

2016 Community Health Needs Assessment

MERCY HEALTH — REGIONAL MEDICAL CENTER, LORAIN, OHIO

MERCY HEALTH — ALLEN HOSPITAL, OBERLIN, OHIO



Mercy Health, formerly Catholic Health Partners, has been committed to the communities it serves for more than 150 years. 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) for each of our hospitals. The most recent assessments, completed by Mercy Health and community leaders, include quantitative and qualitative data that guide both our community benefit and strategic planning.

The following document is a detailed CHNA for Mercy Health — Regional Medical Center and Mercy Health — Allen Hospital. Mercy Health has responded to community health needs as part of a five-year strategic plan that concludes in 2018. In recent years, Mercy Health has invested in building and renovating hospitals and ambulatory facilities to serve patients and communities in Ohio and Kentucky. Our ministry continues to invest in our

CarePATH electronic health record to ensure seamless and integrated care, no matter the provider or the setting. We also operate health and fitness centers, hospice facilities, outpatient clinics and senior living facilities...all to improve the health of our communities.

Mercy Health also contributes about \$1 million per day in community benefit services as we carry out our Mission of extending care to the poor and under-served.

Mercy Health — RMC and Mercy Health — Allen strive to meet the health needs of the people of Lorain County. Please read the document's introduction below to better understand the health needs that have been identified.

Written comments regarding the health needs that have been identified in the current CHNA should be directed to <https://www.mercy.com/global/about-us/contact-us>.

Mercy Health has identified the greatest needs among each of our hospital's communities. This ensures our resources for outreach, prevention, education and wellness are directed toward opportunities where the greatest impact can be realized.

Table of contents

| | |
|---|----|
| INTRODUCTION | 3 |
| Community served by hospital | 3 |
| Information and data considered in identifying potential need | 4 |
| PROCESS AND METHODS | 5 |
| Process for Gathering and Analyzing Data/Information | 5 |
| 1. External sources | 6 |
| 2. Collaborating partners | 6 |
| Community Input | 6 |
| 1. Use of community input | 6 |
| 2. Organizations providing input | 9 |
| EXECUTIVE SUMMARY | 14 |
| Significant health needs | 14 |
| 1. Health insurance coverage | 14 |
| 2. Leading causes of death | 14 |
| 3. Exercise and weight status | 14 |
| 4. Use of alcohol, tobacco and other drugs | 15 |
| 5. Preventive healthcare and health screenings | 15 |
| 6. Mental health and suicide | 15 |
| 7. Maternal and child health | 16 |
| 8. Access to care | 16 |
| Prioritized health needs | 18 |
| 1. Exercise and weight status | 18 |
| 2. Leading causes of death | 18 |
| 3. Access to care | 18 |
| 4. Use of alcohol, tobacco and other drugs among adults | 18 |
| 5. Preventive healthcare | 19 |
| 6. Use of alcohol, tobacco and drugs among youth | 19 |
| 7. Maternal and child health | 19 |
| 8. Mental health | 19 |
| Resources available | 20 |
| PROGRESS ON 2013 CHNA | 22 |

Introduction

JOINT CHNA

§1.501(r)-3(b)(6)(i)

This is a “joint CHNA report,” within the meaning of Treas. Reg. §1.501(r)-3(b)(6)(v), by and for Mercy Health — Regional Medical Center and Mercy Health — Allen Hospital. This report reflects the hospitals’ collaborative efforts to conduct an assessment of the health needs of the community they serve. That assessment included seeking and receiving input from that community.

COMMUNITY SERVED BY HOSPITALS

T.R. §1.501(r)-3(b)(1)(i) and (3)

Mercy Health — RMC and Mercy Health — Allen are dedicated to continuing the healing ministry of Jesus Christ. Together, the hospitals are steadfast in their mission of caring for the poor, the elderly and the vulnerable members of the community, and to improving the health of the many communities they serve. Mercy Health — RMC and Mercy Health — Allen strive to ensure that all residents of Lorain County (plus small populations in Erie and Huron counties) have access to advanced medical technology and quality care.

This is the first time Mercy Health — RMC and Mercy Health — Allen have prepared a joint CHNA report. For the reasons below, we believe it makes more sense to define our community as the entirety of Lorain County and prepare this joint community health needs assessment report:

- Primary and secondary service areas of both Mercy Health — RMC and Mercy Health — Allen lie almost exclusively within Lorain County, and small portions of Erie and Huron counties were also consulted during the CHNA.
- Although Mercy Health — RMC and Mercy Health — Allen are separately licensed, they jointly meet the needs of Lorain County residents.
- Government agencies participating in the hospitals’ joint CHNA operate and provide services county wide.
- The hospitals’ joint CHNA was done county wide. Some 25 organizations serving residents of the entire county also gave input.

Mercy Health — RMC and Mercy Health — Allen aim to serve our patients and each other in ways that reflect our core values of Compassion, Excellence, Human Dignity, Justice, Sacredness of Life and Service. Our Mission is to extend the healing ministry of Jesus by improving the health of our communities with emphasis on people who are poor and under-served.

The hospitals provided over \$23M in community benefit in 2014, with almost \$22M directly benefitting those living in poverty. In 2015, community benefit was almost \$22M, with over \$19M directly benefitting those living in poverty.

The real value of this contribution lies not in dollars, but in the commitment of the staff members, physicians, volunteers, board members and other community leaders who work on behalf of Mercy Health — RMC and Mercy Health — Allen. These people bring our Mission to life.

INFORMATION AND DATA CONSIDERED IN IDENTIFYING POTENTIAL NEED

T.R. §1.501(r)-3(b)(1)(ii) and (5)

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

| Public health departments (T.R. §1.501(r)-3(b)(5)(i)(a)) | Date of data/information |
|--|--------------------------|
| Elyria City Health District | 2015-2016 |
| Lorain City Health Department | 2015-2016 |
| Lorain County General Health District | 2015-2016 |

| At-risk populations (T.R. §1.501(r)-3(b)(5)(i)(b)) | Date of data/information |
|--|--------------------------|
| Alcohol and Drug Addiction Services Board of Lorain County | 2015-2016 |
| Lorain County Board of Mental Health | 2015-2016 |
| Lorain County Health & Dentistry | 2015-2016 |

| Additional sources of input (T.R. §1.501(r)-3(b)(5)(ii)) | Date of data/information |
|--|--------------------------|
| Lorain County Metro Parks | 2015-2016 |
| Lorain County Office on Aging | 2015-2016 |
| Public Services Institute of Lorain County Community College | 2015-2016 |
| University Hospitals Elyria Medical Center | 2015-2016 |

Process and methods

PROCESS FOR GATHERING AND ANALYZING DATA/INFORMATION

T.R. §1.501(r)-3(b)(6)(ii)

Process and methods to conduct the community health needs assessment:

T.R. §1.501(r)-3(b)(6)(ii)

Mercy Health — RMC and Mercy Health — Allen determined that it would be most efficient for it to develop its community health needs assessment through both collaborative efforts and its own research and analysis efforts. This would allow the hospitals to build upon earlier efforts to assess Lorain County health needs and develop strategies to address those needs. Additionally, the hospitals asked for input and expertise from key community stakeholders. We applied these to the results of a collaborative health needs survey as well as in prioritizing the needs of the community. The hospitals continue to work with other agencies in Lorain County to meet goals in the county-wide Community Health Improvement Plan. This plan resulted from the 2011 Lorain County Community Health Assessment Project.

