lucas County
Gabbey Mackinnon, Live Well
Gaye Martin, ProMedica
Guisselle Mendoza, Adelante
Jan Ruma, Hospital Council of Northwest Ohio
Jeff Kowalski, Sylvania Township Fire Department
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This strategic planning process was facilitated by Britney Ward, MPH, Director of Community Health Improvement and Michelle Von Lehmden, MPH, Health Assessment Coordinator from the Hospital Council of Northwest Ohio.

The Lucas County Strategic Community Health Improvement Plan was written based on the conclusions and recommendations of a series of six meetings. ProMedica Hospitals were represented by system staff in the development of the community-wide community benefit plan for Lucas County.

V. LUCAS COUNTY COMMUNITY HEALTH NEEDS & PRIORITIES

Although, many identified health needs are addressed by physicians at the time of related patient visits, key findings that were identified in the 2014 Lucas County Health Needs Assessment include (Note: statistics in parentheses is information from the previous Lucas County survey that may be used for comparison):

- Health Care Coverage
 - 14% (13%) of adults were without health care coverage
- Cardiovascular Health*
 - 5% (3%) of adults had a heart attack, 37% (34%) had high blood pressure and 3% (2%) had a stroke
 - Heart disease (28%) and stroke (6%) accounted for 34% of all Lucas County adult deaths from 2006-2008 (Source: ODH Information Warehouse)
- Cancer*
 - 10% of adults were diagnosed with cancer at some point in their lives
 - Cancer was the second leading cause of death in the county with lung cancer being the leading cause of male and female cancer deaths (ODH 2000-2008)

- Diabetes*
 - Diabetes has been diagnosed in 15% (13%) of adults and is the 6th leading cause of death in Lucas County
- Arthritis
 - 19% (19%) of adults were diagnosed with arthritis vs. 30% in Ohio and 26% in the U.S.
- Asthma*
 - 13% (13%) of Lucas County adults had been diagnosed with asthma vs. 14% in Ohio and 13% in the U.S.
- Obesity*
 - 36% (35%) of adults were obese based on BMI vs. 30% in Ohio and 28% in the U.S.
- Tobacco Use*
 - 19% (24%) of adults were a current smoker vs. 23% in Ohio and 20% in the U.S.
 - 21% of male adults were current smokers and 16% of female adults were current smokers
- Alcohol and Drug Use*
 - 21% (23%) of adults were binge drinkers* vs. 18% in Ohio and 17% in the U.S.
 - 10% (8%) of adults misused prescription drugs in the past 6 months
- Women's Health*
 - 73% (74%) of Lucas County women age of 40 and older reported having a mammogram in the past two years vs. 78% in both Ohio and the U.S.
 - 72% of Lucas County women ages 19 and over have had a clinical breast exam in the past two years vs. 75% in Ohio and 77% in the U.S.
 - 73% (72%) of women have had a pap smear to detect cancer of the cervix in the past three years vs. 78% in Ohio and the U.S.
- Men's Health
 - 15% of men had done a self-testicular exam in the past year, increasing to 19% of those with incomes more than \$25,000
 - More than half (54%) of men had a digital rectal exam in their lifetime and 22% had one in the past year
- Preventive Medicine*
 - 52% (37%) of adults had a flu shot during the past 12 months and 56% (61%) of adults ages 65 and over had a pneumonia vaccination at some time in their life
- Adult Sexual Behavior
 - 8% (9%) of adults had more than one partner increasing to 15% of those under the age of 30.
 - Prevalence estimates suggest that young people aged 15-24 years acquire half of all new STDs and that 1 in 4 sexually active adolescent females have an STD, such as chlamydia or human papillomavirus (HPV) (Source: CDC, STDs in Adolescents and Young Adults, 2014 STD Surveillance)
 - Lucas County residents living with HIV/AIDS has steadily increased over the years 2007-2011, from 679 cases to 831 cases.
- Adult Pregnancy*
 - Infant mortality rate (ODH 2004-2013) in Lucas County was 7.1 vs. 7.4 for Ohio (2013)
 - Infant mortality for African American infants is approximately double the infant mortality rate of white infants in Ohio (ODH 2013). Ohio's 2013 Overall Infant Mortality Rate was 23 percent higher than the national rate.

