



2022 Community Health Needs Assessment

Mercy Health- Marcum and Wallace Hospital

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Mercy Health – Marcum and Wallace Hospital Adopted by the Mercy Health- Marcum and Wallace Hospital Board of Trustees, October 24, 2022

As a ministry of which Mercy Health- Marcum and Wallace Hospital is a member, Bon Secours Mercy Health has been committed to the communities it serves for nearly two centuries. This long-standing commitment has evolved intentionally, based on our communities' most pressing health needs.

Every three years we evaluate those needs through a comprehensive Community Health Needs Assessment (CHNA) process. The most recent assessments, completed by Mercy Health- Marcum and Wallace Hospital community partners, include quantitative and qualitative data that guide both our community investment, community benefit, and strategic planning. The following document is a detailed CHNA for Mercy Health- Marcum and Wallace Hospital.

Mercy Health is dedicated to our Mission of extending the compassionate ministry of Jesus by improving the health and well-being of our communities and by brining good help to those in need, especially people who are poor, dying, and underserved.

Mercy Health- Marcum and Wallace Hospital has identified the greatest needs in our community by listening to the voices of the community. This ensures our resources for outreach, prevention, education, and wellness are directed towards opportunities where the greatest impact can be realized.

Written comments regarding the health needs that have been identified in the current CHNA should be directed to Meghan Mills, Mercy Health-Marcum and Wallace Hospital, Director of Community Health at 606-726-8185 or mlmills@mercy.com.

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https://www.mercy.com/locations/hospitals/irvine/marcum-and-wallace-memorial-hospital



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Executive Summary

Overview

Mercy Health- Marcum and Wallace Hospital (Marcum or MWH) is a 25-bed Critical Access Hospital (CAH) located in Irvine, Kentucky (Estill County) who serves as the center of care for three other rural Kentucky counties, including Lee, Owsley, and Powell.

Consulted with Community Economic Development Initiative of Kentucky (CEDIK) at the University of Kentucky College of Agriculture, Food and Environment.

CEDIK facilitated the process of primary data collection through a community survey and focus groups to support Mercy Health Marcum and Wallace in their creation of an implementation plan to address identified health needs. In addition, county specific secondary data was gathered to help examine the social determinants of health. Throughout the process, CEDIK made it a priority to get input from populations that are often not engaged in conversations about their health needs or gaps in service. CEDIK presented primary and secondary data results with the community steering committee and led a prioritization process utilizing a multi-voting technique guided by the criteria from the American Hospital Association (AHA) and Association for Community Health Improvement (ACHI).

Significant Health Needs

- 1. Food Security (Including access to healthy foods and addressing obesity)
- 2. Housing
- 3. Addressing Chronic Diseases (Cardiac Disease/Diabetes)
- 4. Medication Assistance
- 5. Access to care (including affordability and transportation)
- 6. Substance Use Disorder
- 7. Mental Health

Prioritized Health Needs

- 1. Food Security (Including access to healthy foods and addressing obesity)
- 2. Addressing Chronic Diseases (Cardiac Disease/Diabetes)
- 3. Medication Assistance
- 4. Substance Use Disorder
- 5. Mental Health

Resources Available

- Mercy Health- Marcum and Wallace Hospital
- · Primary Care Clinics in all counties
- Food banks
- 340B, cash pay and other prescription assistance at Marcum and Wallace Hospital
- Medication Assisted Treatment
- AA Meetings/DUI classes
- · Recovery support groups
- Counseling/crisis services
- Mental Health providers

Feedback

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Feedback can also be submitted via a survey link for Mercy Health Hosptials at: https://www.mercy.com/about-us/mission/giving-back/community-health-needs-assessment

Our Mission

Our mission is to extend the compassionate ministry of Jesus by improving the health and well-being of our communities and bring good help to those in need, especially people who are poor, dying and underserved.

Our Vision

Inspired by God's hope for the world, we will be a ministry where associates want to work, clinicians want to practice, people seek wellness and communities thrive.

Our Values

Human Dignity

We commit to upholding the sacredness of life and being respectful and inclusive of everyone.

Integrity

We commit to acting ethically and modeling right relationships in all of our individual and organizational encounters.

Compassion

We commit to accompanying those we serve with mercy and tenderness, recognizing that "being with" is as important as "doing for."

Stewardship

We commit to promoting the responsible use of all human and financial resources, including Earth itself.

Service

We commit to providing the highest quality in every dimension of our ministry.

Facilities Description

Mercy Health- Marcum and Wallace Hospital (Marcum or MWH) is a 25-bed Critical Access Hospital (CAH) located in Irvine, Kentucky (Estill County) which serves as the center of care for three other rural Kentucky counties, including Lee, Owsley, and Powell.

Community Served by the Hospital

The community served by the hospital is defined as the counties within the primary service area containing the residential address for equal to or greater than 90% of the patients discharged during the most recently completed calendar year for which data is available at the beginning of the community health needs assessment process.

Geographic Identifiers: Estill County, Lee County, Owsley County and Powell County.

Community served by the hospital was defined as the primary service area: Estill County, Lee County, Owsley County and Powell County. Patient data indicates that 90% of persons served at Mercy Health – Marcum and Wallace Hospital reside in the primary service area, based upon the county of residence of discharged inpatients during 2021.

Zip codes serving Estill, Lee, Owsley and Powell counties

Estill County	Lee County	Owsley County	Powell County
40336	41311	41314	40380
40472			40312

Process and Methods

Process and methods to conduct the community health needs assessment:

The CHNA process that CEDIK uses is based on the IRS guidelines. CEDIK meets with the internal hospital committee and designated CHNA lead to discuss process and timeline. CEDIK provides a list of potential agencies and organizations to the hospital to aid in the recruitment of members to a Community Steering Committee that plays a vital role to the CHNA process ensuring broad community input; and to facilitate representation from all counties identified in the hospital service area. CEDIK guided the hospital to include individuals that would have knowledge of vulnerable and at-risk populations. This committee assisted in the collection of primary data for this assessment through the dissemination of a community health needs survey and in providing recommendations for focus group participants as well as participating in a focus group. The first steering committee meeting was held January 26, 2022, resulting in the survey launch and plans for future focus groups. The survey closed March 15, 2022, resulting in a total of 716 responses. Five focus groups were completed with a total of 46 participants. Complete survey results and focus group data summaries are in the appendix of this report.

CEDIK team members collected and analyzed secondary health data from a variety of sources including hospital utilization data from the Kentucky Hospital Association, County Health Rankings, Kentucky Cancer Registry, Kentucky Health Facts and the Kentucky Injury Prevention and Research Center.

External sources

- County Health Rankings (2021, www.countyhealthrankings.org)
- Kentucky Cancer Registry (2014 2018, <u>www.kcr.uky.edu</u>)
- Kentucky Health Facts (2016 2020, <u>www.kentuckyhealthfacts.org</u>)
- Kentucky Injury Prevention and Reserch Center (2021, <u>www.kiprc.uky.edu</u>)

The community steering committee met three times during the process. The initial meeting was held virtually January 26, 2022, for the hospital and CEDIK to introduce the Community Health Needs Assessment (CHNA) process, roles, and responsibilities of the CHNA steering committee and to determine additional meeting dates to hold a focus group and for a final meeting to review all collected data and identify needs. The steering committee met a second time March 10, 2022, to provide their input during a focus group. The committee met for a final time April 22, 2022, to review primary and secondary data and to identify significant health needs. The CEDIK team presented the following ACHI criteria for them to consider as they worked through the process:

- Magnitude of the problem
- · Severity of the problem
- Need among vulnerable populations
- Community's capacity and willingness to act on the issue
- Ability to have a measurable impact on the issue
- Availability of hospital and community resources
- Whether the issue is a root cause of other problems