The hospitals' most notable collaboration was the 2015 Lorain County Community Health Assessment Project (LCCHAP). Based on a county-wide assessment, the project developed a report on county-wide health needs (LCCHAP Report). The Hospital Council of Northwest Ohio (HCNO) coordinated and managed the LCCHAP and produced the LCCHAP Report. HCNO, a nonprofit hospital association in Toledo, Ohio, (under contract with Lorain County) also conducted the 2011 Lorain County Community Health Assessment survey. The following organizations participated in the LCCHAP: Alcohol and Drug Addiction Services Board of Lorain County, Elyria City Health District, Lorain City Health Department, Lorain County Board of Mental Health, Lorain County General Health District, Lorain County Health & Dentistry, Lorain County Metro Parks, Lorain County Office of Aging, Mercy Health — RMC, Mercy Health — Allen, Public

Services Institute of Lorain County Community College and University Hospitals Elyria Medical Center.

The LCCHAP questions were modeled on those in surveys conducted by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factors Surveillance System (BRFSS). The Hospital Council of Northwest Ohio collected the data, coordinated the health assessment process and integrated sources of primary and secondary data into the final report. A written, cross-sectional survey conducted between August and November 2015 was the main source of primary data. Local agencies, especially those serving the underserved, low-income, minority or chronic-disease populations, were invited to participate in the instrument-development process. This process was a series of meetings conducted by the Project Coordinator from the Hospital Council of Northwest Ohio. During these meetings, participants reviewed questions from the 2011 survey and voted to decide which to keep for the 2015 assessment. They also discussed banks of potential survey questions from the BRFSS. Based on input from the planning committee, the Project Coordinator composed drafts of the surveys which contained 116 items for the adult survey. Health education researchers at the University of Toledo, Ohio, reviewed and approved drafts.

Mercy Health — RMC and Mercy Health — Allen also engaged The Public Services Institute of Lorain County Community College (PSI), to prepare a detailed, comprehensive summary report on data generated by the LCCHAP (PSI Report). PSI, a division of Lorain County Community College, provides education, training and expert facilitation of group and community processes that link higher education with governments, nonprofit organizations and civic leadership. They based these services on research to address issues of importance in Lorain County, Northeast Ohio, and the entire state using data and information as a part of planning, problem-solving and decision making. PSI performed previous county assessments using external data sources and has an intimate working knowledge of Lorain County and its residents' health. They conducted 25 interviews of people representing constituencies throughout Lorain County (Key Stakeholder Interviews). These interviews built on the LCCHAP by developing a shared understanding around the data and identifying and prioritizing key assets and issues for the community. The intent of the

stakeholder interviews was to prioritize health-related needs based on severity of the problems, size of populations affected, community capacity to address the problems and availability of data to track and monitor outcomes. PSI included the results of those interviews in the PSI Report.

The hospitals also drew on the work of Communities That Care of Lorain County (CTC), Lorain County's Drug Free Community Coalition. CTC addresses issues related to youth substance abuse in Lorain County. During fall 2014, CTC anonymously surveyed children in grades 6, 8 and 10 at schools throughout Lorain County. They used the PRIDE Surveys Questionnaire for grades 6-12 with 1,917 students, approximately 15 percent of students in the target grades throughout Lorain County. The results of their fall 2014 Youth Survey were integrated into the LCCHAP Report and were compared with historical county data and state and national averages to reveal improvement opportunities for Lorain County.

External sources

- County Health Rankings, 2016
- Centers for Disease Control, Wonder, 2013
- GeoLytics and Bureau of Labor Statistics
- Lorain County Children Services
- Lorain County Coroner's Office
- Lorain County General Health District
- Lorain County Transportation Barriers Assessment, 2015
- Ohio Department of Health
- Ohio Department of Health Births, Vital Statistics Annual Birth Summaries by Year, 2006-2010
- Ohio Department of Health Center for Vital and Health Statistics, Vital Statistics Annual County Birth Survey, 2006
- Ohio Department of Health Information Warehouse
- Ohio Department of Health School and Adolescent Health Section
- Ohio Department of Mental Health, MACSIS Data Mart Cognos System
- Ohio Hospital Association Insight Discharge Planning Tool, 2014

- South Carolina Department of Health and Environmental Care Kotelchuck Index
- U.S. Census Bureau American Community Survey

Collaborating partners

The hospital collaborated with the following organizations while conducting the needs assessment:

- Communities That Care of Lorain County
- Lorain County Community Health Assessment Project
- Hospital Council of Northwest Ohio
- The Public Services Institute of Lorain County Community College
- University of Toledo

Community input

T.R. §1.501(r)-3(b)(6)(iii)

No written comments were received on the previously completed CHNA.

LCCHAP survey

Under the direction of the LCCHAP in 2015, coordinated and managed by the Hospital Council of Northwest Ohio, a survey was developed to assess the needs of the entire population. The sample methodology ensured the underserved, low-income, minority or chronic disease populations were surveyed and that minority populations were over-sampled. Adults age 19 and over living in Lorain County were eligible for the adult survey. To achieve a 95-percent confidence level that the results represent the true population, researchers determined 384 surveys needed to be completed. American Clearinghouse in Louisville, KY, provided a random sampling of mailing addresses for Lorain County adults. The process involved mailing 2,400 personalized pre-survey letters printed on Lorain County Health Partner stationery. The survey letters listed the corresponding partners, introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. Three weeks after the letter, a three-wave mailing procedure was implemented to maximize the return rate. Surveys returned as undeliverable were not replaced with another potential candidate.

The response rate for the entire survey, including both the general population and the Lorain County urban population was 35 percent. The response rate for the general population was 39 percent, and 30 percent for the Lorain County urban population. The return rates achieved along with the sample size used means that the responses in the health assessment should be representative of the entire county. Individual responses were anonymous and confidential and all data was analyzed by health education researchers at the University of Toledo. To be representative of Lorain County, the collected adult data was weighted by age, gender, race and income using 2010 census data.

CTC survey

During fall 2014, CTC anonymously surveyed youth in grades 6, 8, 10 at schools throughout Lorain County. The PRIDE Surveys Questionnaire for grades 6-12 was administered to 1,917 students as follows: 614 (38.1 percent) 6th graders, 573 (29.9 percent) 8th graders and 730 (38.1 percent) 10th graders were surveyed. This breakdown represented approximately 15 percent of students in those grades throughout Lorain County. A passive consent was disseminated to parents of students participating in the survey process. The survey questions focused on past 30-day drug use, students' perception of risk and parents' disapproval, age of first use, perception of availability, and where and when students use cigarettes, alcohol, marijuana and prescription drugs. Additionally, the survey gathered data about violence indicators, school safety, risk and protective factors. Ten additional questions were added to the survey to inquire about anxiety, depression, suicide, healthy eating and physical activity.

Needs highlighted

The surveys provided insight into the health needs of the residents of Lorain County which included: health status, healthcare coverage, access to healthcare, cardiovascular health, cancer, diabetes, weight status among both adults and youth, tobacco use among both adults and youth, alcohol consumption among both adults and youth, drug use among both adults and youth, men's and women's health, preventive medicine and health and screenings, sexual behavior and pregnancy outcomes, quality of life, mental health and suicide among both adults and youth, oral health, safety and violence issues among youth.

