



# 2022 Community Health Needs Assessment

Mercy Health Toledo – Willard Hospital

# 2022 Community Health Needs Assessment

## Bon Scours Mercy Health Toledo Willard Hospital

# Adopted by the Mercy Health Toledo Board of Trustees, September 27, 2022

As a Ministry of which Mercy Health Willard Hospital is a member, Bon Secours Mercy Health has been committed to the communities it serves for nearly two centuries. This longstanding 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 Willard Hospital and community partners, included 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 Willard Hospital.

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

Mercy Health Willard 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 Jessica Henry; <u>Jessica Henry@mercy.com</u>.

#### Mercy Health Toledo Willard Hospital

1100 Neal Zick Rd. Willard, Ohio 44980

419-964-5000 Mercy.com



# **Table of Contents**

.7
. 9
10
12
17
19
21
23
26

## **Executive Summary**

### **Overview**

Mercy Health Willard Hospital serves the Huron County, Ohio population. Huron county is a 495 square mile area in northern Ohio. The Willard Hospital service area is composed of the following zip codes: 44811, 44826, 44837, 44847, 44850, 44851, 44855, 44857, 44865, 44888, 44889 and 44890.

Through a series of three key informant interviews, a variety of perspectives were gathered to identify the greatest health challenges impacting the Mercy Health Willard Hospital community. Key informants include a municipal manager, a fire chief, and Mercy Health Willard Hospital leadership. These stakeholders represented a variety of generations.

Information collection and data aggregation was accomplished through multiple channels including both qualitative community inputs and quantitative market data collection. The three key informant interviews discussed above served as the community input. Market data was gathered though publicly available data sources including: Metopio, U.S. Census Bureau, and County Health Rankings. These sources combined provided a comprehensive view of the greatest health needs impacting the Huron County population. The community inputs were the primary driver of the identified significant health needs while the market data was used to validate and supplement these findings. The local community insights are critically important to the identification of Huron County's greatest needs as they provide an "on the ground" perspective into the impact of challenges or barriers which may hinder the health of the community.

The significant community health needs were prioritized through a working session where an inclusive collection of stakeholders was present. Each significant community health need was objectively assessed by all stakeholders in the room through an evaluation of the health need's significance to the community and the hospital's ability to impact the need. The top five greatest health needs from this process were identified as the prioritized health needs while all others were recognized as significant and still impacting the surrounding community.

## Significant Health Needs

- 1. Mental Health and Depression
- 2. Transportation
- 3. Food Insecurity
- 4. Housing Insecurity
- 5. Health Education and Literacy
- 6. Access to Healthcare Services
- 7. Drug and Substance Abuse

- 8. Chronic Diseases
- 9. Consistent Caregivers for the Elderly Population
- 10. Social Health and Connection

## **Prioritized Health Needs**

- 1. Access to Healthcare Services
- 2. Mental Health and Depression
- 3. Chronic Diseases
- 4. Health Education and Literacy
- 5. Drug and Substance Abuse

## **Resources Available**

The resources available today to address the prioritized health needs include:

Access to Healthcare Services

- 1. Mercy Health Willard Hospital healthcare providers
- 2. Mercy Van

Mental Health and Depression

- 1. Mental health counselors
- 2. Firelands Counseling and Recovery
- 3. NAMI Huron County
- 4. Fisher-Titus Behavioral Health

**Chronic Diseases** 

- 1. Chronic disease management programs
- 2. Mercy Health Willard Hospital
- 3. Fisher-Titus Hospital
- 4. Huron County Public Health

Health Education and Literacy

- 1. Patient health information
- 2. Community care medicine program
- 3. Primary care providers

Drug and Substance Abuse

- 1. Mercy Health Willard Hospital
- 2. Local Medicaid-driven rehabilitation center
- 3. Firelands Counseling and Recovery
- 4. Fisher-Titus Behavioral Health
- 5. NAMI Huron County

## Feedback

Written comments regarding the health needs that have been identified in the current CHNA should be directed to Jessica Henry; <u>Jessica\_Henry@mercy.com</u>.

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



# **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 Willard Hospital is a community hospital committed to high-quality health care with compassion. We are a 20-bed facility that provides inpatient, outpatient and other healthcare services. Our doctors, nurses and caregivers are committed to helping the communities we serve be well in mind, body and spirit.

Through advanced treatments and cutting-edge technology, we're part of 20-county area hospital system that proudly serves northwest Ohio and southeast Michigan. We provide medical, surgical, and specialty services in the areas of cardiology, neurology, OB/GYN, oncology, orthopedics, urology, and more. We also offer occupational healthcare services, walk-in care clinics, school-based health clinics, and comprehensive imaging and lab services. Additionally, the Mercy Health Willard Hospital LLC is a home health agency affiliated with this facility that serves a wide range of services to people with illnesses and injuries within the area.

Mercy Health Willard Hospital is fully accredited by the Joint Commission of Healthcare Organizations. Following the previous facility expansion, we now house an efficient Emergency Department with an expanded surgical suite and outpatient service area. We also utilize a customized EPIC electronic health record, *CarePATH*, for both inpatient and ambulatory patient information.

### Community Served by Hospital

Mercy Health Willard Hospital serves a geographic area in northwest Ohio and southeast Michigan encompassing Huron County and the cities of Greenwich, Monroeville, New London, North Fairfield Village, Norwalk, Plymouth, Wakeman and Willard. Based upon the county of residence of discharged inpatients, most patients reside in Huron County. This primary service area includes the following ethnic groups: 95.98% Caucasian, 0.97% African American, 0.18% Native American, 0.25% Asian, 0.01% Pacific Islander, 1.63% from other races and 0.99% from two or more races. 3.56% of the population was Hispanic or Latino of any race.