2021 County Health Rankings Release, countyhealthrankings.org

Demographics	Kentucky	Estill County	Lee County	Owsley County	Powell County
2019 Population	4467673	7517	7403	4415	12359
% Below 18 years of age	22.4	17.7	18.5	22.7	23.9
% 65 and older	16.8	20.4	17.2	20.0	16.3
% Non-Hispanic Black	8.2	3.7	2.8	0.5	1.1
% American Indian & Alaska Native	0.3	0.3	0.5	0.5	0.4
% Asian	1.6	0.2	0.2	0.1	0.4
% Native Hawaiian/Other Pacific Islander	0.1	0.2	0.0	0.1	0.0
% Hispanic	3.9	1.2	1.4	1.7	1.8
% Non-Hispanic White	84.1	93.7	94.2	96.2	95.3
% Not proficient in English	1.0	0.2	0.1	0.0	0.2
% Females	50.7	43.0	44.0	50.7	50.4
% Rural	41.6	100.0	100.0	100.0	67.1

Health Outcomes	Kentucky	Estill County	Lee County	Owsley County	Powell County
Years of Potential Life Lost Rate	9505	13595	12613	17730	14893
% Fair or Poor Health	22	31	33	31	27
Average Number of Physically Unhealthy Days	4.6	6.3	6.7	6.2	5.7
Average Number of Mentally Unhealthy Days	5.0	6.1	6.2	6.0	5.6
% Low birthweight	9	9	9	10	9

Health Behaviors	Kentucky	Estill County	Lee County	Owsley County	Powell County
% Smokers	24	31	32	31	27
% Adults with Obesity	35	35	42	47	29
Food Environment Index	6.9	6.1	6.2	6.1	7.1
% Physically Inactive	29	34	40	27	26
% With Access to Exercise Opportunities	71	63	78	87	86
% Excessive Drinking	17	14	14	14	15
% Driving Deaths with Alcohol Involvement	25	20	0	50	23
Chlamydia Rate	436.4	273.2	106.5		274.8
Teen Birth Rate	31	41	43	43	64

Access to Care	Kentucky	Estill County	Lee County	Owsley County	Powell County
% Uninsured	7	7	6	6	7
# Primary Care Physicians	2,895	4	2		1
Primary Care Physicians Rate	65	28	28		8
Primary Care Physicians Ratio	1543:1	3550:1	3517:1		12442:1
# Dentists	2,996	7	1	1	4
Dentist Rate	67	50	14	23	32
Dentist Ratio	1491:1	2015:1	7403:1	4415:1	3090:1
# Mental Health Providers	10,733	9	10	4	10
Mental Health Provider Rate	240	64	135	91	81
Mental Health Provider Ratio	416:1	1567:1	740:1	1104:1	1236:1

Social & Economic Factors	Kentucky	Estill County	Lee County	Owsley County	Powell County
% Completed High School	86	76	68	69	80
% Some College	62	40	39	44	49
# Unemployed	89,014	268	117	80	271
Labor Force	2,072,597	5,388	2,064	1,135	5,046
% Unemployed	4.3	5.0	5.7	7.0	5.4
80th Percentile Income	\$101,776	\$69,500	\$62,303	\$78,787	\$81,764
20th Percentile Income	\$20,248	\$13,011	\$9,251	\$9,685	\$14,885
% Children in Poverty	21	32	44	44	32
# Children in Single-Parent Households	265,296	971	469	423	900
# Children in Households	1,005,667	3,076	1,390	898	2,966
% Children in Single-Parent Households	26	32	34	47	30
# Associations	4,732	17	0	0	11
Social Association Rate	10.6	12.0	0.0	0.0	8.8
Annual Average Violent Crimes	9,824	7	2	4	8
Violent Crime Rate	222	45	29	78	61
# Injury Deaths	21,274	104	62	47	80
Injury Death Rate	96	146	181	211	130

Physical Environment	Kentucky	Estill County	Lee County	Owsley County	Powell County
Average Daily PM2.5	8.7	8.6	8.6	8.6	8.4
Presence of Water Violation	n/a	Yes	No	No	No
% Severe Housing Problems	14	16	20	19	16
% Severe Housing Cost Burden	11	12	18	15	10
% Overcrowding	2	3	1	3	3
% Inadequate Facilities	1	2	3	2	3
% Drive Alone to Work	82	78	81	86	83
# Workers who Drive Alone	1,949,184	4,781	1,978	1,257	4,779
% Long Commute - Drives Alone	31	51	47	36	50

Data from the Kentucky Health Facts Website	Kentucky	Estill County	Lee County	Owsley County	Powell County	Years	Data Source
Asthma Prevalence (adults)	16%	32%	27%	8%	26%		
Diabetes Prevalence (adults)	13%	13%	25%	12%	30%	2018- 2020	BRFSS
Hypertension Prevalence (adults)	39%		40%	66%		2015- 2017	BRFSS
Heart Disease Deaths per 100k	195	267	313	313	285	2014- 2018	KSDC – Vital Statistics
Stroke Deaths per 100k	39	55	47	52	74	2014- 2018	KSDC – Vital Statistics
Cancer Deaths per 100k						2013- 2017	Kentucky Cancer Registry
All Cancers	193	246	230	267	247		
Lung and Bronchus	63	79	76	106	106		
Colorectal	17	21					
Breast	21	30					
Prostate	19						
Recommended Fruit and Vegetable Intake (adults)	9%		2%	10%		2015- 2017	BRFSS

Collaborating partners

The hospital collaborated with the following organizations as part of the process of conducting the needs assessment:

- CEDIK Community Economic Development Initiative of Kentucky, acting Consultant
- Downtown Beattyville Alliance
- Estill County Chamber of Commerce
- Estill County EMS
- Estill County Health Department
- Estill County Judge Executive
- Estill County Schools
- Estill Development Alliance
- · Housing Authority of Irvine
- Interfaith Wellness Ministry
- Irvine City Hall
- Irvine/Ravenna Kiwanis Club
- KY River Foothills Development Council
- · Lee County Health Department
- Lee County Schools
- Lee County Senior Citizens Center
- Owsley County Community Action
- Powell County Health Department
- Powell County High School students
- Powell County Senior Citizens Center
- Ravenna City Hall

Community Input

Community survey- Primary data collection

This community health needs assessment (CHNA) included a written survey of adults within Estill, Lee, Owsley and Powell counties. As a first step in the design process, leaders, and an internal workgroup from Mercy Health- Marcum and Wallace Hospital met to discuss potential sources of valid and reliable survey items that would be appropriate for assessing the health status and health needs of community members. Based on input from the planning committee, the CEDIK consultant composed drafts of the survey containing 24 items for the survey. The sampling frame for the survey consisted of adults ages 19 and over living in Estill, Lee, Owsley and Powell counties. Surveys were manually distributed between February- April 2022 in the community via organized group meetings, housing authorities, and wide-spread distribution and collection by community partners and were made available online for completion.

Community survey - Identified health challenges and needs

The community survey revealed that 27% of respondents have delayed health care due to a lack of money and/or insurance; high blood pressure, diabetes, mental illness, cancer, and drug/alcohol use are conditions that respondents have received treatment; top health challenges identified include overweight/obesity, high blood pressure, diabetes, mental health issues, heart disease and stroke, dental health, and respiratory/lung disease. Responses for how the hospital could better meet identified health needs include expanded medical services such as after-hours access, additional mental health services and outpatient services as well as educational/community outreach programs. Additional health care services that would be beneficial to the community include more physicians, dental clinic/care, dialysis center, free or low-cost transportation to appointments. When asked what drug/alcohol services are needed respondents chose mental health counseling, job opportunities (and for those in recovery), housing, life skills training, a variety of treatment facilities (Inpatient, sober living facilities and faith-based approach) and medication assisted therapy. (see Apendix, p. 32-39)

Focus Group - Unmet needs

Focus groups were conducted in Estill, Lee, Powell, and Owsley counties to discuss the health needs of populations with unmet health needs and to deepen the understanding of the health challenges they face. Focus groups revealed unmet needs among children, youth, senior populations and low-income and/or under-resourced residents. Common concerns across these populations include diabetes, heart disease, high blood pressure, obesity (adult and child), substance use disorder, cancer, and mental health issues. Unhealthy behaviors that contribute to poor health include lack of physical activity, tobacco use – smoking, chewing, and vaping, poor nutrition (by choice or lack of available healthy foods and lack of food preparation knowledge). Barriers to care included transportation issues (that effects physician appointments, pharmacy/medications, and essential needs such as food and utilities) travel to other locations to seek specialty care and the need for more mental health providers. Social determinants of health such as housing, poverty, food insecurity, transportation and lack of childcare were discussed in every focus group.