- **Quality of Life**
 - In 2014, 47% of Lucas County adults were limited in some way because of a physical, mental or emotional problem with back or neck problems in 46% of residents and arthritis in 41% of residents, which were the top two reasons for these limitations.
- **Social Issues***
 - In 2014, 6% (7%) of Lucas County adults were abused in the past year. 14% (13%) of adults were concerned about having enough food for themselves or their family, increasing to 36% of those with incomes less than \$25,000.
 - 1% (2%) of adults had engaged in sexual activity in exchange for something of value.
- **Mental Health***
 - 3% (3%) of Lucas County adults considered attempting suicide.
 - 19% (19%) of Lucas County adults had a period of two or more weeks when they felt sad, blue or depressed, increasing to 27% of those under the age of 30 and 28% of those with incomes less than \$25,000
- **Oral Health**
 - 66% (68%) of Lucas County adults had visited a dentist or dental clinic in the past year. vs. 68% of U.S. adults and 67% of Ohio (2012).
 - 72% of 5th-6th graders, 74% of 7th-8th graders and 77% (79%) of 9- 12th graders have visited a dentist in the past year vs. 75% of 9th-12th graders in Ohio.
- **Minority Health***
 - 25% (25%) of African Americans did not have health care coverage compared to 19% of Hispanics and 11% of whites
 - 21% (17%) of African Americans were diagnosed with diabetes compared to 21% (17%) of Hispanics and 13% of whites
 - 49% (44%) of African Americans were diagnosed with high blood pressure compared to 28% of Hispanics and 32% of whites
 - 74% (75%) of African Americans were either overweight or obese compared to 79% (79%) of Hispanics and 67% of whites
- **Youth Weight***
 - 13% (15%) of Lucas County 9th -12th grade youth, 9% of 5th-6th grade youth and 14% of 7th-8th grade youth were obese, according to BMI, vs. 13% for Ohio and 14% for the U.S. for 9th-12th grade youth
- **Youth Tobacco Use**
 - 9% (18%) of Lucas County 9th -12th grade youth, 1% of 5th-6th grade youth and 4% of 7th-8th grade youth were current smokers, vs. 15% for Ohio and 16% for the U.S. for 9th-12th grade youth
- **Youth Alcohol and Drug Use**
 - 28% (23%) of Lucas County 9th -12th grade youth, 2% of 5th-6th grade youth and 9% of 7th-8th grade youth were current drinkers, vs. 30% for Ohio and 35% for the U.S. for 9th-12th grade youth
 - 21% (23%) of Lucas County 9th -12th grade youth, 2% of 5th-6th grade youth and 3% of 7th-8th grade youth were binge drinkers, vs. 16% for Ohio and 21% for the U.S. for 9th-12th grade youth
 - 19% (26%) of Lucas County 9th -12th grade youth, 1% of 5th-6th grade youth and 5% of 7th-8th grade youth used marijuana in the past month, vs. 21% for Ohio and 23% for the U.S. for 9th-12th grade youth

- 13% (15%) of Lucas County 9th -12th grade youth, 0% of 5th-6th grade youth and 4% of 7th-8th grade youth ever misused prescription drugs, vs. 18% for the U.S. for 9th-12th grade youth
- Youth Sexual Behavior
 - 53% (63%) of Lucas County 9th -12th grade youth, 0% of 5th-6th grade youth and 12% of 7th-8th grade youth ever had sexual intercourse vs. 43% of Ohio and 47% % for the U.S. for 9th-12th grade youth
 - 10% (7) of Lucas County 9th -12th grade youth, 0% of 5th-6th grade youth and 7% of 7th-8th grade youth did not use any method to prevent pregnancy during their last sexual intercourse, vs. 12 % for Ohio and 14% for the U.S. for 9th-12th grade youth
- Youth Mental Health*
 - 18% (16%) of Lucas County 9th-12th grade youth, 6% of 5th-6th grade youth and 14% of 7th-8th grade youth had seriously considered attempting suicide in the past year vs. 14% in Ohio and 17% in the U.S. for 9th-12th grade youth.
 - 8% (4%) of Lucas County 9th-12th grade youth, 4% of 5th-6th grade youth and 5% of 7th-8th grade youth had attempted suicide in the past year vs. 6% in Ohio and 8% in the U.S. for 9th-12th grade youth.
- Youth Safety and Violence*
 - 38% (43%) of Lucas County 9th-12th grade youth, 46% of 5th-6th grade youth and 52% of 7th-8th grade youth were bullied in the past year – no data was available for Ohio and the U.S.
 - 9% (13%) of Lucas County 9th-12th grade youth, 6% of 5th-6th grade youth and 8% of 7th-8th grade youth carried a weapon in the past month vs. 14% in Ohio and 18% in the U.S. for 9th-12th grade youth.
- Children’s Health Status*
 - 91% (89%) of Lucas County parents rated their age 0-5 child’s health as excellent or very good compared to 89% for Ohio and 86% for the U.S.
 - 86% (86%) of Lucas County parents rated their age 6-11 child’s health as excellent or very good compared to 86% in Ohio and 83% in the U.S.
- Children diagnosed with asthma*
 - 11% (11%) of children ages 0-5 were diagnosed with asthma compare to 6% in Ohio and 6% in the U.S.
 - 17% (23%) of children ages 6-11 were diagnosed with asthma compare to 10% in Ohio and 10% in the U.S.
- Children diagnosed with ADHD/ADD
 - 1% (1%) of children ages 0-5 were diagnosed with ADHD/ADD compared to 2% in the U.S.
 - 14% (16%) of children ages 6-11 were diagnosed with ADHD/ADD compared to 12% in Ohio and 9% in the U.S.
- Children diagnosed with vision problems that cannot be corrected
 - 2% (1%) of children ages 0-5 were diagnosed with vision problems that cannot be corrected compared to <1% in the U.S.
 - 2% (1%) of children ages 6-11 were diagnosed with vision problems that cannot be corrected compared to 2% in the U.S.
- Children’s Health Access*