Huron County, Ohio has a total area of 495 square miles. It includes Zip codes 44811, 44826, 44837, 44847, 44850, 44851, 44855, 44857, 44865, 44888, 44889 and 44890. Surrounding counties are Sandusky to the northwest, Seneca to the west, Crawford to the southwest, Erie to the north, Richland to the south, Lorain to the east and Ashland to the southeast.

## **Process and Methods**

## Process and methods to conduct the community health needs assessment:

Mercy Health — Willard Hospital is a key stakeholder and partner of Huron County Health Partners, a collaborative strategic planning process involving many community agencies and coalitions from various sectors. Huron County Health Partners commissioned a Community Health Needs Assessment (CHNA) for Huron County to assess and identify the health needs of the community. The CHNA was conducted by various social service, business and government organizations in Huron County to collect data that reports the health and health behaviors of Huron County residents. Data was collected for this assessment with the assistance of the Hospital Council of Northwest Ohio. That CHNA Report can found at:

#### https://www.huroncohealth.com/\_files/ugd/4b833f\_e95d3bed47c64556a2ad01b606aa164 8.pdf

Since the Huron County CHNA Report data was collected prior to the COVID 19 Pandemic, Mercy Health Willard Hospital leveraged three external data sources to inform the development of the CHNA: Metopio, County Health Rankings, and U.S. Census Bureau data.

Metopio data was sourced in August of 2022. This data looks at the Huron County community from a clinical needs and social determinants of health perspective. The metrics within Metopio are aggregated from publicly available data ranging in date from 2015 to 2021. The majority of this data is sourced from 2019 and afterwards.

Additionally, County Health Ranking (CHR) was used to supplement the data from Metopio. CHR is another repository of publicly available data sources aggregated and visualized to provide an evaluation of the community's public health status by including Health Factors (determinants of health) and Health Outcomes (length and quality of life) in their analysis. County Health Rankings provides both county rankings as well as z-scores for each of the metrics analyzed. The rankings indicated how well each county performed in a particular metric as compared to the other 87 Ohio counties. The z-score measures the number's relationship with the mean, whether higher or lower than state average as a reference. By analyzing the z-score, one can understand the magnitude of the health need whether that be a significant or less significant community health need. This data was also sourced in August of 2022 and includes data from 2010 to 2021. Similarly, the majority of that data is from 2019 and afterwards.

The third source of data leveraged was the U.S. Census Bureau. This data is sourced from July of 2021. The demographics data analyzed includes population, age, sex, race, and ethnicity.

## **External Sources**

- Metopio
- County Health Ranking

• U.S. Census Bureau

## **Collaborating partners**

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

- Firelands Counseling and Recovery Services
- Fisher-Titus Medical Center
- Huron County Health Partners
- Hospital Council of Northwest Ohio
- Huron County Public Health
- Huron County Commissioners
- Huron County Mental Health and Addiction Services (MHAS) Board
- Huron County Schools (School districts of Bellevue, Monroeville, New London,
- Norwalk, South Central, Western Reserve and Willard; St. Paul High and Immaculate Conception)
- National Alliance of Mental Illness (NAMI) of Huron County
- The Bellevue Hospital
- University of Toledo

For supplemental data Mercy Health Willard Hospital collaborated with FORVIS Healthcare Consultants to complete this assessment. FORVIS's role was to aggregate the quantitative market data, conduct stakeholder interviews, identify common health needs, and facilitate the prioritization session. Willard Hospital leadership and community health leaders worked with the consultants throughout the months of August to October 2022.

## **Community Input**

No written comments were received on the previously completed CHNA.

Mercy Health Willard Hospital interviewed three key informants to produce the community input data. These interviews were conducted in September 2022. Key informants interviewed include: a municipal manager, a fire chief, and Mercy Health Willard Hospital leadership. These interviews were conducted virtually. The interviews explored topics such as major health issues, preventable health issues, and barriers to achieving greater health. Additional exploration was done to identify the health concerns impacting adolescents, adults, and the elderly populations specifically.

Significant health needs were identified based on common themes throughout key informant interviews and market data analysis. Where multiple stakeholders indicated there was significant need, that health concern was elevated. Once elevated, the need was validated through the quantitative data analysis. The community input drove the significant health needs and was supplemented by the quantitative market data.

Key themes were identified after evaluating the information gathered in community interviews and the market analysis. Common health concerns in the community include access to healthcare services, mental health and depression, and food and housing insecurity.

Additionally, the major barriers to addressing these issues include lack of transportation, limited health education and literacy, financial barriers, and competing priorites. These key themes should be widely considered throughout the development and implementation of community health plans in Huron County.

# 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
Huron County Public Health	• 2020
	https://www.hcbmhas.org/ files/ugd/635161 720b4a94dcc54 4a48899a5fa4ad11ccd.pdf

Community and Stakeholder Input	Date of data/information
Parks and Recreation Director	• September 14, 2022 – Key Informant Interview
Chief Financial Officer	• September 14, 2022 – Key Informant Interview
Toledo Rural Market at Bon Secours Mercy Health	

Organization providing input	Nature and extent of input	Medically under-served, low-income or minority populations represented by organization
Willard Fire and Rescue Department	Key Informant Interview	Medically underserved, low income, and minority populations
Willard Parks and Recreation	Key Informant Interview	Low income, medically underserved, and minority populations
Mercy Health Willard	Key Informant Interview	Medically underserved, low income, and minority populations

## Significant Community Identified Health Needs

As part of the community identification process, various community health metrics were evaluated to identify the top community health needs. The top needs are listed below and additional analysis of the market can be found in Appendix A that support the findings here and provide more perspective on the community.