The adult data was compiled to not only look at Lorain County in the aggregate, but to also look specifically at the rural, suburban and urban (Lorain and Elyria) segments of the county and identify the more urgent needs in each area. Results were also segmented by age and income, providing further insight. Combining the income and geographic indicators, key health needs among the uninsured, low-income people and minority groups were more refined. Urban adults in Lorain County (a larger segment of the minority population) with incomes less than \$25,000 have a higher prevalence of overweight or obese BMI measurements. They also have more medication misuse, are more likely to use tobacco and lack healthcare coverage.

Survey results

The results of both surveys were integrated into the LCCHAP Report and were compared with and against historical data from Lorain County and state and national data to determine the opportunities for improvement for Lorain County.

The initial results of the survey were presented to leaders of key health agencies who participated in the 2015 LCCHAP in February of 2016. The purpose of this draft-results meeting was to present initial findings, solicit input regarding changes to the presentation of data in the report, and feedback regarding next steps and presentation of data to the community. Representatives of the following organizations attended: Alcohol and Drug Addiction Services Board of Lorain County, Elyria City Health District, Hospital Council of Northwest Ohio, Lorain County Board of Mental Health, Lorain County General Health District, Lorain County Health and Dentistry, Mercy Health - RMC, Mercy Health - Allen, Public Services Institute at Lorain County Community College and University Hospitals Elyria Medical Center.

Lorain County Health and Well-Being Fact Book
As a supplement to the 2015 Lorain County Community Health Assessment, PSI updated their 2010 Lorain County Health and Well-Being Fact Book. The 2015 Lorain County Health and Well-Being Fact Book is a detailed, comprehensive summary report that compares Lorain County with historical Lorain County trends and with state and national averages, including: demographics, maternal and child care, unemployment, poverty, alcohol and tobacco use, healthcare coverage, access to care and leading causes of death.

Meeting of community leaders

A community event was held by the LCCHAP member organizations in May of 2016. Attendees included nearly 110 key leaders from the community representing public health, law enforcement, schools, churches, public officials, social service agencies and the general public. The results of the 2015 LCCHAP Report prepared by the Hospital Council of Northwest Ohio, which analyzed the survey results against historical data and comparative benchmarks, was shared with attendees.

Panel discussion

PSI facilitated a panel discussion where updates on the Community Health Improvement Plan (CHIP) were shared. A county-wide coalition was formed as a result of the Lorain County Health Assessment Project, 2011, and subsequent community input sessions and summits that took place between 2012 and 2014 as part of that project. This coalition became the Community Health Improvement Plan (CHIP) Steering Committee, which coordinates the oversight of the CHIP and implements strategies to address the top health needs of Lorain County. The Lorain County CHIP Steering Committee is comprised of the following organizations: Alcohol and Drug Addiction Services Board of Lorain County, Elyria City Health District, Lorain City Health District, Lorain County Board of Mental Health, Lorain County General Health District, Lorain County Health and Dentistry, Lorain County Metro Parks, Mercy Health – RMC, Mercy Health - Allen, Public Services Institute at Lorain County Community College and University Hospitals Elyria Medical Center.

Priority of health needs

Based on the Lorain County Health Assessment Project, 2011, and community input, the CHIP priorities were finalized in late 2014. These priorities include improving access to care, reducing infant mortality as part of expanding coordinated education and prevention services, improving weight issues and obesity, reducing use and abuse of alcohol, tobacco and drugs, and improving mental health.

Each CHIP priority team is chaired by a leader from at least one of the Steering Committee's organizations. Teams contain members from Lorain County organizations to ensure community collaboration and assistance with planning and implementation and

provision of resources to achieve the priorities. The teams began meeting in late 2014 to finalize their strategies and develop implementation plans to achieve progress measures by 2019. Finally, the leaders of each health initiative under the CHIP facilitated roundtable discussions with attendees. These discussions provided further insight into their committee's accomplishments and gathered further insight into the barriers and potential solutions for that particular health need. The purposes of this summit were to develop a shared understanding of the results, identify the greatest issues facing Lorain County and the challenges that might prevent success, and envision and share ideas for a desirable future.

The 2015 Lorain County Community Health Assessment Project results indicate that the major health needs in Lorain County include the following: health insurance coverage; leading causes of death including cancer, high blood pressure, diabetes, heart disease and stroke; obesity; use of alcohol, tobacco and other drugs; preventive medicine and health screenings; mental health and suicide; maternal and child death; and access to care.

Organizations providing input

| Organization providing input | Nature and extent of input | Medically underserved, low-income or minority populations represented by organization |
|--|--|---|
| Alcohol and Drug Addiction Services Board of Lorain County | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | People using drugs/alcohol and their families |
| Amherst Schools | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Children and families |
| Alzheimer's Association | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | People with Alzheimer's and their families |
| Avon Oaks Caring Community | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | People with disabilities who require short-term care, long term care, rehabilitation and skilled nursing services |
| Avon Schools | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Families and children/youth |
| Avon Lake Fire Department | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| Avon Lake Police Department | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| Bellefair JCB | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Families and children/youth |
| Center for Health Affairs | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Advocate for northeast Ohio hospitals |
| Church of the Open Door | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Adults and children/youth |
| City of Avon Lake | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| City of Elyria | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| City of North Ridgeville | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |

Organizations providing input ...continued

| Organization providing input | Nature and extent of input | Medically underserved, low-income or minority populations represented by organization |
|--|--|--|
| City of Oberlin | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| City of Sheffield Village | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| Cleveland Clinic Foundation | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Families and children/youth |
| Community Foundation of Lorain County | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Public charity connecting people who want involvement with causes that matter |
| Cornerstone Among Women | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Women of child-bearing age and their partners |
| Educational Services Center of Lorain County | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Families and children/youth |
| El Centro | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Seniors and youth of the Latino community |
| Elyria City Health Department | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Residents of Elyria, with focus on children who are challenged, BCMH children, African-American women (prenatal care) and the poor |
| Family Planning Services | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Low-income and uninsured patients needing low-cost reproductive healthcare services |
| Far West Center | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | The mentally ill |
| First United Methodist Church, Wellington | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| Grafton Township | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |

Organizations providing input ...continued

| Organization providing input | Nature and extent of input | Medically underserved, low-income or minority populations represented by organization |
|--|--|--|
| Haven House | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Middle-aged adults, younger women and children |
| Hospice of the Western Reserve | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Many populations |
| Immigrant Worker Project | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Rural immigrants and farm workers |
| LaGrange United Methodist Church | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Seniors 65+ ; 35-50 year olds with children |
| Lorain City Schools | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Families and children/youth |
| Lorain County Board of Mental Health | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | The mentally ill |
| Lorain County Catholic Charities | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Young adults, the homeless, adoptive families and families with children |
| Lorain County Community Action Agency | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Individuals, children or families in poverty |
| Lorain County Community College | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Youth and adults |
| Lorain County Free Clinic | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Adults 19-65, poor or underserved, who aren't eligible for Medicaid but too young for Medicare |
| Lorain County General Health District | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Rural and suburban population of Lorain County |
| Lorain County Health and Dentistry | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Low-income and uninsured medical patients |
| Lorain County MetroParks | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| Lorain County Safe Harbor/ Genesis House | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Victims of domestic violence |