- 7% (6%) of Lucas County parents reported there was a time in the past year their 0-5 year old was not covered by health insurance compared to 7% in Ohio and 11% in the U.S.
- 5% (9%) of parents reported there was a time in the past year their 6-11 year old was not covered by health insurance compared to 5% in Ohio and 12% in the U.S.
- 95% (93%) of parents reported their 0-5 year old child had been to a doctor for preventive care in the past year compared to 94% in Ohio and 90% in the U.S.
- 88% (82%) of parents reported their 6-11 year old child had been to a doctor for preventive care in the past year compared to 86% in Ohio and 82% in the U.S.
- 64% (48%) of parents reported their 0-5 year old child had a dental care visit in the past year compared to 50% in Ohio and 54% in the U.S.
- 91% (88%) of parents reported their 6-11 year old child had a dental care visit in the past year compared to 92% in Ohio and 88% in the U.S.
- Early (Ages 0-5) Childhood Health*
 - 94% (93%) of mothers got prenatal care within the first three months during their last pregnancy
 - 8% (5%) of mothers smoked during their last pregnancy
 - 68% (70%) of parents put their child to sleep on his/her back
 - 29% (27%) of mothers never breastfed their child
 - 92% (91%) of children always rode in a car seat or booster seat
- Middle (Ages 6-11) Childhood Health*
 - 25% of Lucas County parents reported their child never wore a helmet when riding a bicycle
 - 36% (53%) of parents reported their child was bullied at some time in the past year
 - 86% (81%) of parents reported their child participated in extracurricular activities
 - 35% (26%) of parents reported their child had a social media account
 - 87% (90%) of parents reported their child had exercised for 60 minutes on three+ days in the past week
- Family Functioning/Neighborhoods*
 - For parents with children ages 0-5:
 - 50% (43%) of parents reported their family eats a meal together every day of the week compared to 63% in Ohio and 61% in the U.S.
 - 89% (88%) of parents reported their neighborhood is usually or always safe compared to 88% in Ohio and 86% in the U.S.
 - 25% (29%) of parents reported someone in the house smokes tobacco compared with 29% in Ohio and 23% in the U.S.
 - For parents with children ages 6-11:
 - 39% (33%) of parents reported their family eats a meal together every day of the week compared to 45% in Ohio and 47% in the U.S.
 - 95% (91%) of parents reported their neighborhood is usually or always safe compared to 86% in Ohio and 86% in the U.S.
 - 21% (34%) of parents reported someone in the house smokes tobacco compared with 34% in Ohio and 23% in the U.S.
- Parent Health*
 - 16% (11%) of Lucas County parents were uninsured
 - 33% (31%) of parents were overweight and 31% (31%) were obese

- Parents missed work an average of 1.2 (1.7) days per year due to their child being ill or injured.

(An asterisk (*) above indicates ProMedica has, or participates in, community programs addressing these issues.)