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

#### Access to Healthcare Services

#### Capacity and adequacy of service levels

Due to the nature and demographics of the rural environment, the proximity of specialists and other healthcare providers is a barrier to the Huron County residents. Particularly, there is a lack of specialized pediatric service providers in the county which impacts children's ability to receive care in a timely manner. The rural nature of the county also hinders non-local travel due to the lack of public transportation and other private transport limitations. When analyzing mental and medical provider ratios, the gap of providers to patients is considerably larger compared to the Ohio average. For example, the primary care physician ratio for Huron County sits at 2,158 persons per provider, while the Ohio average sits at 1,291 persons. The gap between dental and mental health providers also mimics this deficit in Huron. Lastly, a lack of insurance and minimal community awareness of available resources have remained major barriers to accessing healthcare services.

#### Current service providers or resources

- 1. Mercy Health Willard Hospital healthcare providers
- 2. Mercy Van

#### Health Education and Literacy

#### Capacity and adequacy of service levels

Health education and literacy is essential for the county constituents to understand the importance of preventative health measures and healthy lifestyle choices. Huron County has room for improvement in comparison to the state benchmarks. When assessing the data, Huron County has higher preventable hospitalization rates (4,831), lower vaccination rates (50%), lower high school completion rates (89.2%) and lower college completion rates (55.6%) than the Ohio average (4,338; 51%; 90.8%; and 65.9% respectively). Health education also encompasses the need for broader financial literacy and a greater understanding of the financial implications of insurance policies, plan for unexpected healthcare costs, prioritize annual health screenings, and the right site of care. Willard Hospital and other community stakeholders should consider appropriate channels and language barriers / comprehension to promote health education in a way that is digestible for individuals across all age groups, ethnicities, and socioeconomic statuses.

#### Current service providers or resources

- 1. Patient health information
- 2. Community care medicine program
- 3. Primary care providers

Health education and promotion can be facilitated through many avenues. Primary care providers and insurance administrators often help steer individuals to the right specialist care. There are also community programs, such as the community care medicine program, that promote health education for local citizens. These programs may become more impactful with greater outreach.

#### **Food Insecurity**

#### Capacity and adequacy of service levels

Food insecurity describes the lack of access to food that allows constituents to live an active, healthy lifestyle. It also displays where there may not be healthy food options accessible to the community. Food insecurity is not reserved for only low-income individuals in the community; it affects elderly populations with limited mobility and inconsistent care givers. It also does not exist in isolation. One limitation to these resources is the lack of proximity to rural communities. Often, food banks will be located in more populated areas. The residents in rural areas are more vulnerable to limited healthy food options and do not always have the transportation available to access these resources. Many people experiencing food insecurity are typically experiencing other significant social health needs as well. Huron County has a higher percentage of food insecure individuals (14%) compared to the Ohio average (13.2%).

#### Current service providers or resources

1. Huron County Department of Job and Family Services

- 2. Huron County Creating Healthy Communities
- 3. Local Food Banks

Due to the considerable need, Huron County offers many programs and resources for food insecure residents. The county has local food banks and provides monthly food giveaways for the general public. There is also a local partnership with Second Harvest Food Bank to help facilitate impactful community initiatives. For adolescents in the area, after-school programs provide healthier food options to those in need. For the elderly population, the county has a Meals-on-Wheels program to help as well.

#### Transportation

#### Capacity and adequacy of service levels

The rural nature of Huron County combined with resident's inability to access care, long commutes, and elevated motor vehicle mortaility rates make transportation a significant community need. Many low income individuals and families lack private transportation and must rely on limited public transportation. This has become a considerable barrier to access for those seeking care who may not have a personal vehicle for traveling. Many citizens have resorted to calling the ambulance to receive hospital or healthcare transportion. The practice of utilizing ambulance transportion for minor injuries or illness unnecessarily exhausts the resources of EMS services and produces avoidable ER admissions. Both specialized medical transportation and private transportation issues have become taxing, as many routes do not reach across county lines and there is a lack of regionally specific transport systems overall. Additional transportation issues for Huron County include a high percentage of individuals driving alone with long commutes to work (31.1%) and inflated motor vehicle mortaility rates (17.1 motor vehicle crash deaths per 100,000 population).

#### Current service providers or resources

Transportation resources throughout Huron County include busing for schools, EMS services, and private EMS groups. Mercy Health also has internal transportation entities to help transport patients home after an inpatient stay, which includes, but is not limited to, the Mercy Van. The county has announced more resources will be available next year with the development of the Huron County Transportation Department.

#### **Housing Insecurity**

#### Capacity and adequacy of service levels

Housing insecurity is a significant health need as there is a notable amount of low-income individuals and limited affordable housing options. This community health need encompasses several dimensions of housing problems, which in turn impacts individuals ranging from children to the elderly. In Huron County, many families are experiencing a lower median household income, averaging about \$58,009 per year. Additionally, about 17.7% of families are living in singe-parent households.

The increasing cost of the housing market has imposed heightened pressure on low or fixed-income families. Many individuals and families have competing priorities such as investing in their health (healthy food options, exercise, healthcare services, medication) or housing.

#### Current service providers or resources

- 1. Huron County Metropolitan Housing Authority
- 2. Almost Home
- 3. Norwalk Area United Fund

#### **Consistent Caregivers for the Elderly Population**

#### Capacity and adequacy of service levels

The elderly population is in need of more comprehensive caregiver services. Many elderly people are lacking the proper support network from the community and family members. Those that are not attached to community groups often do not have solid, accountable relationships—or people to check in on their wellbeing. Many of the local senior centers are still rebounding from COVID-19, meaning they may not have the capacity or resources to host activities. Although there may be caregivers in the county, the resources provided to these individuals must be expanded in order for the relationship to remain mutually benefical. 18.1% of the Huron County population already over the age of 65 years old and is expected to grow as baby boomers age into the 65+ age bracket. Caregivers for the elderly population will remain critical to the livelihood of many citizens.