Secondary Data - Trends and rankings

County Health Rankings (CHR) data was gathered for Estill, Lee, Owsley and Powell counties. This data brings together data from several resources and are considered representative of the county/state population at large due to the way the data was collected. In addition, Kentucky Health Data trends from 2016 – 2020 and Kentucky Injury Prevention and Research Center trends from 2021 were reviewed with the community steering committee and the internal hospital committee. Trends are helpful to review as they help identify areas of progress and areas to consider addressing. All four counties have a higher percentage of smokers than the Kentucky percentage (24%), Estill (31%), Lee (32%), Owsley (31%), and Powell (27%). The state average of adults with obesity is 35%; Estill (35%), Lee (42%), and Owsley (47%) are above the state while Powell is lower at 29%, however, that is still higher than the Top US Performing counties (26%). Estill (34%) and Lee (40%) counties have a higher percentage of the population that is physically inactive than the state average (29%). Access to care data is presented in a ratio of the number of patients to 1 provider and in all health provider areas Primary Care Provider (PCP), Dentists, and Mental Health Providers, every county is lacking in providers with the most significant need being dentists and primary care physicians with all areas needing improvement. In addition to CHR data, invasive cancer data (2014-2018) from the Kentucky Cancer Registry was reviewed. The highest cancers in all counties are lung & bronchus, prostate (male only), colon & rectum, breast, corpus uteri (females only) and melanoma of the skin. Lung and bronchus cancers were the highest incidence of all listed in each county.

Determining Prioritized Needs

Based on all data reviewed, the committee identified mental health, substance use disorder, chronic diseases, obesity, diabetes, grief, access to healthy food, nutrition, and physical activity as the health needs. A list of health needs, gaps, and issues was developed by the community partners steering committee, each participant voted for their highest priority items. The committee determined to keep the top four health needs and issues with the highest vote count equivalent to half the number of participants voting remain on the list and all other health problems were eliminated. This was repeated twice to narrow the list and ensure agreement and prioritization of the needs. After discussion and completing this multi-vote process for prioritizing the needs, the committee recommended the following identified prioritized needs: food security, chronic diseases, substance use disorder, and mental health. The internal hospital reviewed and accepted the recommendations and added medication assistance as a priority need to be addressed.

No written comments were received on the Mercy Health- Marcum and Wallace Hospital's most recently conducted CHNA and most recently adopted implementation strategy.

Information and Data Considered in Identifying Potential Need

Information and data sources: federal, state or local health or other departments or agencies; community input

Public health departments	Date of data/information
Estill County Health Department – Director, steering committee member	March 10, 2022/focus group input
Lee County Health Department – County Coordinator, steering committee member	March 10, 2022/focus group input

At-risk populations	Date of data/information
Lee County Schools -School Health Director and Nurses – children, youth, and families	February 21, 2022/focus group input
Lee County Schools – Family Resource Center Director – children, youth, and families	February 21, 2022/focus group input
Owsley County Community Action Team – housing and workforce assistance	February 21, 2022/focus group input
Estill County Community Education - children and youth – Director, steering committee member	March 10, 2022/focus group input
Lee County Schools -School Health Director and Nurses – children, youth, and families	February 21, 2022/focus group input

Community and Stakeholder Input	Date of data/information
Kiwanis Club Irvine (Estill County) – 19 members participated in focus group	March 10, 2022/focus group input
Estill County Development Alliance and Chamber of Commerce – Director, steering committee member	March 10, 2022/focus group input
Powell County Foothills Clinic – FQHC (Federally Qualified Health Center) – Director, steering committee member	March 10, 2022/focus group input
Interfaith Wellness Council – Director – steering committee member	March 10, 2022/focus group input
Estill County Fiscal Court – Community Development Director – steering committee member	March 10, 2022/focus group input
Mercy Health Marcum & Wallace Hospital – CEO – steering committee member	March 10, 2022/focus group input

Organizations providing input

Organization providing input	Nature and extent of input	Medically under-served, low-income or minority populations represented by organization
Downtown Beattyville Alliance	Steering Committee Member	Low-income
Estill County EMS	Steering Committee Member	Medically under-served
Estill County Health Department	Steering Committee Member	Medically under-served, low-income, minority populations
Estill County Judge Executive	Steering Committee Member	Community leaders
Estill County Schools	Steering Committee Member	Low-income
Estill Developmental Alliance	Steering Committee Member	Low-income, minority populations
Estill County Chamber of Commerce	Steering Committee Member	Low-income

Organization providing input	Nature and extent of input	Medically under-served, low-income or minority populations represented by organization
Housing Authority of Irvine	Steering Committee Member	Low-income
Interfaith Wellness Ministry	Steering Committee Member	Medically under-served
Irvine City Hall	Steering Committee Member	Community leaders
Kentucky River Foothills Development Council	Steering Committee Member	Medically under-served, low-income, minority populations
Lee County Health Department	Steering Committee Member	Medically under-served, low-income, minority populations
Powell County Health Department	Steering Committee Member	Medically under-served, low-income, minority populations
Powell County Senior Citizens Center	Steering Committee Member	Elderly population
Ravenna City Hall	Steering Committee Member	Community leaders
Lee County Schools -School Health Director and Nurses	Focus Group participants	Low-income, minority populations
Lee County Schools – Family Resource Center Director	Focus Group participants	Low-income, minority populations
Owsley County Community Action Team	Focus Group participants	Many populations, including low-income
Irvine/Ravenna Kiwanis Club	Focus Group participants	Low-income, minority populations
Powell County Schools- FRC Group	Focus Group participants	Young adult populations

Significant Community Identified Health Needs

Social Determinant of Health – Community Level Needs that Impact Health and Wellbeing

Food Security (including access to healthy foods and addressing obesity)

Capacity and adequacy of service levels

- 35% of Estill County adults were obese, compared to 42% for Lee County, 47% for Owsley County, 29% for Powell County and 35% for Kentucky.
- The average number of reported physically unhealthy days per month was 6.3 in Estill County, 6.7 in Lee County, 6.2 in Owsley County, 5.7 in Powell County, and 4.6 for Kentucky.
- The food environment index as reported in the County Health Rankings in 2021 was 6.1 in Estill County, 6.2 in Lee County, 6.1 in Owsley County, 7.1 in Powell County and 6.9 in Kentucky.

In Estill, Lee, Owsley, and Powell County there is a lack of accessible geographic locations that provide access to healthy foods, number of locations and assistance to maintain physical activity and lack of weight management/obesity services. This results in many Estill and surrounding county's residents traveling to other parts of the state for services.

Current service providers or resources

Relevant service providers include Mercy Health- Marcum and Wallace Hospital, Estill County Community Food Bank, God's Outreach, Helping Hands, Meals on Wheels for Seniors, Lee County Helping Hands, God's Food Pantry, Powell County Emergency Food Bank, Operation Hands of Love Food Bank, Queen of All Saints Beattyville, and Cumberland Mountain Outreach Ministries.