The Lucas County Health CHIP Committee, using the Lucas County Health Needs Assessment, prioritized the following health issues, as indicated in Table 2 below, determining that if these issues are addressed by multiple agencies and organizations over the next three years, they could promote healthier lifestyles and safer neighborhoods for all ages, reduce chronic health diseases, and improve several socioeconomic determinants of health for Lucas County residents. In some areas of identified need, ProMedica is already taking a system approach to addressing these community health needs, to most efficiently use resources and to prevent duplication of services, as reflected in Table 2 below.

Table 2 - Lucas County Strategic Plan Priorities	Coalition or Organization Addressing Issue*
Priority #1: Increase Healthy Weight Status	
<ul style="list-style-type: none"> • Increase access to healthy food options in Lucas County – Healthy Corner Stores 	LiveWell Toledo* ProMedica Garden Grocer ProMedica Ebeid Market on the Green
<ul style="list-style-type: none"> • Increase breastfeeding – hospitals and businesses 	ProMedica Wellness Pathways*
<ul style="list-style-type: none"> • Implement OHA Healthy Hospitals Initiative 	ProMedica/Sodexo
<ul style="list-style-type: none"> • Implement a Complete Streets Policy 	LiveWell Toledo* Toledo Metro Area Council of Governments 21 st Century Committee*
<ul style="list-style-type: none"> • Expand Safe Routes to School 	LiveWell Toledo* Toledo Public Schools*
<ul style="list-style-type: none"> • Initiate a community – based walking program 	Toledo Lucas County Health Department
<ul style="list-style-type: none"> • Increase nutrition/physical education materials being offered to patients by primary care providers 	ProMedica Mercy University of Toledo Medical Center
Priority #2: Decrease Heart Disease and other Chronic Diseases	
<ul style="list-style-type: none"> • Increase prevention/intervention programs and access to healthcare (increase mid-level providers) 	ProMedica Physician Group
<ul style="list-style-type: none"> • Decrease exposure to second hand smoke 	Toledo Lucas County Health Department ProMedica Tobacco Cessation Programs
<ul style="list-style-type: none"> • Increase the recruitment of nurse practitioners and physician assistants 	ProMedica Mercy University of Toledo Medical Center
Priority #3: Decrease Youth Mental Health Issues and Bullying	
<ul style="list-style-type: none"> • Increase the number health care providers screening and making referrals for adolescent depression during office visits (use of PHQ2) 	ProMedica Physician Group Mercy Physicians University of Toledo Medical Center
<ul style="list-style-type: none"> • Increase early identification of mental health needs among youth (use of PHQ2 by PCP's) 	ProMedica Physician Group

<ul style="list-style-type: none"> • Increase awareness of available youth mental health services 	Harbor*
<ul style="list-style-type: none"> • Implement evidence-based bullying prevention programs 	University of Toledo BRAVE (Bullying) Coalition Girl Scouts of the USA
<ul style="list-style-type: none"> • Increase awareness of trauma informed care 	Harbor Behavioral (ProMedica)
Priority #4: Decrease Infant Mortality	
<ul style="list-style-type: none"> • Increase the use of safe sleep practices 	Toledo Lucas County Health Department Northwest Ohio Pathways HUB* ProMedica Mercy University of Toledo Medical Center Getting to One Ohio Health Equity Institute*
<ul style="list-style-type: none"> • Increase maternal, preconception, prenatal & inter-conception health 	Toledo Lucas County Health Department Northwest Ohio Pathways HUB* ProMedica Mercy University of Toledo Medical Center Getting to One Ohio Health Equity Institute*
<ul style="list-style-type: none"> • Increase access to care for pregnant women 	Toledo Lucas County Health Department Northwest Ohio Pathways HUB* ProMedica Mercy University of Toledo Medical Center Getting to One Ohio Health Equity Institute*
<ul style="list-style-type: none"> • Increase breastfeeding practices 	Toledo Lucas County Health Department Northwest Ohio Pathways HUB* ProMedica Mercy University of Toledo Medical Center Getting to One Ohio Health Equity Institute*
Priority #5: Increase School Readiness	
<ul style="list-style-type: none"> • Increase the number of children enrolled in a Head Start, Early Head Start, pre-school education or Help Me Grow program 	Toledo Public Schools Head Start* Brightside Academy Head Start
<ul style="list-style-type: none"> • Increase the number of Star-Rated Step Up to Quality Child Care Programs in Lucas County 	Toledo Public Schools Brightside Academy
Trans-Strategies – to work toward addressing in all five priority areas	
<ul style="list-style-type: none"> • Increase cultural competency 	Toledo Lucas County Health Department – Minority Health Coalition* ProMedica
<ul style="list-style-type: none"> • Increase efforts to address the social determinants of health 	ProMedica Come to the Table Healthy Lucas County
<ul style="list-style-type: none"> • Increase public and partner education messages promoting improved health 	Healthy Lucas County