#### Current service providers or resources

- 1. Area Agency on Aging: Ohio District Five
- 2. Catholic Charities
- 3. Adult Day Care: Norwalk

Local senior centers that provide housing and care for the elderly are available throughout Huron County. The police department in Huron County also has a Senior Watch program in conjunction with local senior centers; they facilitate activities and check-ins with the elderly population.

## Social Health Need – Individual Level Non-Clinical Needs

#### **Mental Health and Depression**

Capacity and adequacy of service levels

Mental health has risen as a significant health need following the COVID-19 pandemic. 22.4% of Huron County residents reported feelings of depression compared to the state average of 21.7%.

The downstream effects of social isolation and loss of face-to-face interaction have impacted the population across all age groups. The average number of poor mental health days in Huron County is 5.5 (this is the average number of mentally unhealthy days reported in the last 30 days). As many people are facing domestic/family issues, unemployment, and an overall lack of personal motivation, mental health has risen as a top concern. Additionally, mental health and wellness is a large community and individual health need impacting other social, emotional, and physicial health needs. However, Huron County does not have the appropriate access to mental health resources and mental health providers to combat this issue.

#### Current service providers or resources

- 1. Mental health counselors
- 2. Firelands Counseling and Recovery
- 3. NAMI Huron County
- 4. Fisher-Titus Behavioral Health

#### **Social Health and Connection**

#### Capacity and adequacy of service levels

Social health is also a major factor impacting the mental health and longevity of people within Huron County. Social connection has been linked to lower levels of anxiety and depression as well as a longer life span. Huron County is ranked 56 out of 88 counties in Ohio when it comes to social and economic factors. Additionally, social media has become extremely influential in the daily lives of the average person and present new challenges of online bullying. Many people, ranging from children to the elderly population, are experiencing a weakened social support network due to both physical and locational isolation. In Huron County, 10.5% of adolescents are considered to be disconnected from family and social supports, compared to the Ohio average of 6.1%. Elderly populations may also experience elevated social isolation as their family members relocate to different areas.

#### Current service providers or resources

- 1. Huron County Family & Children First Council
- 2. Huron County Department of Job & Family Services
- 3. Reach Our Youth
- 4. Fueling Youth with Resources & Education F.Y.R.E.

## Significant Clinical Health Needs

#### **Chronic Diseases**

#### Capacity and adequacy of service levels

Chronic disease and other physical health issues are prevalent in this community. Coupled with other social determinants of health, chronic diseases emerge as a result of other issues stemming from mental, social, and physical health problems. For example, 36.4% of adults in Huron County are considered obese. Additionally, 30.2% of adults reported no leisure-time physicial activity and 30.8% have high blood pressure. This is despite the fact that 61.9% of residents have access to exercise opportunities. These behavioral factors can contribute to the increasing development of chronic disease (heart disease, diabetes, obesity) within the community. There are not enough resources to address these issues and individuals don't always know what resources are available. Increased health education could allow the community to make healthier and informed decisions.

#### Current service providers or resources

- 1. Chronic disease management programs
- 2. Mercy Health Willard Hospital
- 3. Fisher-Titus Hospital
- 4. Huron County Public Health

#### **Drug and Substance Abuse**

#### Capacity and adequacy of service levels

Drug and/or substance abuse has remained a top community issue within the county. More specifically, opioids and alcohol abuse are still very common within the adolescent and adult populations. Overdose and suicide deaths are being reported at heightened levels. In Huron County, the drug overdose mortality rate sits at 45.8 deaths per 100,000 population, compared to the state average of 38.3. This unsettling metric can be attributed to other health needs such as mental health, family stability, health literacy, and addiction. The current rehabilitation centers located in Huron do not provide adequate services levels and could benefit from additional resources.

#### Current service providers or resources

- 1. Mercy Health Willard Hospital
- 2. Local Medicaid-driven rehabilitation center
- 3. Firelands Counseling and Recovery
- 4. Fisher-Titus Behavioral Health
- 5. NAMI Huron County

Huron County currently houses a single, Medicaid-driven rehabilitiation center. Although this resource is available, the facility has room for structural improvement and investment.

## **Prioritization of Health Needs**

The significant community health needs were prioritized through a working session where a collection of community health leaders, hospital leadership, and local community organization leaders were present. Willard Hospital leaders and stakeholders gathered in working sessions to review community health findings and prioritize community health needs. The working session was conducted virtually on September 16, 2022 and lasted for one hour. Each significant community health need was objectively assessed by stakeholders through an evaluation of the need's significance to the community and the hospital's ability to impact the need. The two criteria, significance and ability to impact, were equally weighted in the prioritization process. Session participants responded to an anonymous poll where they ranked each signicant need on a scale of 1 to 10. The two dimensions were added together to receive an overall ranking; the significant needs with the greatest combined ranking represent those which stakeholders felt posed the greatest health concern to the community and Willard Hospital had the ability to impact. The top five greatest health needs from this process were identified as the prioritized health needs while all others were recognized as significant and still impacting the surrounding community.

Based on all 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

#### Access to Healthcare Services

Providing better access points to healthcare in this community is vital to enhancing the quality of life for Huron County citizens. The resources that the community and Willard hospital provide can have a significant impact on population health outcomes. If more resources are available in the community, the social and physical environments within the community will help to promote good health for all. For Huron County, the promotion of health education, better transportation, increased provider access, and insurance literacy will help to improve the overall health of the community.