Housing

Capacity and adequacy of service levels

- 16% of Estill County residents experience severe housing problems, compared to 20% for Lee County, 19% for Owsley County, 16% for Powell County and 14% for Kentucky.
- 12% of Estill County residents experience severe housing cost burdens, compared to 18% for Lee County, 15% for Owsley County, 10% for Powell County and 11% for Kentucky.
- 2% of Estill County residents experience inadequete facilities, compared to 3% for Lee County, 2% for Owsley County, 3% for Powell County and 1% for Kentucky.
- Respondants to the community survey cited the need for quality/safe housing for low-mid household incomes/indifviduals in Estill, Lee, Owsley and Powell counties.

In Estill, Lee, Owsley, and Powell County there is a simiple lack of housing opportunities that is further burdened by the lack of affordable housing and even safe housing opportunities. This results in many Estill and surrounding county's residents living with family, places not meant for housing, motels/hotels and emergency shelters.

Current service providers or resources

Relevant service providers include Helping Hands, Lee County Helping Hands, and Cumberland Mountain Outreach Ministries.

Social Health Need – Individual Level Non-Clinical Needs

Medication Assistance

Capacity and adequacy of service levels

- According to the U.S. Census Bureau the 2020 median household income in Estill County \$32,800, Lee County \$24,699, Owsley County \$29,406, Powell County \$41,071, and Kentucky \$52,238.
- The average number of uninsured residents 7% in Estill County, 6% in Lee County,
 6% in Owsley County, 7% in Powell County, and 7% for Kentucky.

In Estill, Lee, Owsley, and Powell County there is a high instance of poverty and accessibility to assistance that leads to medication non-compliance due to cost and low number of assistance opportunities burdened further by physical environment and cost of living fluctuations. This results in many Estill and surrounding county's residents having medical complications due to medication non-compliance.

Current service providers or resources

Relevant service providers include Mercy Health- Marcum and Wallace Hospital/Mercy Health Foundation-Irvine, Kentucky Homeplace, Manufactures Assistance and 340B.

Access to health care (Including affordability and transportation)

Capacity and adequacy of service levels

- According to the U.S. Census Bureau the 2020 median household income in Estill County \$32,800, Lee County \$24,699, Owsley County \$29,406, Powell County \$41,071, and Kentucky \$52,238.
- The average number of uninsured residents 7% in Estill County, 6% in Lee County, 6% in Owsley County, 7% in Powell County, and 7% for Kentucky.
- There are no public transportation services in Estill, Lee or Owsley County other than restricted medical transportation.

In Estill, Lee, Owsley, and Powell County there is a high instance of uninsured and/or low household incomes that lead to inability to afford care that is needed and is burdened further by cost of living fluctuations. Further, there are no public transportation offered in three of the four service counties, other than medical transportation and that burden is further exacerbated by the low household income levels resulting in the inability to make it to medical care appointments. This

results in many Estill and surrounding county's residents having untreated medical diagnosis due to proper access to health care.

Current service providers or resources

Relevant service providers include Star Medical Transport, Federated Transportation Services, Daniel Boone Transit and all in-county EMS.

Significant Clinical Health Needs

Addressing Chronic Diseases

Capacity and adequacy of service levels (Diabetes & Cardiovascular Disease)

- 13% of Estill County adults were diagnosed with diabetes, compared to 25% for Lee County, 12% for Owsley County, 30% for Powell County and 13% for Kentucky, according to Kentucky Health Facts.
- Heart Disease deaths per 100k for Estill, Lee, Owsley, and Powell Counties were 267, 313, 313 and 285, compared to 195 for Kentucky.
- Stroke Disease deaths per 100k for Estill, Lee, Owsley, and Powell Counties were 55, 47, 52 and 74, compared to 39 for Kentucky.
- 40% of Lee County adults and 66% of Powell County adults had been diagnosed with high blood pressure, compared to 39% for Kentucky.

Significant numbers of residents' have chronic disease, particularly diabetes/prediabetes and cardiovascular disease. Many programs and organizations work to provide treatment and prevention, but diabetes/pre-diabetes remains a major problem for the health of our community, with county averages exceeding that of the state up to 2-3 times

Current service providers or resources

Relevant service providers include Mercy Health- Marcum and Wallace Hospital, Estill County Health Department, Lee County Health Department, Owsley County Health Department, Powell County Health Department, Mercy Health- Irvine Primary Care, Estill Medical Clinic, Riverview Health Care, Whitehouse Clinic, Children's Clinic, Mercy Health-Lee County Primary Care, Beattyville Family Medical Clinic, Juniper Health- Lee County, United Clinics of Lee County, Family Practice Clinic, Owsley Medical Clinic, In-House Primary Care, Mercy Health- Powell County Primary Care, Stanton Family Clinic, Kentucky River Foothills, Sterling Healthcare-Stanton, Red River Healthcare and Clay City Pediatrics and Primary Care.

Mental Health

Capacity and adequacy of service levels

- The average number of reported mentally unhealthy days per month was 6.1 in Estill County, 6.2 in Lee County, 6.0 in Owsley County, 5.6 in Powell County, and 5.0 for Kentucky.
- The 2021 County Health Rankings report the ratio of population to mental health providers is 1,567:1 in Estill County, 740:1 in Lee County, 1,104:1 in Owsley County and 1,236:1 in Powell County. The Kentucky ratio of population to mental health providers is 416:1.
- In 2021, according to County Health Rankings report there were 9 mental health providers in Estill County, 10 in Lee County, 4 in Owsley County, 10 in Powell County and 10,733 in Kentucky.

In Estill County and surrounding counties, there is a lack of accessible geographic locations of mental health services along with an inadequate number of behavioral health providers at the existing locations. This results in many Estill and surrounding county's residents traveling to other parts of the state or out of state for services.

Current service providers or resources

Relevant Service providers include Mercy Health- Marcum and Wallace Hospital, New Vista, Kentucky River Foothills, Whitehouse Clinics, Foothills Health & Wellness, Mountain Comprehensive Center and Stanton Family Clinic.

Substance Use Disorder

Capacity and adequacy of service levels

- According to the Kentucky Office of Drug Control Policy, the 2021 age-adjusted drug overdose mortality rates for Estill and Powell counties were 147.89 and 99.07 respectively per 100,000 population, compared to 52.90 for Kentucky. (Data unavailable for Lee and Owsley Counties).
- The Kentucky Office of Drug Control Policy, the 2021 number of drug overdoses for Estill County is 22, Lee County 6, Owsley County 5, and Powell County 11, compared to 2,250 for Kentucky.

There is a shortage of primary care providers, behavioral health specialists and drug treatment specialists to adequately serve and address the communities drug use. There has been a lot of collaborative work with area agencies to help address at the school level with our youth, however there is still a gap due to drug use increasing significantly over the past 10 years.

Current service providers or resources

Relevant service providers include Mercy Health- Marcum and Wallace Hospital, Project Home Network/H.E.L. P Team, Estill/Powell ASAP Board, New Vista, Kentucky River Foothills, Foothills Health & Wellness, Mountain Comprehensive Center, White House Clinics and Celebrate Recovery.

Prioritization of Health Needs

Stakeholders from Marcum and Wallace Hospital, administration and clinical/provider representation participated in the prioritization for Mercy Health- Marcum and Wallace Hospital on May 25, 2022. Based on the 2022 CHNA, key stakeholders identified 7 significant health needs (mental health, access to health care, obesity, substance use, diabetes/pre-diabetes, housing, transportation, food security, medication assistance/barriers, and cardiovascular disease). The key stakeholders ranked all 7 significant health needs by magnitude, the seriousness of the consequence, and the feasibility of correcting the problem. This method of ranking allows for health needs to be ranked as objectively as possible based on the data. After the ranking, the committee voted and determined the top five health issues that may be addressed through hospital-wide efforts as follows: 1. Food Security 2. Medication Assistance 3. Addressing Chronic Diseases (diabetes and cardiovascular disease) 4. Mental Health 5. Substance use disorder. The remaining health concerns identified through the community assessment process may be addressed individually by the focused efforts of community organizations and partnerships.