An asterisk (*) above indicates ProMedica participation with organizations addressing these health issues, that may include financial support, although may not be specific to ProMedica Toledo Hospital.

LUCAS COUNTY - HEALTH ISSUES FOR UNINSURED, LOW INCOME AND MINORITY GROUPS

Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups include: health perceptions, health care coverage, health care access, BMI, tobacco use, alcohol use, drug use, cardiovascular health, diabetes, asthma, women’s health, men’s health, adult sexual behavior and pregnancy outcomes, quality of life, social context, mental health, and oral health were all reviewed for the Lucas County African American and Hispanic population and those with an income less than \$25,000.

Fourteen percent (13% previously) of Lucas County adults were uninsured at the time of the survey, increasing to 32% of those with incomes less than \$25,000. Lucas County adults who were uninsured reported that the reason they were without health care coverage was that they could not afford to pay the out-of-pocket expenses or pay the insurance premiums.

Lucas County adults were most likely to rate their physical and mental health as not good if they had an annual household income under \$25,000. In addition, the percent of Lucas County adults with an annual household income under \$25,000 measured worse in the areas of obesity, tobacco use, binge drinking, marijuana use, and women’s health exams when compared to the total percent for the all Lucas County adults.

The links between economic stability and health status is evident, and progress toward decreasing the rates of the leading chronic health conditions and persistent health disparities can be made by addressing the economic status of Lucas County residents, something ProMedica is committed to assisting with. More detailed information may be found at:

<http://www.hcno.org/pdf/counties/LucasCounty2014HealthAssessment.pdf> .

Table 3 – Key Health Comparisons	African Americans	Hispanics	Low Income (<\$25,000)	Lucas County 2014
Rate health as fair/poor	29%	17%	35%	18%
Uninsured	25%	19%	32%	14%
Diagnosed with High Blood Pressure	49%	44%	46%	37%
Diagnosed with High Cholesterol	23%	17%	26%	25%
Diagnosed with Cancer	11%	4%	N/A	10%
Diagnosed with Diabetes	21%	21%	24%	15%
Diagnosed with Arthritis	18%	13%	17%	19%
Diagnosed with Asthma	15%	15%	18%	13%
Overweight or Obese by BMI	74%	79%	74%	70%
Current Smoker	33%	10%	31%	19%
Binge Drank in past month	56%	48%	54%	40%
Used Marijuana in the past 6 months	20%	11%	17%	10%
Medication misuse in past 6 months	11%	11%	13%	10%

Have had a Mammogram in past year	49%	27%	45%	42%
Have had a Pap Smear in the past year	42%	61%	34%	49%
Digital rectal exam in past year	21%	15%	14%	22%
Have 2 or more sexual partners	17%	9%	12%	8%
Limited in some way	49%	46%	65%	47%
Firearm in home	20%	19%	19%	31%
Sad, blue or depressed for 2 or more weeks in a row in past year	20%	18%	28%	19%
Visited a dentist in the past year	51%	61%	37%	66%
Have seriously considered attempting suicide	5%	8%	N/A	3%
Done a self-testicular exam in the past year	8%	2%	N/A	15%
Have eaten 5 or more servings of fruits and vegetables	4%	4%	N/A	6%
Neighborhood not at all safe	19%	10%	N/A	9%
Attempted to get Social Service Agency Assistance	51%	39%	N/A	25%
Concerned about having enough food for their family	29%	27%	36%	14%
Have taken their children to a hospital emergency room when they were sick	12%	5%	15%	6%

Lack of health care coverage, tobacco use, drug use, multiple sexual partners, binge drinking, lack of female health screenings, obesity and lack of routine dental care were all prevalent issues among those Lucas County African American adults. The chronic disease prevalence among Lucas County African American adults were: arthritis (22%), high blood pressure 49% (44%), high blood cholesterol (21%), diabetes 21% (17%), and asthma 15% (14%). High blood pressure and diabetes were higher for African American adults than Caucasians in Lucas County.