#### Health Education and Literacy

Health education and literacy is extremely influential to the health of the community from a preventative perspective. Health literacy impacts how people receive, interpret, or act on health information.

Promoting health education and providing health literacy opportunities will garner a more knowledgeable community that is able to successfully find and access care, digest and

interpret healthcare information, prevent certain health conditions, make informed decisions, and effectively manage the health issues that arise. Additionally, financial literacy and understanding insurance can also complement this resource. As community members become more informed about their health, they must also become more aware and comfortable with the accompanying financial aspect.

## **Prioritized Social Health Needs**

#### **Mental Health and Depression**

Mental health and depression impact the daily lifestyle choices of the people within Huron County. The COVID-19 pandemic revealed how the emotional, psychological, and social well-being of each individual impacts their physical health. It also became an integral part of population health measurements as many community health issues stem from poor mental health. This community health need was prioritized throughout all age groups as it poses a significant influence on many individual health behaviors. When thinking about healthy behaviors and mental health, community leaders shared that many residents of Huron County exhibit a lack personal motivation and ownership of their health and lifestyle decisions, which has trickled down into more destructive health and lifestyle practices. These issues can be mitigated through the implementation and application of county and hospital resources.

### **Prioritized Clinical Health Needs**

#### **Chronic Disease**

Chronic disease management is a prioritized health need because its prevalence is still prominent in the Huron County community. The poor physical health practices of individuals have likely accelerated the development of certain illnesses. Chronic conditions impacting this population include obesity, high blood pressure, diabetes, and depression. Many individuals who are managing chronic diseases also experience challenges with mental health and the downstream effects of long-term disease and medication use. Poor diet, poor lifestyle choices, mental health, lack of exercise, and lack of intrinsic motivation all contribute to the ongoing community health issues seen. There are parks, trails, and food banks within the community to help mitigate this issue, but health education and mental health still remain as barriers to utilization. County and Willard Hospital leadership have identified the impact their position plays on the course of improving chronic disease.

#### **Drug and Substance Abuse**

Drug and substance abuse is prioritized as a clinical health need because this health behavior leads to severe physical health issues. Substance abuse disorders warrant comprehensive clinical care and often, care coordination across the healthcare continuum. As we see constituents of Huron County continue to use and abuse substances, we see an increase in the need for clinical services, counseling, and rehabilitation services. As Huron community members expand the preventative resources, the hospital must also consider expanding clinical resources such as the service providers, medications, screening exams and lab, etc.

## 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.

### Prioritized Social Determinants of Health Needs

#### Access to Healthcare Services

Mercy Health Willard Hospital serves as a community resource for healthcare services. They offer extensive medical services, mental health services, health screenings, and other valuable assets for people within the community. Mercy Health also has internal transportation entities, such as the Mercy Van, and affiliate with local EMS groups to provide better access for patients.

#### **Health Education and Literacy**

Mercy Health Willard Hospital care providers offer health information to patients as a part of their care routine. They also provide clarity on the financial aspects of a healthcare visit when necessary. Further guidance and education on health services, locations of specialized care, preventative care measures, healthy eating habits, and exercise programs are available throughout the hospital. Additionally, the community care medicine program advocates for health education and promotes healthy living throughout Huron County.

### **Prioritized Social Health Needs**

#### **Mental Health and Depression**

Mercy Health Willard Hospital provides healthcare services for patients suffering from mental health and depression. Mental health providers offer treatment across the care continuum when possible.

### **Prioritized Clinical Health Needs**

#### **Chronic Disease**

Mercy Health Willard Hospital provides healthcare services specifically for chronic disease management. Qualified caregivers affiliated with affected patients provide treatment plans,

recommended medications, detailed health information, and guidance on where to pursue other local resources.

#### **Drug and Substance Abuse**

Mercy Health Willard Hospital offers medical services for those patients and community members who suffer from illnesses related to drug and substance abuse. Necessary and efficient referrals to local counseling and rehabilitation centers are also factored into treatment plans. Additionally, Huron County houses a local, Medicaid-driven rehabilitation center that focuses on holistic treatment plans and behavioral health changes for those patients in need.

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

### **Physical Health**

#### Initiative/Impact

Mercy Health Willard offers Dietitian services with a physician referral and offers free health screenings to all employees. The number of referrals were not tracked in 2021.

Mercy Health Willard conducts community health education and support groups, health fairs and screening for our community. This program did not take place in 2021 due to COVID.

Mercy Health Willard will partner with Mercy Health Willard Medical Staff to provide patients with appropriate educational material regarding nutrition, fitness and weight control. Also make referrals to the CHIP program. This program did not take place in 2021 due to COVID.

Mercy Health Willard offers a migrant health screen clinic twice a year. This program did nto take place in 2021 due to COVID.

## Mental Health

#### Initiative/Impact

Counseling services are available through Firelands Counseling and Recovery Services Monday through Friday and Vivitrol Clinic is available each Friday. Clinic located on second floor of Mercy Health Willard Hospital. This program is no longer available at the hospital

Firelands Counseling also provides SBIRT Program (Screening, Brief Intervention, Referral and Treatment) when appropriate in the Emergency Department and Primary Care at Mercy Health Willard. This program was put on hold in 2020.

Mercy Health Willard Mental Health and Addiction workgroup will provide educational materials and training to physicians, staff and the community to enhance awareness of mental health and addiction issues. This program was put on hold in 2020.



The appendix includes market data compiled and leveraged for the completion of this assessment.