Organizations providing input ...continued

| Organization providing input | Nature and extent of input | Medically underserved, low-income or minority populations represented by organization |
|---|--|--|
| Lorain County Urban League | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | African Americans and other minorities or disadvantaged people |
| Lucy Idol Center | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Those with dual diagnosis, developmentally disabled and mentally ill |
| Murray Ridge Center | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Those with dual diagnosis, developmentally disabled and mentally ill |
| Northeast Ohio Medical University | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| Nord Center | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Youth and adults |
| Nord Family Foundation | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Uninsured poor, disadvantaged and homeless people; students (pre-K to bachelors) |
| North Ridgeville Fire Department | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| Oberlin Community Services | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | People within 200 percent of the poverty level |
| Oberlin House of the Lord/Urban Pastors Health Initiative | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Predominantly African-Americans, including the poor, unemployed, elderly and male ex-offenders |
| Oberlin Kids | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Families and children/youth |
| Ohio Attorney General's Office | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| Pathways Counseling Center | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Adults, children/adolescents and families |
| Sacred Heart Chapel | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Hispanic families, including recent immigrants from Puerto Rico |

Organizations providing input ...continued

| Organization providing input | Nature and extent of input | Medically underserved, low-income or minority populations represented by organization |
|---|--|---|
| Sheffield Village Fire Department | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| The LCADA Way | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | People with drug and alcohol addiction |
| United Way of Greater Lorain County | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Low income and working families below 200 percent of the poverty level |
| University Hospitals Elyria Medical Center | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| Veggie U | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Families and children/youth |
| Village of South Amherst | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Community at large |
| Wellington Office on Aging | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Seniors 60+ |
| YES (Youth Empowerment Services) Zone — United Way of Greater Lorain County | Provided community input at CHIP Priority Team Steering Committee roundtable discussions in 2014 | Families and children/youth |
| YWCA | Participated in the Key Stakeholder Interviews conducted by PSI in spring 2016 | Women, people of color and seniors |

Executive summary

Significant health needs

T.R. §1.501(r)-3(b)(4)

HEALTH INSURANCE COVERAGE

Capacity and adequacy of service levels

- As of 2014, 11 percent of adults in Lorain County had no health insurance. In the same year, 10 percent of Ohio adults and 13 percent of U.S. adults lacked health insurance.
- Lack of health insurance was much higher in the urban cities of Elyria and Lorain, where the rate jumped to 17 percent. Of those under age 30, 26 percent had no health insurance, as did 23 percent of those with incomes under \$25,000.
- The overall adult rate of 11 percent uninsured is unchanged from the Lorain County, Ohio, Health Assessment Project, 2011.

LEADING CAUSES OF DEATH

Capacity and adequacy of service levels

- Cancer, the leading cause of death in the U.S., accounted for 23 percent of all deaths in 2013. Lung cancer was the leading cause of both male and female cancer deaths from 2009–2013, according to the Centers for Disease Control. Approximately 25 percent of female and 19 percent of male adults were current smokers.
- 36 percent of adults have been diagnosed with high blood pressure, which is higher than the state rate of 35 percent and the national average of 31 percent. This is also an increase from 2011 rate of 35 percent.
- Eleven percent of adults have been diagnosed with diabetes, which is higher than the national average of 10 percent. The rate jumps to 16 percent for those adults with income under \$25,000.
- Heart disease and stroke accounted for 27 percent of all adult deaths in Lorain County in 2013.

Current service providers

Mercy Health — Regional Medical Center, Mercy Health — Allen Hospital, University Hospitals Elyria Medical Center and physician offices throughout the county offer services to address leading causes of death. Mercy Health's Cancer Center is located in Elyria, and allows residents to be treated close to home as outpatients. Lorain County Health & Dentistry is a federally funded community health center that serves the underserved in Lorain and surrounding communities with outpatient medical and dental services. Lorain Free Clinic coordinates community resources for low-income and uninsured residents of Lorain County. The clinic offers comprehensive healthcare at minimal or no cost. Lorain County General Health District and Elyria City Health Department also offer services. Through its Parish Nursing Program, Mercy Health offers health screenings, mostly free, to those who can't afford healthcare or have difficulty accessing.

EXERCISE AND WEIGHT STATUS

Capacity and adequacy of service levels

- In Lorain County, 69 percent of adults were overweight or obese according to their body mass index (BMI), compared to 67 percent in 2011.
- The percentage of adults considered obese was 37 percent in 2015, which is much higher than the state average of 33 percent and the national average of 30 percent. The percentage of adults considered obese increases to 41 percent for those with an income below \$25,000.
- In 2015, 53 percent of adults engaged in physical activity for at least 30 minutes, three or more days a week. In 2011 that rate was 56 percent. Twenty-three percent of adults didn't engage in any physical activity, compared with 21 percent in 2011.
- There currently is no dedicated bariatrics program in Lorain County.

Current service providers

The Center for Health Affairs is coordinating northeast Ohio hospitals' efforts to work collaboratively on one need for their communities. The collaboration chose obesity/weight status as this need. Companies such as Weight Watchers also operate in Lorain County.

USE OF ALCOHOL, TOBACCO AND OTHER DRUGS

Capacity and adequacy of service levels

- The rate of adults smoking remained at 22 percent, the same as in 2015. This rate is higher than state average of 21 percent and much higher than the national average of 18 percent. The rate increases to 36 percent for those with an income under \$25,000 and 27 percent for those living in an urban area.
- The percentage of frequent drinkers has risen from 13 percent to 16 percent.
- Marijuana use in adults rose from 7 percent in 2011 to 10 percent in 2015. Overdose deaths in Lorain County have averaged nearly 65 per year from 2012-2015. This is an increase over the average of 21 overdose deaths annually from 2006-2011.

Current service providers

The Urban Minority Alcoholism and Drug Abuse Outreach Program serves one of Ohio's largest Hispanic communities as well as large African-American population. They ensure that these people have affordable access to programs that treat alcohol, tobacco and drug abuse. The Alcohol & Drug Addiction Services Board of Lorain County (ADAS) is responsible for planning, evaluating, coordinating, funding and contracting for the delivery of publicly-financed alcohol and other drug-addiction, prevention and treatment services for Lorain County residents. The LCADA Way is an organization that cares for individuals and families struggling with drug and alcohol addiction.

PREVENTIVE MEDICINE AND HEALTH SCREENINGS

Capacity and adequacy of service levels

- In 2015, 65 percent of adults had visited a doctor for a routine checkup in the past year, up from 55 percent in 2011. Fifty-four percent had a flu shot, up from 45 percent in 2011.
- Only 29 percent of adults over age 50 reported having been screened for colorectal cancers in the past two years.

- For women age 40 and over, the rate of mammograms in the last year is lower than for those with an income under \$25,000 and for those residing in a rural area.
- Of women aged 40 and older, 75 percent had a mammogram in the past two years, compared with 72 percent for Ohio, and 73 percent nationally. However, among the same age group, 69 percent of women had a clinical breast exam in the past two years, compared with 72 percent for Ohio and 77 percent nationally.
- Only 27 percent of men had a prostate-specific antigen (PSA) test in the past year, compared with 43 percent for both state and national averages. The rate drops to 22 percent for those residing in an urban area. These rates have dropped since 2011.

Current service providers

Mercy Health — Regional Medical Center, Mercy Health — Allen Hospital, University Hospitals Elyria Medical Center and physician offices throughout the county offer services to address preventive-medicine and health-screening needs. Mercy's Parish Nursing Program reaches out to the community through participation in 100 parishes, offering many free screenings and educational sessions. Lorain County Health & Dentistry is a federally funded community health center that serves the underserved in Lorain and surrounding communities by providing outpatient medical and dental services. Lorain Free Clinic coordinates community resources for low-income and uninsured residents of Lorain County. The clinic provides comprehensive healthcare at minimal or no cost. Other service providers include Lorain County General Health District and Elyria City Health Department.