Prioritized Health Needs

Based on all of the above information and processes, the prioritized health needs of the community served by the hospital are listed below.

Prioritized Social Determinants of Health Needs

Food Security (including access to healthy foods and addressing obesity)

Food security is a common problem in Estill, Lee, Owsley, and Powell counties. Food security, as defined by the United Nations' Committee on World Food Security (link: https://www.ifpri.org/topic/food-security), means that all people, at all times, have physical, social, and economic access to sufficient, safe, and nutritious food that meets their food preferences and dietary needs for an active and healthy life.

Our recent Community Health Needs Assessment indicates that the food environment in many local communities makes it difficult to eat a healthy diet. Focus groups conducted as part of the assessment found community members often travel long distances to grocery stores. Fast food and convenience stores, however, are in abundance. Issues such as poverty and lack of transportation also make it difficult to purchase fresh meals and unprocessed foods. Increasing access to healthy foods is essential to fighting hunger and resolving related health complications, such as diabetes and obesity.

According to the secondary data, 35% of Estill County adults were obese, compared to 42% for Lee County, 47% for Owsley County, 29% for Powell County and 35% for Kentucky. The average number of reported physically unhealthy days per month was 6.3 in Estill County, 6.7 in Lee County, 6.2 in Owsley County, 5.7 in Powell County, and 4.6 for Kentucky. The food environment index as reported in the County Health Rankings in 2021 was 6.1 in Estill County, 6.2 in Lee County, 6.1 in Owsley County, 7.1 in Powell County and 6.9 in Kentucky.

Prioritized Social Health Needs

Medication Assistance

Many patients may face difficulties paying out-of-pocket costs on medications, in fact cost is known to be a primary factor in medication non-adherence. This critical need was recently identified in our Community Health Needs Assessment as a barrier that many community members face.

Medication assistance programs are designed to provide prescription drugs to people who might not have access otherwise to them. Not only do these programs offer financial assistance for medications, free or to reduce the price owed by the patient, they also offer an opportunity for benefit that Marcum and Wallace can use to further assist the underserved through facilities improvements, community health support, pharmacist time in assisting patients, and further supplementing medication costs.

According to the secondary data, the U.S. Census Bureau reports in 2020 median household income in Estill County \$32,800, Lee County \$24,699, Owsley County \$29,406, Powell County \$41,071, and Kentucky \$52,238. The average number of uninsured residents 7% in Estill County, 6% in Lee County, 6% in Owsley County, 7% in Powell County, and 7% for Kentucky.

Prioritized Clinical Health Needs

Addressing Chronic Diseases

The most common chronic diseases cited were cardiac disease and diabetes.

The World Health Organization defines Cardiovascular disease (CVD) (link: https://www.who.int/news-room/fact-sheets/detail/cardiovascular-diseases-(cvds)) as a group of disorders of the heart and blood vessels, including coronary heart disease, cerebrovascular disease (stroke), elevated blood pressure (hypertension), peripheral artery disease, rheumatic heart disease, congenital heart disease, heart failure, some types of kidney disease, and diabetes.

Diabetes, as defined by the World Health Organization (link: https://www.who.int/health-topics/diabetes#tab=tab 1) as a chronic, metabolic disease characterized by elevated levels of blood glucose (or blood sugar), which leads over time to serious damage to the heart, blood vessels, eyes, kidneys and nerves. The most common is type 2 diabetes, usually in adults, which occurs when the body becomes resistant to insulin or doesn't make enough insulin.

According to the secondary data, cardiovascular disease and Type 2 Diabetes significantly impact the region. 13% of Estill County adults were diagnosed with diabetes, compared to 25% for Lee County, 12% for Owsley County, 30% for Powell County and 13% for Kentucky, according to Kentucky Health Facts. Heart Disease deaths per 100k for Estill, Lee, Owsley, and Powell Counties were 267, 313, 313 and 285, compared to 195 for Kentucky. Stroke deaths per 100k for Estill, Lee, Owsley, and Powell Counties were 55, 47, 52 and 74, compared to 39 for Kentucky. 40% of Lee County adults and 66% of Powell County adults had been diagnosed with high blood pressure, compared to 39% for Kentucky.

Mental Health

Generalized 'Mental health,' was the most common response from surveys. During meetings, adolescent mental health was frequently mentioned. Depression was cited most often, followed closely by anxiety. Trauma and specifically post-COVID effects were discussed. Access to mental health providers in the community was also discussed.

Secondary data corroborates the lack of providers, and 4 of 4 counties do not have enough mental health providers. The average number of reported mentally unhealthy days per month was 6.1 in Estill County, 6.2 in Lee County, 6.0 in Owsley County, 5.6 in Powell County, and 5.0 for Kentucky.

The 2021 County Health Rankings report the ratio of population to mental health providers is 1,567:1 in Estill County, 740:1 in Lee County, 1,104:1 in Owsley County and 1,236:1 in Powell County. The Kentucky ratio of population to mental health providers is 416:1. In 2021, according to County Health Rankings report there were 9 mental health providers in Estill County, 10 in Lee County, 4 in Owsley County, 10 in Powell County and 10,733 in Kentucky.

Substance Use Disorder

Substance Use Disorder (SUD) remains a prioritized need in our counties. SUD relates to the use and abuse of illegal drugs, prescription drugs, alcohol, and addiction in general. Comments about the impact of SUD on individuals, families and the community recurred in meetings and on surveys.

Secondary data supported substance abuse as a priority. According to the Kentucky Office of Drug Control Policy (2021 Overdose Fatality Report, Kentucky Office of Drug Control Policy, 2021, https://odcp.ky.gov/Pages/Reports.aspx), the 2021 age-adjusted drug overdose mortality rates for Estill and Powell counties were 147.89 and 99.07 respectively per 100,000 population, compared to 52.90 for Kentucky. (Data unavailable for Lee and Owsley Counties). The Kentucky Office of Drug Control Policy, the 2021 number of drug overdoses for Estill County is 22, Lee County 6, Owsley County 5, and Powell County 11, compared to 2,250 for Kentucky.

Resources Available to Meet Prioritized Needs

The existing healthcare facilities and other resources within the community that are available to meet the prioritized needs are listed below for each need.

Prioritized Social Determinants of Health Needs

Food Security

- Mercy Health- Marcum and Wallace Hospital
- Estill County Community Food Bank
- God's Outreach
- · Helping Hands
- Meals on Wheel's for Seniors
- · Lee County Helping Hands
- God's Food Pantry
- Powell County Emergency Food Bank
- Operation Hands of Love Food Bank

Prioritized Social Health Needs

Medication Assistance

- · Mercy Health- Marcum and Wallace Hospital/Mercy Health Foundation-Irvine
- Kentucky Homeplace
- Manufactures Assistance
- 340B

Prioritized Clinical Health Needs

Addressing Chronic Diseases (Cardiac Disease and Diabetes)

- Mercy Health- Marcum and Wallace Hospital
- Estill County Health Department
- · Mercy Health- Irvine Primary Care
- Estill Medical Clinic
- Riverview Health Care
- Whitehouse Clinic
- Children's Clinic
- Mercy Health- Lee County Primary Care
- Beattyville Family Medical Clinic

- Juniper Health- Lee County
- · United Clinics of Lee County
- Family Practice Clinic
- Owsley Medical Clinic
- In-House Primary Care
- Mercy Health- Powell County Primary Care
- Stanton Family Clinic
- Kentucky River Foothills
- Sterling Healthcare-Stanton
- Red River Healthcare
- Clay City Pediatrics and Primary Care