## Appendix

### **Metopio Market Data**

	Health Factors			SDOH	
Metric	Huron County	OH Benchmark	Metric	Huron County	OH Benchmark
High Blood Pressure	30.8%	31.7%	Below Federal Poverty Line	12.0%	13.7%
Healthy Weight Status (% of adults with Obesity)	36.4%	36.5%	36.5% Non- Hispanic White Asian or Pacific Islander	10.8% 30.1%	10.5% 12.6%
Depression	22.4%	21.7%	Median Household Income	\$58,009	\$61,249
Cigarette Smoking	24.0%	22.1%	Violent Crime	<b>45.1</b>	<b>300.8</b> per 100,000
<b>Preterm Births</b>	10.8%	12.0%	Food Insecurity	18.8%	19.0%

### **County Health Rankings Market Data**

Health Measure	Huron County: Z-Score and Rank		
Health Outcomes	Z-Score	0.05	
	Rank	48	
Uselth Fasters	Z-Score	0.21	
Health Factors	Rank	55	
Longth of Life	Z-Score	0.06	
Length of Life	Rank	53	
Quality of Life	Z-Score	-0.01	
Quality of Life	Rank	44	
Liselth Rehaviors	Z-Score	-0.01	
Health Behaviors	Rank	41	
Clinical Care	Z-Score	0.05	
Clinical Care	Rank	59	
Social & Economic Factors	Z-Score	0.12	
	Rank	56	
Dhysical Environment	Z-Score	0.05	
Physical Environment	Rank	76	

**Z-score**: The Z-score, or standard score, is the number of standard deviations a given data point lies above or below mean.

**Rank**: The position comparing Huron County's performance in a metric relative to the performance of all 88 Ohio counties. The lower the rank, the better the county performed.