MENTAL HEALTH AND SUICIDE

Capacity and adequacy of service levels

- In the past year, 20 percent of adults in Lorain County had a period of two weeks or more when they felt sad, blue or depressed.
- Three percent of adults (6,700) and 11 percent of youth considered attempting suicide in the past year.
- One percent of adults actually attempted suicide in the past year.

Current service providers

Lorain County Board of Mental Health provides mental health services for the county. Mercy Health offers both inpatient and outpatient behavioral health services, and Nord Center also provides behavioral health services for Lorain County. Lorain County Pride Initiative is an offshoot of the Alcohol & Drug Addiction Services of Lorain County. The initiative provides resources to residents of the City of Lorain experiencing anxiety, depression and problematic substance-abuse issues caused by the recent economic downturn. Pathways Counseling & Growth Center is a nonprofit that provides mental health counseling services primarily to Medicaid and low-income residents. Other service providers include Lorain County General Health District and Elyria City Health Department.

MATERNAL AND CHILD HEALTH

Capacity and adequacy of service levels

- In 2015, only 56 percent of women got a prenatal appointment in the first three months of pregnancy.
- The number of mothers who didn't receive prenatal care during the first trimester of pregnancy rose from 29.2 percent in 2013 to 36.8 percent in 2014. African-American and Hispanic women and women under 25 were all less likely to begin prenatal care during early pregnancy.
- The rate of low birth weights, while below the state average, is higher than the county rate for African-American births and births to mothers under the age of 15.
- The rate of women who smoked while pregnant in 2015 (18.1 percent) was still above the 2014 rates for Ohio (11.5 percent) and for the U.S. (16.9 percent).
- The infant mortality rate of 5.2 per 1,000 in 2014 was much lower than the rate in neighboring Cuyahoga County (9.6) and the overall Ohio rate (7.9).

Current service providers

Mercy Health — Regional Medical Center, Mercy Health — Allen Hospital, University Hospitals Elyria Medical Center and physician offices throughout the county offer services to address maternal and child health needs. Mercy Health's Resource Mothers Program reaches out to at-risk pregnant women to ensure proper prenatal and

post-birth care. Cornerstone Among Women assists low-income women with pregnancy issues. Lorain County Children and Families Council promotes the well-being of children and families in Lorain County. Other service providers include Lorain County General Health District and Elyria City Health Department.

ACCESS TO CARE

Capacity and adequacy of service levels

- Eighteen percent of adults did not see a doctor in the past year due to cost. Although this is a decrease from 20 percent in 2011, it's higher than the state and national rates of 13 percent. The county rate jumped to 37 percent for those with income below \$25,000.
- A survey of adults in Lorain County indicated that for 29 percent of them, cost was the top reason they didn't seek care when they were sick.
- Only 52 percent of adults in Lorain County had one person they thought of as their personal doctor or healthcare provider. The rate was 74 percent for Ohio and 70 percent nationally. This indicates sick adults don't see a doctor for routine medical needs or go to an emergency room.
- Forty-nine percent of adults went outside Lorain County for some kind of health service.

Current service providers

Mercy Health — Regional Medical Center, Mercy Health — Allen Hospital, University Hospitals Elyria Medical Center and physician offices throughout the county offer services to access care. Mercy Health's Parish Nursing Program reaches out to the community through participation in 100 parishes throughout the county, offering free or low-cost health screenings to those who can't afford healthcare or have trouble accessing it. Lorain County Health & Dentistry is a federally funded community health center that serves the underserved in Lorain and surrounding communities with outpatient medical and dental services. Lorain Free Clinic coordinates community resources for low-income and uninsured residents of Lorain County. The clinic provides comprehensive healthcare at minimal or no cost. Other service providers, including Cornerstone Among Women, Haven House, Oberlin Community Services, Lorain County Community Action Agency, Lorain Catholic Charities and Neighborhood Alliance help struggling individuals meet basic needs. This need is also being

addressed through the County-wide Health Initiative (CHIP), which has a subcommittee comprised of county organizations working on the access-to-care issue.

Prioritization of health needs

To develop a three-year plan to address community health needs beginning in 2017, Mercy Health — RMC and Mercy Health — Allen took the results from the previous work and engaged key stakeholders in the community to prioritize Lorain County's key health needs. In May and June of 2016, Mercy Regional Health Center Commissioned the PSI to conduct and analyze the results of key community stakeholders. The design of the stakeholder interviews was to build on the comprehensive 2015 Lorain County Community Health Assessment Project. This project included developing a shared understanding around the data, with the intent of identifying and prioritizing health-related needs based on four measures: severity of a problem, size of populations affected, community capacity to address the problem and availability of data to track and monitor outcomes.

A total of 25 in-depth interviews were conducted with key people representing a cross section of community leaders. Their organizations included: healthcare providers, funding entities, not-for-profit health and social service providers, faith-based organizations, philanthropic organizations and others. More than half of these serve all of Lorain County. The others serve smaller areas within the county, such as an individual city or a portion of the county. Many of those interviewed represent organizations that serve areas surrounding Lorain County, including western Cuyahoga County, Huron County and Erie County.

A number of organizations represented in the stakeholder interviews serve low-income residents exclusively. However other groups were represented, including seniors, minority populations, single parents, pregnant women, youth, the mentally ill, immigrant laborers, families who have experienced domestic violence, people with chronic diseases, religious congregations and the general public. Leaders from four organizations we contacted were unable to complete an

interview. They represented religious congregations, minority populations and those in need.

When asked to describe the cause of issues facing the clients they served, interviewees named many economic, social, mental/emotional, cultural and environmental factors. Lack of education, the economy (access to employment) and high rates of poverty were common responses. Other responses include: affordable health insurance, a poor/limited transportation system in Lorain County, a lack of affordable/accessible venues for physical activity, and cultural acceptance within certain populations of having multiple partners and children out of wedlock.

The PSI report included comparing the results of the Ohio Health Assessment Project with historical data and similar metrics from external sources. Also included in the report was information from personal interviews with additional key stakeholders in Lorain County.

All interview respondents were informed that a health assessment for Lorain County had been conducted by the Hospital Council in 2015. They were also told that the results, along with recent trend and comparative data, were aggregated into a Health Status report by PSI. The interview team then shared some of the key findings from the PSI Report, and respondents scored each issue based on four key criteria: severity of health need, size of population affected, community capacity to address the need and ability to evaluate outcomes.

The interview process with key stakeholders was designed to assess in depth how interviewees viewed the health needs of the community in terms of the factors outlined above. With this assessment, the process then led to prioritization of those needs. Mercy Health — RMC and Mercy Health — Allen recognized that although all criteria are important, they aren't all equally important. The hospitals weighted the criteria as follows to allow for a more meaningful ranking among the needs: size of population affected (4), severity of health need (3), ability to evaluate outcomes (2) and community capacity to address the need (1). Based on the overall composite score for each significant health need, the most pressing health needs of the community served by the hospitals were determined to be:

1. Exercise and weight status (972)
2. Leading causes of death (954)
3. Access to care (905)
4. Use of alcohol, tobacco and other drugs among adults (902)
5. Preventive healthcare (874)
6. Use of alcohol, tobacco and other drugs among youth (867)
7. Maternal and child health (858)
8. Mental health (831)

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.