Mental Health

- Mercy Health- Marcum and Wallace Hospital
- New Vista
- Kentucky River Foothills
- Whitehouse Clinics
- Foothills Health & Wellness
- Mountain Comprehensive Center
- Stanton Family Clinic

Substance Use Disorder

- Mercy Health- Marcum and Wallace Hospital
- Project Home Network/H.E.L. P Team
- Estill/Powell ASAP Board
- New Vista
- · Kentucky River Foothills
- Foothills Health & Wellness
- Mountain Comprehensive Center
- White House Clinics
- Celebrate Recovery

Progress on Health Priorities Identified in the 2019-2021 Community Health Needs Assessment

Substance Abuse

Initiative	Impact
Track the completion of substance abuse prevention education events.	Completed 45 substance abuse prevention education events in Estill, Lee, Owsley and Powell counties between Jan. 1, 2019-March 31, 2021.
Participated in community awareness events and increase serviced counties.	Participation in OD Task Force in Estill and Lee Counties, QRT in Estill, Lee, Owsley Counties, KY-ASAP. Estill County assisted Owsley & Lee Counties in creating a QRT. This expanded service area awareness by 2 counties between 2020-2021.
Collaborate with KY-ASAP to complete an event promoting community awareness and education about substance abuse.	Collaborated with KY-ASAP to provide a community-wide Narcan training day.







Mental Health

Initiative	Impact
Provided In-Person patient assessments and telehealth encounters in the Emergency Department and Primary Care Clinics.	Provided 131 In-Person patient assessments completed by the Behavioral Health Consultant in 2020 and 2021. Provided 197 telehealth encounters in the ED and Primary Care Clinics in 2020 and 2021.
Participate in meetings to communicate/discuss opportunities	Discussed and communicated at approximately 36 meetings through Project Home Board Meetings, New Vista attended by LCSW and Peer Support Specialist in 2021.
Host or attended at least 35 community board meetings with management team/leadership attendance	Hosted or attended approximately 32 Project Home Board Meetings, KY-ASAP, School- led, New Vista by management team/leadership. Hosted and attended Mental Health First Aid Training with UK CEDIK in 2022.







Obesity

Initiative	Impact
Provide community-wide educational events	Provided healthy educational information to 20 community groups (combined at virtual and in-person events January 2019-March 2022). Highlight on 340 Family Meal Kits distributed to families of local schoolage children with healthy recipes, education, and ingredients for a meal in 2021-2022. Hosted a diabetes coalition support group, with meal, recipe, and education provided in 2022.
Provide access to health foods through monthly food vouchers	Successfully fed 100 participants May-December in 2021 and 100 participants May-December in 2022.
Host community wide meal kit events	Hosted meal kit events with healthy recipes, all ingredients needed to prepare the meals and information to store and prepare healthy foods to make them last longer. Fed 240 in 2021 and 480 in 2022.





Appendix

The Appendix below includes the community survey results, complete survey, focus group questions and findings, hospital usage, payor mix, inpatients diagnosis, community steering committee members, and consultant team members.

Mercy Health Marcum and Wallace Hospital Survey Results

SPRING 2022

Respondent Demographics

716 Respondents



Have a primary care provider.



Regularly visit primary care provider for check-ups.



Respondent households have delayed health care due to llack of money/ insurance.

Only 5% of households report not having health insurance.

The top three health challenges respondent households face:

Overweight/obesity	23%
High blood pressure	22%
Diabetes	13%
Mental health issues	11%
Heart disease and stroke	8%
Dental health	8%
Respiratory/lung disease	5%
Cancer	4%
Drugs/alcohol addiction or Substance	
Use Disorder (SUD)	1%
Other	5%

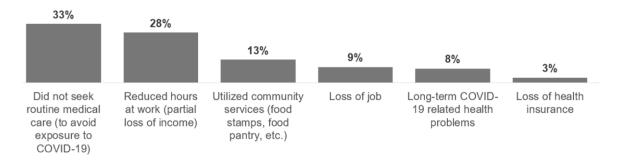
Respondent households receiving treatment for:

Diabetes	25%
High blood pressure	51%
Cancer	5%
Mental illness	18%
Drug/alcohol abuse	2%

Respondent household eligibility:

Medicare	43%
Medicaid	36%
Public housing assistance	5%
SNAP (food stamp program)	15%

Respondent household impacts due to COVID-19 pandemic:



Respondents identified another 6% of impacts due to COVID-19: mental stress/depression, lost family, or friend to COVID, unexpected childcare cost, delayed surgery.

What other drug/alcohol treatment services do you think are needed in the community? Select all that apply.

More mental health counseling services	11%
Job opportunities (jobs for individuals in recovery)	10%
Opportunities for housing (housing for those in recovery and/or homeless)	9%
Medication assisted therapy (medication, used in combination with counseling and behavioral therapies, to treat substance use disorders)	8%
Residential treatment facilities (treatment in a controlled accountable environment)	8%
Detoxification treatment (inpatient)	8%
Opportunities for skills training and education (GED, vocational, college)	8%
Life skills training	8%
Sober living facilities (accountability program)	8%
Spiritual care (faith based treatment options)	6%
Peer support	6%
Recovery community (sober community)	6%
Hepatitis C treatment	3%
Other	1%

Respondent households that have delayed care for drug/alcohol addiction (Substance Use Disorder) for any of the following reasons:

Does not apply	92.4%
Cost	2.4%
Lack of emotional support/mental health providers	2.2%
Transportation	1.7%
Afraid loved one will find out	0.2%
Other	1.1%

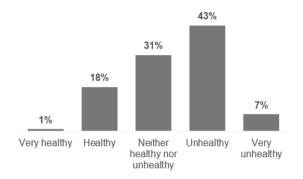
What could the hospital do to better meet your health needs?

Educational programs	24%
After-hours access	22%
Outpatient services	24%
Substance Use Disorder (SUD) services	22%
Other	9%
Lower costs of healthcare/provide more afford- able services, more community outreach pro- grams (including exercise class), employ more/ better physicians, expand mental health services	

Services used in the last 12 months by respondent households:

	At Marcum and Wallace Hospital	At another facility
Cardiology	11%	9%
Obstetrics/Gynecology	0%	11%
Radiology	33%	14%
Neurology	0%	6%
Psychiatry	0%	4%
Oncology (Cancer Care)	0%	3%
Urology	1%	5%
Orthopedics	1%	7%
Pulmonology (Lung Care)	2%	4%
Pediatrics	1%	5%
Dialysis	0%	0%
Primary Care	17%	11%
Drug/Alcohol Abuse	0%	0%
Outpatient Services (Laboratory, Physical Therapy, Occupational Therapy, Speech Therapy)	29%	17%
Infusion Therapy	3%	1%
Cardiac Rehabilitation	0%	1%

Respondent rating of the overall health of the community:



Other healthcare services respondents feel should be provided in their community:

Affordable healthcare	
More physicians	
Dental clinic/care	
Cancer and dialysis center	
More health education	
Mental health care	
After hours clinic/urgent care	
Free or low cost transportation to appointments	



Respondent households have used the services of a hospital in the last 12 months.



Respondent households that used the services of Marcum and Wallace Hospital.



Respondent households that used the services of another hospital.