Vears of Potential Life Lost Rate8,9988,713Life Expectancy75.776.5Age-adjusted Death Rate440420% Fair or Poor Health21.318.1Average Number of Physically Unhealthy Days4.74.2% Frequent Physical Distress14.613Average Number of Mentally Unhealthy Days5.55.2% Frequent Mental Distress18.317.1% Adults with Diabetes1110.3Tobacco Use% Adults with Dibetes31.627.6% Hoysically Inactive31.627.6% How Strokers61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9% Uninsured8.97.9Primary Care Physicians Ratio2,158.11,291.1Dentist Ratio2,481.14,3384,338Quality of Care% With Annual Mammogram4345% Vaccinated55.565.95.9Spending per-pupil\$12,182\$12,576Employment% Unemployed89.290.8Kompleted High School89.290.8Support% Disconnected Youth10.56.1Motor Vehicle Mortality Rate10.496Community Safet% Children in Single-Parent Households27.726.9Support% Dire Alone to Work85.281.5Motor Vehicle Mortality Rate11.710.410.6Juvenile Arrest Rate11.710.4<	Metric Category	Metric	Huron County	OH Average
Age-adjusted Death Rate 440 420   Age-adjusted Death Rate 440 420   Age-adjusted Death Rate 21.3 18.1   Average Number of Physically Unhealthy Days 4.7 4.2   Werage Number of Mentally Unhealthy Days 5.5 5.2   % Frequent Physical Distress 11.6 13   Average Number of Mentally Unhealthy Days 5.5 5.2   % Frequent Mental Distress 18.3 17.1   % Adults with Diabetes 11 10.3   Diet and Exercise % Adults with Obesity 36.4 34.6   % Frequent Mental Distress 14.4 13.2   Mith Access to Exercise Opportunities 61.9 77.2   % Food Insecure 14 13.2   Access to Care % Uninsured 2,158:1 1,291:1   Dentist Ratio 2,158:1 1,291:1   Dentist Ratio 2,182 13.66   Munisured 70 5 5   Multi Annual Mammogram 43 45   % Completed High School 89.2		Years of Potential Life Lost Rate	8,998	8,713
Quality of Life% Fair or Poor Health21.318.1Average Number of Physically Unhealthy Days4.74.2% Frequent Physical Distress14.613Average Number of Mentally Unhealthy Days5.55.2% Frequent Mental Distress1110.3Tobacco Use% Smokers2421.8% Adults with Diabetes1110.3Matter State% Mults with Obesity36.4% Food Insecure31.627.6% With Access to Exercise Opportunities61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9Matter Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Primary Care Physicians Ratio2,251346:1Quality of Care% With Annual Mammogram4345% Vaccinated5051% Completed High School89.290.8% Spending per-pupil\$12,182\$12,576Employment% Unemployed95.58.1% Disconnected Youth10.56.1Injury Death Rate10496Support% Dive Alone to Work85.281.5Mousing & TransitMotor Vehicle Mortality Rate17.110.4% Broadband Access83.184.538.3Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5 <t< td=""><td>Length of Life</td><td>Life Expectancy</td><td>75.7</td><td>76.5</td></t<>	Length of Life	Life Expectancy	75.7	76.5
Quality of LifeAverage Number of Physically Unhealthy Days4.74.2% Frequent Physical Distress14.613Average Number of Mentally Unhealthy Days5.55.2% Frequent Mental Distress18.317.1% Adults with Diabetes1110.3Tobacco Use% Smokers2421.8% Adults with Obesity36.434.6% Physically Inactive31.627.6% With Access to Exercise Opportunities61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9% Uninsured8.97.97.9Primary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Preventable Hospitalization Rate4,8314,338Quality of Care% Completed High School89.290.8% Some College55.665.955.6Spending per-pupil\$12,182\$12,576Femployment% Unemployed9.58.1% Disconnected Youth10.56.1Injury Death Rate10496SupportSuicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4% Nort Vehicle Mortality Rate17.110.4% Nort Vehicle Mortality Rate17.110.4% Nort Vehicle Mortality Rate17.110.4% Broadband Access83.184.5 <t< td=""><td></td><td>Age-adjusted Death Rate</td><td>440</td><td>420</td></t<>		Age-adjusted Death Rate	440	420
Quality of Life% Frequent Physical Distress14.613Average Number of Mentally Unhealthy Days5.55.2% Frequent Mental Distress18.317.1% Adults with Diabetes1110.3Tobacco Use% Smokers2421.8% Adults with Obesity36.434.6% Physically Inactive31.627.6% With Access to Exercise Opportunities61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9% Uninsured8.97.9Primary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Preventable Hospitalization Rate4,8314,338% Vaccinated5051% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1% Disconnected Youth10.56.1Munity SafetySuicide Rate (Age-Adjusted)17.8Support% Disconnected Youth10.56.1Mousing & Transit% Drive Alone to Work85.281.5Mousing & Transit% Broadband Access83.184.5Accese83.184.536.434.5AcceseBarl7.110.4% Broadband Access% Drive Alone to Work85.281.536.5Motor Vehicle Mortality Rate17.110.		% Fair or Poor Health	21.3	18.1
Quality of LifeAverage Number of Mentally Unhealthy Days5.55.2% Frequent Mental Distress18.317.1% Adults with Diabetes1110.3Tobacco Use% Smokers2421.8% Adults with Obesity36.434.6% Physically Inactive31.627.6% With Access to Exercise Opportunities61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9% Uninsured8.97.9Primary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Preventable Hospitalization Rate4,8314,338% Vuith Annual Mammogram4345% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1% Disconnected Youth10.56.1Injury Death Rate10.496Support% Disconnected Youth10.56.1Motor Vehicle Morality Rate41.733.4% Soroable to Work85.281.5Motor Vehicle Morality Rate17.110.4% Broaband Access83.184.5Access83.184.5Motor Vehicle Morality Rate45.838.3Motor Vehicle Morality Rate17.110.4% Broaband Access83.184.5Motor Vehicle Morality Rate		Average Number of Physically Unhealthy Days	4.7	4.2
Average Number of Mentally Unhealthy Days5.55.2% Frequent Mental Distress18.317.1% Adults with Diabetes1110.3Tobacco Use% Smokers2421.8% Adults with Obesity36.434.6% Physically Inactive31.627.6% With Access to Exercise Opportunities61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9% Uninsured8.97.9Primary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Preventable Hospitalization Rate4,8314,338Quality of Care% With Annual Mamogram4345% Vaccinated5051% Completed High School89.290.8% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Juvenile Arrest Rate41.733.4Housing & Transit% Drive Alone to Work85.281.5Alcohol and Drug Use% Broadband Access83.184.5Alcohol and Drug UseGender Pay Gap0.750.79	Quality of Life	% Frequent Physical Distress	14.6	13
% Adults with Diabetes1110.3Tobacco Use% Smokers2421.8% Adults with Obesity36.434.6% Physically lnactive31.627.6% With Access to Exercise Opportunities61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9% Uninsured8.97.9Primary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Quality of Care% With Annual Mamogram4345% Completed High School89.290.8Feducation% Some College55.6655.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social% Disconnected Youth10.56.1Injury Death Rate10496Support% Dirice Alage-Adjusted)17.814.6Juvenile Arrest Rate41.733.4% Obrive Alone to Work85.281.5Motor Vehicle Mortality Rate17.110.4% Drive Alone to Work85.281.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3NermaGender Pay Gap0.750.79	Quality of Life	Average Number of Mentally Unhealthy Days	5.5	5.2
Tobacco Use% Smokers2421.8Model Section 100 (March 100 (Mar		% Frequent Mental Distress	18.3	17.1
Diet and Exercise% Adults with Obesity36.434.6% Physically Inactive31.627.6% With Access to Exercise Opportunities61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9% Uninsured8.97.9Primary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Preventable Hospitalization Rate4,8314,338% Vaccinated5051% Completed High School89.290.8% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Uningle-Parent Households27.726.9% Disconnected Youth10.56.11Injury Death Rate10496Support% Disconnected Youth10.56.1Motor Vehicle Mortality Rate41.733.4% Drive Alone to Work85.281.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3		% Adults with Diabetes	11	10.3
Diet and Exercise% Physically Inactive31.627.6% With Access to Exercise Opportunities61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9Access to Care% Uninsured8.97.9Primary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Preventable Hospitalization Rate4,8314,338% With Annual Mammogram4345% Vaccinated5051% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Injury Death Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Housing & TransitMotor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79	Tobacco Use	% Smokers	24	21.8