EXERCISE AND WEIGHT STATUS

In 2015, 69 percent of adults in Lorain County were overweight or obese according to their body mass index (BMI). This compares with 67 percent in 2011. There was a significant increase in the obese category, from 32 percent of adults in 2011 to 37 percent in 2015. The 37-percent rate of 2015 obesity is much higher than the Ohio rate of 33 percent and the national average of 30 percent. The obese rate jumps to 44 percent for those residents of Lorain County aged 30-64 and 41 percent for those with an income under \$25,000. In 2015, 53 percent of adults engaged in physical activity for at least 30 minutes, three or more days per week, compared with 56 percent in 2011. In 2015, 23 percent of adults didn't engage in any physical activity, compared with 21 percent in 2011.

LEADING CAUSES OF DEATH

Cancer, the leading cause of death in the U.S., accounted for 23 percent of all deaths in 2013. Lung cancer was the leading cause of both male and female cancer deaths from 2009-2013, according to the Centers for Disease Control. In 2015, 36 percent of adults had been diagnosed with high blood pressure, an increase over the 2011 rate of

35 percent. The Lorain County rate is also higher than the Ohio rate (34 percent) and the national rate (31 percent). This rate jumps to 40 percent for rural Lorain County. In Lorain County, 41 percent of males were diagnosed with high blood pressure, compared with 40 percent in 2011. This rate is higher than the Ohio rate (36 percent) and the national rate (34 percent).

In 2015, 11 percent of adults had been diagnosed with diabetes. While a decrease from the 2011 rate (13 percent), the 2015 rate is still higher than the national average of 10 percent, but slightly below the Ohio rate of 12 percent. This rate jumps to 16 percent for adults with income under \$25,000.

ACCESS TO CARE

Eighteen percent of adults did not see a doctor in the past year due to cost. Although this is a decrease from 20 percent in 2011, it's higher than the state and national rates of 13 percent. The county rate jumped to 37 percent for those with income below \$25,000. A survey of adults in Lorain County indicated that for 29 percent of them, cost was the top reason they didn't seek care when they were sick. Only 52 percent of adults in Lorain County had one person they thought of as their personal doctor or healthcare provider. The Ohio rate is 74 percent and the national rate 70 percent. Eighteen percent had none at all.

USE OF ALCOHOL, TOBACCO AND OTHER DRUGS AMONG ADULTS

In 2015, 16 percent of Lorain County adults were considered frequent drinkers, compared with 13 percent in 2011. The rate of adults who are current smokers remained 22 percent, the same as in 2011. This rate is still higher than the Ohio rate of 21 percent and the national rate of 18 percent. However, the rate increases to 36 percent for those with an income under \$25,000 and 27 percent for those residing in an urban area. In 2015, 25 percent of all women are smokers, compared with 22 percent in 2011 and 20 percent in Ohio. For males, the 2015 rate is 19 percent, compared with 22 percent in 2011. The 2015 rate for Ohio is 22 percent. Marijuana use by adults rose from 7 percent in 2011 to 10 percent in 2015. Overdose deaths in Lorain County have averaged nearly 65 per year from 2012-2015. From 2006-2011 the average was 21 per year.

PREVENTIVE HEALTHCARE

In 2015, 65 percent of adults had visited a doctor for a routine checkup in the past year, up from 55 percent in 2011, while 54 percent had a flu shot, up from 45 percent in 2011. For women age 40 and over, the rate of mammograms in the last year is lower than for those with an income under \$25,000 and for those residing in a rural area. The rate for woman 40 and over who have had a clinical breast exam in the past two years is much lower than state and national averages. Only 27 percent of men had a prostate-specific antigen (PSA) test in the past year, compared with 32 percent in 2011. The state and national averages in 2014 were both 43 percent. The rate drops to 22 percent for those residing in an urban area.

USE OF ALCOHOL, TOBACCO AND OTHER DRUGS AMONG YOUTH

Drinking of alcohol among youth as a whole in Lorain County declined from over 20 percent in 2009 to roughly 14 percent in 2014. The current drinking rate among 10th graders of 21.9 percent, which is below the national rate of 23.5 percent. In 2014, 22 percent of 10th graders were considered current drinkers, a decrease from 10 percent in 2009. However, 40 percent of 10th graders had alcohol in the past year, and over 47 percent report that alcohol is fairly easy or easy to get and it remains the most prevalent drug of choice.

Cigarette smoking among youth as a whole in Lorain County declined from about 13 percent in 2009 to roughly 8 percent in 2014. The current smoking rate of 10.3 percent among 10th graders is higher than the national rate of 7.2 percent. Seventeen percent of youths had smoked in the past year. Cigarettes are the third most prevalent drug of choice. Cigarette use among 8th graders remained nearly the same, at 7.4 percent in 2014 compared with 7.8 percent in 2009.

Current use of marijuana among youths as a whole in Lorain County declined from about 12 percent in 2009 to below 10 percent in 2014. The current marijuana rate among 10th graders is 13.1 percent, below the 2009 rate of 16.8 percent and the national rate of 16.6 percent. Marijuana is still the second most prevalent drug of choice. Marijuana use among 6th graders increased from 5.8 percent in 2009 to 7.3 percent in 2014.

MATERNAL AND CHILD HEALTH

In 2015, only 56 percent of women got a prenatal appointment in the first three months of pregnancy. The number of mothers who didn't receive prenatal care during the first trimester of pregnancy rose from 29.2 percent in 2013 to 36.8 percent in 2014. African-American and Hispanic women and women under 25 were all less likely to begin prenatal care during early pregnancy. The rate of low birth weights was 9.3 percent in 2014, which is below the Ohio rate of 11.8 percent. However, the rate of low birth weights jumps to 10.4 percent for African-American births and 17.9 percent for births to mothers under age 15. The rate of women who smoked while pregnant improved, decreasing from 20.5 percent in 2006 to 18.8 percent in 2013 and 18.1 percent in 2015. However, the 2015 rate is still above the 2014 rate for Ohio (11.5 percent) and the U.S. (16.9 percent).

MENTAL HEALTH

In the past year, 20 percent of adults in Lorain County had a period of two weeks or more when they felt sad, blue or depressed. Three percent of adults considered attempting suicide in the past year, compared with 4 percent in 2011. Among youth, 11 percent considered suicide. One percent of adults actually attempted suicide in the past year.

Resources available

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

EXERCISE AND WEIGHT STATUS

Resources available to address the exercise and weight status need include the coordinated effort by The Center for Health Affairs for northeast Ohio hospitals to work collaboratively on obesity and weight status in their communities. Companies such as Weight Watchers also operate in Lorain County.

LEADING CAUSES OF DEATH

Mercy Health — Regional Medical Center, Mercy Health — Allen Hospital, and University Hospitals Elyria Medical Center and multiple physician offices located throughout the county offer services to address leading causes of death. Mercy Health's Cancer Center is located in Elyria, and allows for residents to be treated on an outpatient basis close to home. Lorain County Health & Dentistry is a federally funded community health center that serves the underserved in Lorain and surrounding communities by providing outpatient medical and dental services. Lorain Free Clinic coordinates community resources for low-income and uninsured residents of Lorain County, providing comprehensive healthcare at minimal or no cost. Lorain County General Health District and Elyria City Health Department also offer services. Mercy Health offers health screenings, mostly free, through its Parish Nursing Program, to those who can't afford or have difficulty accessing healthcare.