Respondent satisfaction with overall experience at Marcum and Wallace:

Very satisfied	54%
Satisfied	39%
Dissatisfied	5%
Very dissatisfied	3%

Hospital services respondent households used:

Emergency room for life-threatening issue	8%
Emergency room for non-life-threatening	
issue	24%
Outpatient services (radiology, laboratory,	
therapy, etc.)	58%
Inpatient	9%

Most important qualities while receiving care at a hospital:

Effective treatment	29%
Nursing care	20%
Explanation of diagnosis	16%
Comfort of the hospital/environment	12%
Close to family/home	11%
Physical interaction with patients	10%
Other	2%

Respondents who used hospital services at other locations:

Where they went for services:	
Baptist Health Richmond	30%
Clark Regional Medical Center	15%
Baptist Health Lexington	15%
University of Kentucky Chandler Hospital	15%
CHI St. Joseph Health	13%
Kentucky River Medical Center	2%
Other	10%
Saint Joseph Hospital - Berea, Lexington VA Hospital, Lexington Good Samaritan	

Why they used a different hospital:	
Service I needed was not available	32%
My doctor referred me to another hospital	28%
My insurance requires me to go	
somewhere else	4%
Other	35%
Location/closer to home, specialist at another hospital, better quality of care, Veteran	

Marcum and Wallace Hospital 2022 CHNA Survey

We want to better understand your health needs and how the hospital and its partners can better meet those needs. Please take 5-10 minutes to fill out this survey. Please do not include your name anywhere. All responses will remain anonymous.

GZ I. FIE	ase tell us your zip code.
Q2 . Do	you have a primary care provider?
0	Yes
\circ	No
Q3 . Do	you regularly visit your primary care provider for a check-up?
0	Yes
\circ	No
Q4 . Ha	ve you or someone in your household used the services of a hospital in the past 12 months?
0	Yes
0	No
Q5 . Did	you use the services of Marcum and Wallace Hospital?
0	Yes
\circ	No
Q6 . Did	you use the services of another hospital?
\circ	Yes
0	No

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Q12. Have you or someone in your household used any of the services below in the past 12 months? Select all that apply.

	Marcum and Wallace	Other Facility
Cardiology	0	0
Obstetrics/Gynecology	0	0
Radiology	0	0
Neurology	0	0
Psychiatry	0	0
Oncology (Cancer Care)	0	0
Urology	0	0
Orthopedics	0	0
Pulmonology (Lung Care)	0	0
Pediatrics	0	0
Dialysis	0	0
Primary Care	0	0
Drug/Alcohol Abuse	0	0
Outpatient Services (Laboratory, Physical Therapy, Occupational Therapy, Speech Therapy)	0	0
Infusion Therapy	0	0
Cardiac Rehabilitation	0	0

Q13	. Are you or anyone in your household without health insurance currently?
0	Yes
	No . Have you or anyone in your household delayed healthcare due to lack of money or insurance?
0	Yes
0	No
	. Do you or someone in your household receive treatment for any of the following ditions? Select all that apply.
0	Diabetes
\circ	High blood pressure
0	Cancer
0	Mental illness
0	Drug/alcohol abuse
	. Are you or any members of your household currently eligible for any of the services d below? Select all that apply.
\circ	Medicare
0	Medicaid
\circ	Public housing assistance
	SNAP (Food stamp program) In what ways were you or your family affected by the COVID-19 pandemic? ct all that apply.
\circ	Loss of job
0	Loss of health insurance
0	Reduced hours at work (partial loss of income)
0	Utilized community services (food stamps, food pantry, etc.)
0	Did not seek routine medical care (to avoid exposure to COVID-19)
\circ	Long-term COVID-19 related health problems
\circ	Other. Please specify:

Q18.	What is your current living situation?
0	Living with family (parent(s), guardian, grandparents, or other relatives)
0	Living on your own (apartment or house)
0	Living in a place not meant to be a residence (outside, tent, car, homeless camp, abandoned building)
0	Living in recovery housing
0	Living in a recovery treatment facility
0	Living in a hotel or motel
0	Staying in an emergency shelter or transitional living program
0	Staying with someone I know
	Please select the TOP THREE health challenges you or anyone in your household Select only three.
0	Cancer
0	Diabetes
0	Mental health issues
0	Heart disease and stroke
0	High blood pressure
0	HIV/AIDS/STDs
0	Overweight/obesity
0	Respiratory/ lung disease
0	Drugs/alcohol addiction or Substance Use Disorder (SUD)
0	Dental health
0	Child abuse/neglect
0	Other
0	None of the above

	. Have you or someone in your household delayed care for drug/alcohol addiction ostance Use Disorder) for any of the following reasons? Select all that apply.
0	Cost
0	Transportation
0	Afraid loved one will find out
0	Lack of emotional support/mental health providers
0	Does not apply
0	Other. Please specify:
Q21.	. How would you rate the overall health of your community?
0	Very healthy
0	Healthy
0	Neither healthy nor unhealthy
0	Unhealthy
0	Very unhealthy
	. What could the hospital do to better meet the community's health ds? Select all that apply.
0	Educational programs
0	After-hours access
0	Outpatient services
0	Substance Use Disorder (SUD) services
0	Community activities and events
\circ	Other. Please specify:

	. What other drug/alcohol treatment services do you think are needed in the munity? Select all that apply.
0	More mental health counseling services
0	Medication assisted therapy (medication, used in combination with counseling and behavioral therapies, to treat substance use disorders)
0	Residential treatment facilities (treatment in a controlled accountable environment)
0	Detoxification treatment (inpatient)
0	Opportunities for skills training and education (GED, vocational, college)
\circ	Job opportunities (jobs for individuals in recovery)
\bigcirc	Spiritual care (faith based treatment options)
\bigcirc	Life skills training
\bigcirc	Sober living facilities (accountability program)
\bigcirc	Peer support
\circ	Recovery community (sober community)
0	Hepatitis C treatment
\circ	Other. Please specify:
Q24	. What other healthcare services do you feel should be provided in your community?

Mercy Health Marcum and Wallace CHNA Focus Group Questions

What is your vision for a Healthy Estill, Powell, Owsley, and Lee Counties?

What are the most pressing health needs or problems in Estill, Powell, Owsley, and Lee Counties? Share the age(s) that it impacts most.

What could be done to better meet health needs? Consider hospital and other service providers Are there barriers to access services?

Perception of current health care system (Hospital, HD, EMS, Housing, Food Access).

What is working well? What needs to be improved or added (if possible)?

What are lasting (if any) impacts of COVID-19 on the community and health? *Positive or negative?*

Mercy Health Marcum and Wallace CHNA Focus Group

- The vision for healthy communities in Estill, Lee, Powell, and Owsley Counties includes community vitality, healthy lifestyles, and access to healthcare.
- The greatest health needs in the service area are identified as chronic diseases, unhealthy behaviors, and access to care. Social determinants of health particular to Estill, Lee, Powell, and Owsley Counties heavily impact the community's view of the greatest health needs.
- Regarding the greater healthcare system, defined as hospital, health department, EMS,
- clinics, housing and food access; there is a comprehensive system in place that collaborates often, but there is still need for expanded access.
- To better meet health needs in Estill, Lee, Powell, and Owsley Counties, the community
- · needs expanded services and education.
- There were positive and negative lasting impacts of COVID-19 on the community.

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Finding 1:

The vision for healthy communities in Estill, Lee Powell, and Owsley Counties includes community vitality, healthy lifestyles, and access to healthcare.

Community Vitality

- · Economic development
- Sustainable jobs
- Increased community events create connections and sense of belonging
- · New housing starts/revitalize housing
- · Community pride

Healthy lifestyles

- Recreation center/gyms/opportunities for physical activity
- Reduced drug use
- · Increase trail infrastructure
- Increase access to fresh, healthy food (for home use and in restaurants)
- Youth sports and activities

Access to healthcare

- · Drug treatment center
- Increase specialty care
- · Increase mental health services/reduce stigma
- · Assisted living and long-term care

Finding 2:

The greatest health needs in the service area are identified as chronic diseases, unhealthy behaviors, and access to care. Social determinants of health particular to Estill, Lee, Powell, and Owsley Counties heavily impact the community's view of the greatest health needs.