Lack of health care coverage, tobacco use, binge drinking, lack of male and female health screenings, and lack of routine dental care were all prevalent issues among those Lucas County Hispanic adults. The chronic disease prevalence among Lucas County Hispanic adults were: arthritis (15%), high blood pressure (33%), high blood cholesterol (35%), diabetes (17%), and asthma (13%). High blood cholesterol and diabetes were higher for the Hispanic adults than non-Hispanics in Lucas County.

Additionally, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals are part of a community health system that includes a regional health plan, Paramount, that serves both Medicare and Medicaid patients also contributes to the understanding of core community needs and metrics. By serving a Medicaid population, additional focus and services are made available for minority and underserved populations. The health plan, the state of Ohio, and ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals have made the provision of women’s ambulatory services

for this population a priority. This includes both obstetrics and gynecology and outreach nurse midwife clinics in partnership with the Toledo Lucas County Health Department and the Pathways HUB, which serves minority and indigent patients in primarily poorer parts of Toledo Ohio, to address the issue of infant mortality in a systematic approach.

Finally, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals have a ProMedica system representative on the steering committee for the Toledo Lucas County Minority Health Commission, who actively participates in programs to support the related health initiatives.

LUCAS COUNTY - INFORMATION GAPS

The Lucas County MAPP workgroup closely examined current resources available to Lucas County residents which address one or more of the adult, youth, and/or child priority health issues. The information was examined by the workgroup to determine possible gaps by specific population groups and/or geographic locations. Although multiple individuals and agencies participated in this work, programs by individual schools, faith based and community organizations may not have been part of this resource and gap assessment.

Although the formal county assessment provided sufficient primary data, some secondary and public health data is outdated (2010) and therefore leaves gaps in measurement about key indicators during that time. Although some zip code level data is available, it is limited, and because an analysis of zip code data in 2011 revealed that the zip code data was not statistically significantly different than county data, county level data was used for this assessment.

The community needs assessment, historical referral data, and statewide databases provide a rich amount of information to determine the general state of the community. However the data has limitations. Among the underserved and underinsured, data sources are less helpful to identify gaps in care, cancer screening, and mental health. Data is not available on all topics to evaluate the health needs of some minority and non-English speaking residents.

While local experts and experience supplement statistical data, underlying health beliefs that are at the core of individual health outcomes are thinly identified.

VI. PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals' leadership convened CHNA committees to thoroughly review the county assessment data, select and prioritize key health indicators specific to their demographic, identify available resources and gaps in resources, and develop implementation plans to address the specific needs of the population.

Prioritization of health needs in its community was accomplished by the ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals CHNA committees that included staff from administration and various areas involved in patient care. The ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals CHNA committees developed the hospitals' CHNA, following the Lucas County Strategic Planning (CHIP) process, through the following steps.

- Review of existing Lucas County Community Health Assessment, including primary and secondary data sources, and the resulting strategic plan;
- Discussion and selection of priority health issues for each hospital;
- Review of current community resources which address the priority health issues;
- Review of gaps in county-level services and programming;
- Discussion of effective programs, policies, and strategies to recommend for future implementation; and
- Identification of specific implementation actions steps for each of the next three years.

Key secondary health data considered for the hospital CHNA came from the Ohio Department of Health (Source: <https://www.odh.ohio.gov/healthstats/vitalstats/deathstat.aspx>), including the top leading causes of death (based on population impacted) in Lucas County in Table 4 below:

<p>Table 4 - Lucas County Leading Types of Death – Average Age Adjusted Death Rate per 100,000</p> <p>2010 - Total Deaths: 12,776</p> <ol style="list-style-type: none"> 1. Heart Disease 228.0 (1141 total deaths) 2. Cancers 187.3 (988) 3. Chronic Lower Respiratory Diseases 50.4 (233) 4. Stroke 42.9 (218) 5. Accidents and Unintentional Injuries 40.2 (181) 6. Alzheimer's Disease 32.9 (164) <p>(Source: ODH Information Warehouse)</p>
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Although areas of the Lucas County Strategic Plan were not identified as part of the ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals CHNA, ProMedica participates in many areas of the county plan, as indicated in Table 2, through various community health coalitions and initiatives, and ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals focused on other areas of need, as discussed below.