ACCESS TO CARE

Mercy Health — Regional Medical Center, Mercy Health — Allen Hospital, and University Hospitals Elyria Medical Center and multiple physician offices located throughout the county offer services to access care. Mercy Health's Parish Nursing Program reaches out to the community through participation in 100 parishes throughout the county, including offering free or low-cost health screenings to those who can't afford or have difficulty accessing healthcare. Lorain County Health & Dentistry is

a federally funded community health center that serves the underserved in Lorain and surrounding communities by providing outpatient medical and dental services. Lorain Free Clinic coordinates community resources for low-income and uninsured residents of Lorain County, providing comprehensive healthcare at minimal or no cost. Other service providers, including Cornerstone Among Women, Haven House, Oberlin Community Services, Lorain County Community Action Agency, Lorain Catholic Charities, and Neighborhood Alliance help struggling individuals meet basic needs. This need is also being addressed through the County-wide Health Initiative (CHIP) which has a subcommittee comprised of county organizations working on the access to care issue.

ALCOHOL, TOBACCO AND DRUG USE AMONG ADULTS

The Alcohol & Drug Addiction Services Board of Lorain County (ADAS) is responsible for planning, evaluating, coordinating, funding and contracting for the delivery of publicly-financed alcohol and other drug-addiction, prevention and treatment services for the benefit of Lorain County residents. The LCADA Way is an organization that cares for individuals and families struggling with drug and alcohol addiction. Communities that Care of Lorain County is a community-based prevention operation that works to prevent youth problem behaviors, including alcohol, tobacco, violence, etc.

PREVENTIVE HEALTHCARE

Mercy Health — Regional Medical Center, Mercy Health — Allen Hospital, and University Hospitals Elyria Medical Center and multiple physician offices located throughout the county offer services to address preventive medicine and health screening needs. Mercy's Parish Nursing Program reaches out to the community through participation in 100 parishes, including many free screenings and educational sessions. Lorain County Health & Dentistry is a federally funded community health center that serves the underserved in Lorain and surrounding communities by providing outpatient medical and dental services. Lorain Free Clinic coordinates community resources for low-income and uninsured residents of Lorain County, providing comprehensive healthcare at minimal or no cost. Other service providers include Lorain County General Health District and Elyria City Health Department.

ALCOHOL, TOBACCO AND DRUG USE AMONG YOUTH

The Urban Minority Alcoholism and Drug Abuse Outreach Program serves one of Ohio's largest Hispanic communities as well as large African-American population by ensuring they have affordable access to programs that treat alcohol, tobacco and drug abuse. The Alcohol & Drug Addiction Services Board of Lorain County (ADAS) is responsible for planning, evaluating, coordinating, funding and contracting for the delivery of publicly-financed alcohol and other drug-addiction, prevention and treatment services for the benefit of Lorain County residents. The LCADA Way is an organization that cares for individuals and families struggling with drug and alcohol addiction.

MATERNAL AND CHILD HEALTH

Mercy Health — Regional Medical Center, Mercy Health — Allen Hospital, and University Hospitals Elyria Medical Center and multiple physician offices located throughout the county offer services to address maternal and child health needs. Mercy Health's Resource Mother's Program reaches out to the at-risk pregnant women in the community to ensure proper pre-natal and post-birth care. Cornerstone Among Women assists low-income women with pregnancy issues. Lorain County Children and Families Council - Promotes the well-being of children and families in Lorain County. Other service providers include Lorain County General Health District and Elyria City Health Department.

MENTAL HEALTH

Lorain County Board of Mental Health provides mental health services for the county. Mercy Health offers both inpatient and outpatient behavioral health services, and Nord Center also provides behavioral health services for Lorain County. Lorain County Pride Initiative is an offshoot of the Alcohol & Drug Addiction Services of Lorain County that provides resources to residents of the City of Lorain experiencing anxiety, depression and problematic substance abuse issues due to recent economic downturn. Pathways Counseling & Growth Center is a non-profit that provides mental health counseling services primarily to Medicaid and low-income residents. Other service providers include Lorain County General Health District and Elyria City Health Department.

Progress on Health Priorities Identified in the 2013 Health Needs Assessment

ACCESS TO CARE

| Initiatives | Evaluation of Impact |
|---|---|
| Taxi vouchers program | To ensure patients had transportation to and from medical appointments, the hospitals provided taxi vouchers worth almost \$70,000 over two years to help more than 4,100 patients get medical care. |
| Parish Nursing Program | Mercy Health — RMC and Mercy Health — Allen offer weekly free or low-cost blood pressure and cholesterol screenings to low-income attendees or those without a primary care doctor at churches throughout the county. The hospitals help people connect with a primary care physician and give emergency or follow-up care when needed. Mercy Health — RMC offered 7,000 screenings in 2014 and 8,200 in 2015. Mercy Health — Allen offered 4,484 in 2014 and 4,000 in 2015. |
| Partnerships | Mercy Health partnered with LifeLine to provide additional screenings throughout the county. These screenings gave residents convenient access to medical screening on key life metrics such as blood pressure, cholesterol and glucose. Nine screenings in 2014 and 15 in 2015 attracted between 30 and 90 attendees each. |
| Community outreach, support and education | To identify barriers to healthcare access, the hospitals hosted a graduate student who surveyed about a thousand people at healthcare facilities throughout the county to understand residents' barriers and transportation needs. The results can be used for future planning and grants as Lorain County tries to strengthen its transportation infrastructure. Mercy Health — RMC and Mercy Health — Allen are also co-chairs on the county-wide CHIP's Access to Care committee. The committee oversaw the survey and is also studying emergency room utilization in Lorain County. Their goal is to promote the use of primary care physicians to increase the number of residents who have a PCP. The committee is also collaborating to give residents one resource for access to all healthcare-related providers and services and ensure that care is relevant and accurate. |

MEDICATION MANAGEMENT AND RECONCILIATION

| Initiatives | Evaluation of Impact |
|---|---|
| Medication wallet cards | In the southern portion of the county, Mercy Health — Allen uses medication wallet cards for all inpatients and all applicable emergency room discharges. Patients can add new medications to the card and, when paired with current medications, the physicians and pharmacists can reconcile any disparities. |
| Community outreach, support and education | At public events, Mercy Health — Allen distributed public education sheets we developed on the dangers of medication incompatibilities and the importance of medication reconciliation. Almost 300 individuals in 2014 and 628 individuals in 2015 received education. |

Progress on Health Priorities Identified in the 2013 Health Needs Assessment

OBESITY AND WEIGHT STATUS

| Initiatives | Evaluation of Impact |
|-----------------------------------|---|
| Free or low-cost exercise classes | The hospitals provided free or low-cost exercise classes to the community to promote health, especially among the poor and under-served. We focused on these people who would not be able to afford a gym or health club membership on their own. In 2014, the hospitals offered over 1,300 exercise classes throughout the county with almost 12,400 participants. In 2015, this increased to over 1,900 classes with over 17,700 participants. |
| Nutrition education classes | The hospitals provided nutrition education classes to 63 people in 2014, and 100 people in 2015. The classes were free and focused on healthy eating, cooking and nutrition. Mercy Health also holds classes for the Boys and Girls Club of Lorain. Children in these classes, many from poor and underserved families, learn the importance of healthy eating, cooking and nutrition. The hospitals also provided other free community events on nutrition, healthy eating and healthier preparation of ethnic foods. |
| Collaboration and partnerships | Mercy Health — RMC and Mercy Health — Allen collaborated with Amherst high school students on a healthy living project. Athletic trainers and dietitians from the hospitals presented the impact of healthy eating habits and physical exercise on overall health, brain activity and wellness. The presentations also demonstrated the effects of healthy lifestyle on middle school students. Based on the presentations, students created videos and posted them on YouTube. Parents and community members voted on the videos and the hospitals awarded to the winners prize money for sports-related activity equipment. |