Chronic diseases

- Diabetes
- Heart disease
- · Obesity adult and child
- Substance use disorder
- Cancer
- Mental health issues

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Unhealthy behaviors

- · Lack of physical activity
- Tobacco use smoking, chewing, and vaping
- Poor nutrition by choice or lack of healthy food availability
- Substance misuse

Access to care

- Substance use treatment
- Transportation
- · Access to specialty health care providers
- · Mental health providers

Social determinants of health particular to these counties that impact the greatest health needs are:

Housing – There is a need for quality, safe housing for lower to mid income families/individuals in Estill, Lee, Powell, and Owsley counties.

Transportation – Transportation to and from essential services, including healthcare is a barrier for people.

Food insecurity – Children in in the service area counties experience food insecurity when they are out of school. Access and coordination of food distribution could be expanded to meet this need. Access to food preparation education would be beneficial.

Poverty – increased employment with benefits as well as workforce training for residents is seen as a need that affects health status.

Finding 3:

Regarding the greater healthcare system, defined as hospital, health department, EMS, clinics, housing and food access; there is a comprehensive system in place that collaborates often, but there is still need for expanded access.

Strengths of the system

- · Health department/leadership
- · Hospital/Emergency Department
- EMS/Air Evac
- Pharmacies
- · Collaboration of all the above
- UK County Extension in each county
- MHMW Healthy Food access program
- Backpack programs for schools
- · County Food banks
- Interfaith wellness clubs
- Sterling Health Care clinics in Powell Co. Schools

- · Addiction Recovery Care (ARC) recovery centers
- Kentucky River Community Care (KRCC)
- Drug task force Lee and Owsley counties

Opportunities for improvement

- Transportation
- Specialists Pulmonologist, Endocrinology, Urology, OB/Gyn, Dermatology
- · Expanded office hours at clinics
- · Community garden
- Better communication about services offered at MHMW
- · Resource/health navigator
- · Improved billing
- Health literacy education what questions patients need to ask
- Improved Farmer's Market increase fresh food offered
- Increased Mental health services
- · Decreased wait time for appts
- More health provider access

Finding 4:

To better meet health needs in Estill, Lee, Powell, and Owsley Counties, the community needs expanded services and education.

- Increase mental health counselors
- · Increase specialty care and primary care
- Integrated care physical and mental health in one clinic
- Meet community where they are take education and health screens to them
- Support for Grandparents raising grandchildren
- Inpatient substance use disorder treatment
- Grief support group
- · Communicate on available resources and services
- Mental health training for police and school counselors
- LGBTQ education and health care
- Tobacco education smoking and vaping harmful effects
- Dietician community education
- Community garden and healthy food prep classes
- Expand community physical activity yoga, Zumba, walking clubs, fun runs
- · Increase technology access for seniors including telehealth

Finding 5:

There were positive and negative lasting impacts of COVID-19 on the community.

Positive impacts

- Innovation in communication and telehealth
- · Increased family time
- · Community support/unity "Taking care of our neighbors"
- Awareness of public health increased more hand washing
- · Meeting community in homes for vaccines
- · Increased outdoor activities (ex. Gardening, hiking)
- Increased funding for schools, health department and clinics

Negative impacts

- Mental health struggles anxiety, isolation, loss of personal interaction
- Misinformation
- · Loss of businesses
- Education children and youth behind in classes and social development
- · Health department and the hospital had to put some services on hold
- Residents postponed health care physician appointments, screenings, and diagnostic tests
- Loss of workforce

Hospital Usage, CY 2020

Patient Status	Total
Inpatient Discharges	586
Outpatient Visits	29,112

Source: Kentucky Hospital Association Hospital Utilization Data, 2022

Hospital Inpatient Payer Mix, CY 2020

Player	Discharges
Aetna Better Health of KY Medicaid Managed Care	12
Anthem Medicaid Managed Care	8
Care Source KY Commercial Plan	2
ChampVA	2
Commercial - Anthem Health Plans of KY PPO Plan	23
Commercial - Caresource Kentucky HMO Plan	15
Commercial - Humana PPO Plan	1
Commercial - Other	9
In State Medicaid	31
Medicare (Excluding Medicare Managed Care)	284
Medicare Managed Care	137
Passport Medicaid Managed Care	7
Pending Insurance	1
Self Pay	7
VA	1
WellCare of Kentucky Medicaid Managed Care	46

Source: Kentucky Hospital Association Hospital Utilization Data, 2022

Hospital Outpatient Payer Mix, CY 2020

Player	Visits
Aetna Better Health of KY Medicaid Managed Care	1,647
Anthem Medicaid Managed Care	919
Auto Insurance	71
Care Source KY Commercial Plan	231
ChampVA	48
Commercial - Aetna Health HMO Plan	19
Commercial - Anthem Health Plans of KY PPO Plan	3,553
Commercial - Caresource Kentucky HMO Plan	1,172
Commercial - Cigna Health & Life PPO Plan	4
Commercial - Humana HMO Plan	3
Commercial - Humana POS Plan	129
Commercial - Humana PPO Plan	210
Commercial - Nippon Life Insurance Company of America	1
Commercial - Other	1,316
In State Medicaid	829
Medicare (Excluding Medicare Managed Care)	7,744
Medicare Managed Care	4,638
Other	4
Other Self Administered Plan	10
Out of State Medicaid	7

Passport Medicaid Managed Care	899
Pending Insurance	20
Self Pay	656
Tricare (Champus)	110
VA	27
WellCare of Kentucky Medicaid Managed Care	4,688
Workers Compensation	157

Source: Kentucky Hospital Association Hospital Utilization Data, 2022

Top Hospital Inpatient Diagnosis Related Group, CY 2020

DRG Description	Visits
Simple pneumonia and pleurisy	80
Chronic obstructive pulmonary disease	63
Kidney and urinary tract infections	55
Septicemia	46
Heart failure and shock	43
Respiratory infections and inflammations	36
Cellulitis	29
Renal failure	25
Nutritional and miscellaneous metabolic disorders	20
Esophagitis, gastroenteritis and miscellaneous digestive disorders	17

Source: Kentucky Hospital Association Hospital Utilization Data, 2022

Marcum and Wallace Hospital 2022 CHNA Steering Committee		
Organization	First Name	Last Name
Estill Co. EMS	Jimmie & Shelia	Wise
Interfaith Wellness Ministry	Donna	Crow
KY River Foothills Dev. Council	Jessica	Taylor
Powell Co. Health Dept.	Stacy	Crase
Housing Authority of Irvine	Debra	Rogers
Lee CountyHealth Dept.	Vivian	Smith
Estill County Chamber of Commerce	Joe	Crawford
Estill Co. Health Dept.	Elizabeth	Walling
Estill County Schools	Teresa	Dawes
Estill Development Alliance	Joe	Crawford
Powell Co. Senior Citizens Center	Sheila	Thomas
Lee & Owsley Co. Senior Citizens Center	Teresa	Bowling
Estill County Judge Executive Office	Teresa	McKinley
Downtown Beattyville Alliance	Teresa	Mays
Ravenna City Hall	Sharon	Snowden
Irvine City Hall	James	Gross



Consulting team:

Melody Nall, Engagement Director, Extension Specialist Administrator

Sarah Bowker, Communications Director

Simona Balazs, Research Director

Mercedes Fraser, Senior Extension Associate

Alison Davis, CEDIK Executive Director

Board Approval

The Marcum and Wallace Hospital 2022 Community Health Needs Assessment was approved by the Marcum and Wallace Hospital Board of Trustees on October 24, 2022.

Board Signature

Date:_

For further information or to obtain a hard copy of this Community Health Needs Assessment (CHNA) please contact:

Meghan L. Mills

Director of Community Health

Mercy Health- Marcum and Wallace Hospital

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Mercy Health CHNA Website: https://www.mercy.com/about-us/mission/giving-back/community-health-needs-assessment