VII. PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS COMMUNITY HEALTH NEEDS & PRIORITIES

As indicated in Table 2, ProMedica is actively involved in many priority health areas identified through the community process, including ProMedica hospital's participation in Toledo Lucas County CareNet to provide free health care to Lucas County adults that are not eligible for public

or private healthcare coverage and CareNet emergency dental fund for adults. In addition, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals are represented on the Toledo Lucas County Minority Health Commission in an effort to address these issues from a coalition perspective.

Following a review and discussion of health data and community needs, as well as organizational and community programs to address these community needs, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals identified the following needs in order of priority:

Toledo Hospital

1. Trauma Education and Fall Prevention\
 - Unintentional injury is a leading cause of death in Lucas County
2. Cardiovascular Disease
 - 5% (3%) of adults had a heart attack, 37% (34%) had high blood pressure and 3% (2%) had a stroke
 - Heart disease (28%) and stroke (6%) accounted for 34% of all Lucas County adult deaths from 2006-2008 (Source: ODH Information Warehouse)

Flower Hospital

1. Mental Health
 - 3% (3%) of Lucas County adults considered attempting suicide.
 - 19% (19%) of Lucas County adults had a period of two or more weeks when they felt sad, blue or depressed, increasing to 27% of those under the age of 30 and 28% of those with incomes less than \$25,000
2. Cancer
 - 10% of adults were diagnosed with cancer at some point in their lives
 - Cancer was the second leading cause of death in the county with lung cancer being the leading cause of male and female cancer deaths (ODH 2000-2008)

Wildwood Orthopaedic & Spine Hospital

1. Hunger
 - 15% of Lucas County adults received assistance for the following in the past year for food
 - In the past 30 days, 14% of adults were concerned about having enough food for themselves and their family, increasing to 36% of those with incomes less than \$25,000
2. Obesity
 - 36% (35%) of adults were obese based on BMI vs. 30% in Ohio and 28% in the U.S.

- 13% (15%) of Lucas County 9th -12th grade youth, 9% of 5th-6th grade youth and 14% of 7th-8th grade youth were obese, according to BMI, vs. 13% for Ohio and 14% for the U.S. for 9th-12th grade youth

Arrowhead Behavioral Hospital

1. Substance Abuse

- 10% (8%) of adults misused prescription drugs in the past 6 months
- 19% (26%) of Lucas County 9th -12th grade youth, 1% of 5th-6th grade youth and 5% of 7th-8th grade youth used marijuana in the past month, vs. 21% for Ohio and 23% for the U.S. for 9th-12th grade youth
- 13% (15%) of Lucas County 9th -12th grade youth, 0% of 5th-6th grade youth and 4% of 7th-8th grade youth ever misused prescription drugs, vs. 18% for the U.S. for 9th-12th grade youth
- 21% (23%) of adults were binge drinkers* vs. 18% in Ohio and 17% in the U.S.
- 28% (23%) of Lucas County 9th -12th grade youth, 2% of 5th-6th grade youth and 9% of 7th-8th grade youth were current drinkers, vs. 30% for Ohio and 35% for the U.S. for 9th-12th grade youth
- 21% (23%) of Lucas County 9th -12th grade youth, 2% of 5th-6th grade youth and 3% of 7th-8th grade youth were binge drinkers, vs. 16% for Ohio and 21% for the U.S. for 9th-12th grade youth

2. Mental Health

- 3% (3%) of Lucas County adults considered attempting suicide.
- 19% (19%) of Lucas County adults had a period of two or more weeks when they felt sad, blue or depressed, increasing to 27% of those under the age of 30 and 28% of those with incomes less than \$25,000

Collaboration with community organizations that share a commitment to a healthier region are key to successfully impacting these priorities. Collaborations include gifts, in kind support, and coordinated interventions. ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals' personnel work with individual departments and programs within the region. The Toledo Lucas County Health Department provided feedback about the CHNA and implementation plan.

The above priorities address three leading causes of death, cancer, cardiovascular disease and unintentional injury, as well as other initiatives identified in the Lucas County CHIP strategic plan. ProMedica also has three diabetes education centers located across Lucas County to address this critical health issue regionally.