PREVENTIVE HEALTH

| Initiatives | Evaluation of Impact |
|---|---|
| Community outreach, support and education | In 2014 and 2015, Mercy Health — Allen and Mercy Health — RMC provided free mammograms to the community at seven events, which were promoted in areas where there are large segments of poor and underserved populations. Almost 3,900 people were educated, at various free educational events, about the importance of mammograms, breast screenings and how they relate to reducing the risk of breast cancer. Another nearly 3,400 people attended free education events that included such topics as hypertension, controlling blood pressure, cardiac health and reducing stress. |
| Parish Nursing newsletter | The hospitals educated residents about the importance of vaccinations, including the influenza vaccine through its Parish Nursing newsletter. |
| Collaboration and partnerships | The hospitals collaborated with the Lorain County General Health District to sponsor their vaccination events and promote their vaccination drives at county-wide events. Mercy Health — Allen partnered with Kendal at Oberlin, a retirement community offering independent living, assisted living, skilled nursing and short-term rehabilitation to sponsor a health fair, where flu vaccines were provided to residents and employees. The hospitals also partnered with multiple organizations in the southern part of Lorain County to implement and host two successful “Earth Day—Me Day” health fairs. Free screenings (including blood pressure and cholesterol), education sessions and booths with health information were available. In 2015, there were over 100 attendees. |

Progress on Health Priorities Identified in the 2013 Health Needs Assessment

MATERNAL, CHILD AND INFANT HEALTH

| Initiatives | Evaluation of Impact |
|---|--|
| Resource Mothers Program | This program responds to the critical need for preventive healthcare education and support services for low-income, high-risk pregnant and parenting women and their families. The goal is to improve birth outcomes, promote healthy behaviors and empower women by connecting them with community services. In 2014, clients gave birth to 76 babies, 96 percent of which were healthy and weighed 5.5 pounds or more. In 2015, there were 96 births, 91 percent of which had a healthy birth weight. In both years the program exceeded the target of 90 percent of births having a healthy birth weight. In both years, the immunization rate by the baby's first birthday was 99 percent, far exceeding the national average of 77 percent. In 2015, all infants were enrolled in Medicaid by their first birthday. |
| Short-term and long-term client programs offered through the Resource Mothers Program | Mercy Health's Resource Mothers Program also supports those who can't afford necessities through its short-term and long-term client programs. Short-term clients receive what they need in one visit. Long-term clients enter the program during pregnancy and remain until their babies are a year old. Each client meets with her resource mother monthly to review a care plan and goals and receive education on proper car seat instructions, pediatricians and other resources available to her. Clients in these programs receive formula, diapers, wipes, clothing, bottles, food, cribs and other baby essentials. In 2014, we had 220 short-term and 925 long-term clients, increasing to 224 short-term and 928 long-term in 2015. |
| Community outreach, support and education | The hospitals gave smoking-cessation education and help to women identified as smokers during their prenatal care visits. In addition, we offered community-wide cessation classes specifically targeted to pregnant women. |

BEHAVIORAL HEALTH

| Initiatives | Evaluation of Impact |
|--|---|
| Ohio Psychiatric Nurse Administrators (OPNA) committee | Mercy Health participated in the Ohio Psychiatric Nurse Administrators (OPNA) committee in 2016. This committee includes leaders from private and public state hospitals, outpatient clinics and treatment facilities across Ohio. The committee met quarterly to share best practices and learn about innovative approaches to shared problems. Based on feedback from this group, Mercy Health made their practice of rounding more purposeful and meaningful. Presenters informed the committee about new licensure requirements, improved treatment for opiate addiction and expert insight for improving clinicians' assessments and treatments. Knowledge gained improved care for Mercy Health's behavioral health patients. |
| Collaborations and partnerships | Mercy Health Physicians and Mercy Health Behavioral Health Institute collaborated to bring behavioral health into the primary care setting. Licensed clinical psychologists make an impact by seeing established patients within the primary care office. This improves patient access to behavioral health services and creates an internal resource for primary care physicians to address patients' behavioral health needs. As a full-time member of the primary care team, they provide real-time interventions to address psychosocial or behavioral health concerns at the point of care. They work with children, adults and families, focusing on wellness, managing chronic illness and cognitive behavioral interventions. |

Progress on Health Priorities Identified in the 2013 Health Needs Assessment

BEHAVIORAL HEALTH

| Initiatives | Evaluation of Impact |
|---|--|
| County-wide Suicide Prevention Coalition | The hospitals participated in a county-wide Suicide Prevention Coalition. In 2016, the group identified elderly as being at high-risk for suicides and targeted training and education towards that population and those in direct contact with them. The coalition also identified youth as another high-risk population and piloted the “You Belong” program aimed at suicide prevention in six middle schools. The group also facilitates the Lorain County Navigator program, which connects residents to the correct behavioral health service in the shortest amount of time, and the LOSS Team, which is a volunteer team that responds to suicides in Lorain County to provide immediate assistance. |
| Community outreach, support and education | To address suicides and the increasing number of youths who have considered suicide, the hospitals held educational talks for the general community in parishes and mental first-aid workshops for community leaders who most often deal with the youth of Lorain County. Nearly 100 people attended education sessions in 2014. In 2015, 123 attended sessions. |

PREVENTION OF FALLS AND FRACTURES, ESPECIALLY IN THE ELDERLY

| Initiative | Evaluation of Impact |
|---------------------------------|---|
| Collaborations and partnerships | In the southern portion of the county, Mercy Health — Allen partnered with Kendal at Oberlin, a retirement community offering independent living, assisted living, skilled nursing and short-term rehabilitation to provide free bone density screenings for its high-risk patients. Additionally, free screenings were offered to high-risk patients at events in the community. In 2014, 73 bone density screenings were provided, increasing in 2015 to 92 screenings. |

CHRONIC DISEASE

| Initiatives | Evaluation of Impact |
|---|--|
| Diabetic educators | The hospitals provided 364 free screenings in 2014 and 502 free screenings in 2015 at many community events. Based on screening results, people were given education on healthy eating habits and exercise. Diabetic and pre-diabetic people were recommended to follow up with their primary care physician. At free educational events, more in the community were educated about diabetes awareness, healthy lifestyle and diabetes management. |
| Community outreach, support and education | To reduce readmission rates, especially in high-risk patients with chronic diseases, the hospitals front load home care visits and give disease-specific zone-alert sheets to all patients. On this sheet are contact information for the person’s home care agency and guidelines for deciding, based on symptoms, whether to call their doctor or go to the emergency department. |

Progress on Health Priorities Identified in the 2013 Health Needs Assessment

TEEN BIRTHS

Mercy Health — RMC identified teen births as a prioritized health need in its prior CHNA. The hospital didn't address this significant need because other community agencies are specifically designed and better prepared for this work. The hospital will continue to support groups such as Catholic Charities and Cornerstone Among Women that assist this population.

USE OF ALCOHOL, TOBACCO AND OTHER DRUGS

Mercy Health — RMC identified use of alcohol, tobacco and other drugs as a prioritized health need in its prior CHNA. The hospital didn't address this significant need because other community agencies are specifically designed and better prepared for this work. The hospital will continue to support such groups as needed and will continue to enforce its tobacco-free hiring policy and tobacco-free campus. We will also foster non-smoking and smoking cessation among employees and patients.