Diet and Exercise% Physically Inactive31.627.6% With Access to Exercise Opportunities61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9Access to Care% Uninsured8.97.9Primary Care Physicians Ratio2,158:11,291:1Dentis Ratio2,899:11,566:1Dentis Ratio725:1346:1Mental Health Provider Ratio725:1346:1Mental Health Provider Ratio725:1346:1You Care Physicians Ratio5051Mental Health Provider Ratio5051% Vaccinated5051% Vaccinated5051% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Onempleyed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9Motor Vehicle Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Housing & TransitMotor Vehicle Mortality Rate45.838.3Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3Alcohol and Drug UseDrug Overdose Mortality Rate0.750.79		% Adults with Obesity	36.4	34.6
% With Access to Exercise Opportunities61.977.2% Food Insecure1413.2Sexual ActivityTeen Birth Rate24.120.9Access to Care% Uninsured8.97.9Primary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Preventable Hospitalization Rate4,8314,338% With Annual Mammogram4345% Vaccinated5051% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1% Disconnected Youth10.56.1Injury Death Rate10496SupportSuicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4% Drive Alone to Work85.281.5Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.8IncomeGender Pay Gap0.750.79	Distand Francisco		31.6	27.6
Sexual ActivityTeen Birth Rate24.120.9Access to Care% Uninsured8.97.9Primary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Quality of CarePreventable Hospitalization Rate4,8314,338% With Annual Mammogram4345% Vaccinated5051% Completed High School89.290.8% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Disconnected Youth10.56.1Injury Death Rate100496Sucide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4% Drive Alone to Work85.281.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79	Diet and Exercise	% With Access to Exercise Opportunities	61.9	77.2
Access to Care% Uninsured8.97.9Primary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Quality of Care% With Annual Mammogram4345% Vaccinated5051% Completed High School89.290.8% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Injury Death Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4% Drive Alone to Work85.281.5Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79		% Food Insecure	14	13.2
Access to CarePrimary Care Physicians Ratio2,158:11,291:1Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Quality of CarePreventable Hospitalization Rate4,8314,338% With Annual Mammogram4345% Vaccinated5051% Completed High School89.290.8% Some College55.665.9% Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1% Disconnected Youth10.56.1Support% Disconnected Youth10.56.1Murpi Parest Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Housing & TransitMotor Vehicle Mortality Rate17.110.4% Broadband Access83.184.538.3Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79	Sexual Activity	Teen Birth Rate	24.1	20.9
Access to CareDentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Quality of CarePreventable Hospitalization Rate4,8314,338% With Annual Mammogram4345% Vaccinated5051% Completed High School89.290.8% Some College55.665.9% Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Injury Death Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4% Drive Alone to Work85.281.5Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79		% Uninsured	8.9	7.9
Dentist Ratio2,899:11,566:1Mental Health Provider Ratio725:1346:1Auguality of CarePreventable Hospitalization Rate4,8314,338% With Annual Mammogram4345% Vaccinated5051% Completed High School89.290.8% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Juvenile Arrest Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79		Primary Care Physicians Ratio	2,158:1	1,291:1
Quality of CarePreventable Hospitalization Rate4,8314,338% With Annual Mammogram4345% Vaccinated5051% Completed High School89.290.8% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Injury Death Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79	Access to Care	Dentist Ratio	2,899:1	1,566:1
Quality of Care% With Annual Mammogram4345% Vaccinated5051% Completed High School89.290.8% Some College55.665.9% Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Murpi Death Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79		Mental Health Provider Ratio	725:1	346:1
% Vaccinated5051% Completed High School89.290.8% Some College55.665.9% Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Support% Disconnected Youth10.496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79		Preventable Hospitalization Rate	4,831	4,338
Education% Completed High School89.290.8% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9% Disconnected Youth10.56.1Injury Death Rate100496Sucicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Housing & TransitMotor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79	Quality of Care	% With Annual Mammogram	43	45
Education% Some College55.665.9Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9Muser Mark10.56.110.56.1Support% Disconnected Youth10.56.1Muser Mark1049696Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79		% Vaccinated	50	51
Spending per-pupil\$12,182\$12,576Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9% Disconnected Youth10.56.1Injury Death Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79		% Completed High School	89.2	90.8
Employment% Unemployed9.58.1Family and Social Support% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Injury Death Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Housing & TransitMotor Vehicle Mortality Rate17.110.4Alcohol and Drug UseDrug Overdose Mortality Rate83.184.5IncomeGender Pay Gap0.750.79	Education	% Some College	55.6	65.9
Family and Social Support% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Injury Death Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4% Drive Alone to Work85.281.5Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79		Spending per-pupil	\$12,182	\$12,576
Family and Social Support% Children in Single-Parent Households27.726.9Support% Disconnected Youth10.56.1Injury Death Rate10496Suicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4% Drive Alone to Work85.281.5Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79	Employment		9.5	8.1
Support% Disconnected Youth10.56.1March March MarchInjury Death Rate10496Community SafetySuicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79	Family and Social	% Children in Single-Parent Households	27.7	26.9
Community SafetySuicide Rate (Age-Adjusted)17.814.6Juvenile Arrest Rate41.733.4Housing & Transit% Drive Alone to Work85.281.5Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3Gender Pay Gap0.750.79			10.5	6.1
Juvenile Arrest Rate41.733.4Housing & Transit% Drive Alone to Work85.281.5Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79		Injury Death Rate	104	96
Juvenile Arrest Rate41.733.4Housing & Transit% Drive Alone to Work85.281.5Motor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79	Community Safety		17.8	14.6
Housing & TransitMotor Vehicle Mortality Rate17.110.4% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3Gender Pay Gap0.750.79			41.7	33.4
% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79		% Drive Alone to Work	85.2	81.5
% Broadband Access83.184.5Alcohol and Drug UseDrug Overdose Mortality Rate45.838.3IncomeGender Pay Gap0.750.79	Housing & Transit	Motor Vehicle Mortality Rate	17.1	10.4
Gender Pay Gap 0.75 0.79			83.1	84.5
Gender Pay Gap 0.75 0.79	Alcohol and Drug Use	Drug Overdose Mortality Rate	45.8	38.3
Income			0.75	0.79
	Income		56.6	35.8

## **Board Approval**

The Mercy Health – Willard Hospital 2022 Community Health Needs Asses approved by the Mercy Health North Board on September 27, 2022.

Board Signature: Nov. 18, 2022 Date:

For further information or to obtain a hard copy of this Community Health Needs Assessment (CHNA) please contact: Jessica Henry at Jessica\_Henry@mercy.com

Mercy Health CHNA Website:

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