As a ProMedica member hospital, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals are represented and are participating in the execution of the community-wide community benefit plans by working with organizations and coalitions in our community who are addressing key health issues. To best coordinate efforts and resources, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and

Arrowhead Behavioral Hospitals, as well as other ProMedica staff, work with the following coalitions, including, but not limited to: Healthy Lucas County (Lucas County CHIP Committee), American Cancer Society, American Alzheimer’s Association, American Heart Association, Lucas County Colorectal Cancer Coalition, Susan G. Komen Breast Cancer Foundation, Toledo Lucas County CareNet, and Toledo Lucas County Minority Health Commission.

VIII. PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS – NEEDS, GAPS AND RESOURCE ASSESSMENT

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals did not **address all of the needs identified in the most recently conducted Lucas County Health Needs Assessment** as these areas either go beyond the scope of the hospital or are being addressed by, or with, other organizations in the community. To some extent, resource restrictions do not allow the hospital to address all of the needs identified through the health assessment, but most importantly to prevent duplication of efforts and inefficient use of resources as many of these issues are addressed by other community organizations and coalitions.

Table 2 indicates the community wide organizations and coalitions addressing the prioritized Lucas County strategic plan issues. ProMedica participates with many of these organizations and coalitions through representation and/or funding, as indicated by an asterisk.

Through the Lucas County CHIP process, the following areas were identified as not having specific programs identified in the community: work assistance for the unemployed, underage drinking, binge drinking, youth carrying weapons, youth involved in physical fights, youth who purposefully hurt themselves, youth violence at school, youth violence in neighborhoods, youth marijuana use, delaying first sexual intercourse, prevention/intervention for violence in neighborhoods. Note: although this survey was sent to multiple community members, responses may not represent all related programs in the community, and some programs may have limited reach.

IX. PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS - IMPLEMENTATION STRATEGY SUMMARY

Following the finalization of the Lucas County CHIP strategic plan, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals commenced with their CHNA strategic planning process, whereby they analyzed and discussed data, developed hospital-based implementation and action plans, including annual goals - taking into consideration the county strategic plan, as well as areas not addressed by the community plan or other community groups.

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals identified the following health priorities (in priority order):

Toledo Hospital

1. Trauma - Education and Fall Prevention
2. Cardiovascular Disease

Flower Hospital

1. Mental Health
2. Cancer

Wildwood Orthopaedic & Spine Hospital

1. Hunger
2. Obesity

Arrowhead Behavioral Hospital

1. Substance Abuse
2. Mental Health

To achieve maximum impact, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals will continue to collaborate with community organizations that share commitments to a healthier region. Collaborations include participation, gifts, in kind support, and coordinated interventions. The hospital provides charitable funding for various community programs and helps organize volunteers and fund raising for community charities such as the American Heart Association, The Leukemia and Lymphoma Society, The MS Society, cancer coalitions and many others.

The implementation plans for these priorities include specific programs and measurements that will occur annually and progress will be reported regularly to leadership and the Board of Directors at each hospital. ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals will not address all of the needs identified in the most recently conducted Lucas County Health Needs Assessment as these areas either go beyond the scope of the hospital or may be addressed by, or with, other organizations in the community. To some extent limited resources do not allow hospitals to address all of the needs identified through the health assessment, but most importantly to prevent duplication of efforts and inefficient use of resources as many of these issues are addressed with, or by, other community agencies and coalitions across Lucas County. Many health issues are addressed by physicians at a related patient visit.

Following approval of ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals' implementation strategy and plan by the respective ProMedica

Hospitals' board of trustees, the execution of the implementation action plans will be initiated, with updates of these plans provided to respective hospital leadership, as well as the respective ProMedica Hospitals' board of trustees.

Annual inclusion of a community benefit section in operational plans is reflected in the strategic plan that is reviewed and approved by the board of trustees, annually.

As part of the annual strategic planning and budgeting process, the adoption of a budget for provision of services that address the needs identified in the needs assessment is inherently included in the hospital budget and approved by the respective ProMedica hospital board of trustees.

X. ACCESS TO PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS JOINT COMMUNITY RESOURCE ASSESSMENT AND OTHER RESOURCES

The ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals Joint **Community Health Needs Assessment is widely available in printable (pdf) form to the public on the hospital websites at:** <https://www.promedica.org/Pages/about-us/default.aspx>

The Lucas County Health Assessment and other county health assessments may be found on the following website: Hospital Council of Northwest Ohio - <http://hcno.org/community/reports.html>

For feedback or any questions related to the ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals Joint Community Health Needs Assessment, or to request a hard copy of this document, please email: cometothetable@promedica.org.