

2016 Community Health Needs Assessment

ST. RITA'S MEDICAL CENTER, LIMA, 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 St. Rita's Medical Center. Since 1918, St. Rita's Medical Center has been providing quality healthcare to the people of West Central Ohio. Founded by the Sisters of Mercy, St. Rita's is now part of Mercy Health.

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 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.

St. Rita's Medical Center strives to meet the health needs of its community. 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.

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Introduction

COMMUNITY SERVED BY HOSPITAL

T.R. §1.501(r)-3(b)(1)(i) and (3)

St. Rita's Medical Center is dedicated to continuing the healing ministry of Jesus Christ. For 98 years St. Rita's has been steadfast in its mission of caring for the poor, the elderly and the vulnerable members of the community, and to improving the health of the many communities it serves.

The Medical Center strives to ensure all residents of West Central Ohio (primarily Allen, Auglaize and Putnam counties) have access to advanced medical technology and quality care. Patient data indicates that 79% of persons served at St. Rita's Medical Center reside in these areas, based upon the county of residence of discharged inpatients during 2014.

We're proud that more people prefer St. Rita's for their medical care than any other hospital in the 10-county region. Our comprehensive high-quality medical services include The Henry & Beverly Hawk Vascular & Heart Center at St Rita's, St. Rita's Orthopaedic Care Center, trauma and emergency, cancer treatment, women's health, mother/baby, pediatrics, sports medicine and rehabilitation, addiction and behavioral services.

St. Rita's aims to serve our patients and each other in ways that reflect its 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.

Each year St. Rita's provides millions of dollars in community benefits including the Mercy Action program, Dental Clinic, Call A Nurse, and a variety of communitywide screenings and programs.

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 St. Rita's Medical Center ... the people who bring the St. Rita's 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
Allen County Health Department	2014
Auglaize County Health Department	2012
Putnam County Health Department	2010
Secondary data updates to the 2010 Putnam County Health Assessment	2013
At-risk populations (T.R. §1.501(r)-3(b)(5)(i)(b))	Date of data/information
Bradfield Community Center	JanApr. 2016
Health Partners of Western Ohio	JanApr. 2016
Heartbeat of Lima	JanApr. 2016
Lima/Allen Council on Community Affairs	JanApr. 2016
Mental Health and Recovery Services Board	JanApr. 2016
Samaritan House	JanApr. 2016
United Way	JanApr. 2016
Additional sources of input (1.R. §1.501(r)-3(b)(5)(II))	Date of data/information
Additional sources of input (T.R. §1.501(r)-3(b)(5)(ii))	
Activate Allen County	2014-2016
Activate Allen County	2014-2016 2014-2016
Activate Allen County	2014-2016 2014-2016 2014-2016
Activate Allen County	2014-2016 2014-2016 2014-2016 2014-2017
Activate Allen County	
Activate Allen County	2014-2016 2014-2016 2014-2016 2014-2017 Not available 2014-2016
Activate Allen County	

Our Daily Bread Soup KitchenNot available Partners for Healthy Putnam County......2014-2017

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)

In 2011, the Community Sustainability Advisory Committee (CSAC) was formed by the Lima-Allen County Regional Planning Commission with the mission to use available resources in an efficient way to improve the quality of life for residents of Allen County.

The Committee reviews and develops initiatives that target opportunities to improve the quality of life of Allen County residents through the creation of a sustainable environment. CSAC representatives include academic and education experts; business groups; civic leaders; community development professionals; economic development executives; elected officials; environmental advocates; faith-based organizations; healthcare; manufacturers and major employers; public health organizations; nonprofit organizations; natural resource authorities; media, information and public relations; and transportation system managers.

The CSAC identified the following health-related topics: access to health services; cancer; diabetes; disabilities; exercise, nutrition and weight; family planning; heart disease and stroke; immunizations and infectious diseases; maternal, fetal and infant health; mental health and disorders; oral health; prevention and safety; respiratory diseases; substance abuse; and wellness and lifestyle. To create a narrower scope, some topics were combined or eliminated in the CHNA data. For each identified health topic, health indicators were selected by the CSAC.

The CSAC implemented Healthy Communities Institute software to summarize data from secondary data sources. This non-biased information was publicly available on the website of the Lima-Allen County Regional Planning Commission.

Features of the website include a summary of indicators, detailed explanations about calculations and significance, a link to the original source, and time period of data collection. The Healthy Communities Institute website and original data sources were used to retrieve information for the CHNA analysis. Some data was not available due to the small population of the counties.

To obtain Allen County data, St. Rita's Medical Center participated in a collaborative community needs assessment project conducted by the Hospital Council of Northwest Ohio in 2014. The assessment was designed to identify the community issues, behavioral health issues, and physical health issues that residents of Allen County face and track progress from previous assessments, where applicable. The project provided an overview of health-related data for Allen County adults and youth who participated in a county-wide health assessment survey during 2014. The findings were based on selfadministered surveys using a structured questionnaire. The guestions were modeled after the survey instruments used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System and Youth Risk Behavior Surveillance System. The Hospital Council of Northwest Ohio collected the data, guided the health assessment process and integrated sources of primary and secondary data.

A collaborative community needs assessment project conducted by the Hospital Council of Northwest Ohio in 2012 obtained Auglaize County health data. The project provided an overview of health-related data for Auglaize County adults and youth who participated in a countywide health assessment survey during 2012. The findings were based on self-administered surveys using a structured questionnaire. The questions were modeled after the survey instruments used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System and Youth Risk Behavior Surveillance System. The Hospital Council of Northwest Ohio collected the data, guided the health assessment process and integrated sources of primary and secondary data.

To obtain Putnam County data, St. Rita's Medical Center participated in a collaborative community needs assessment project conducted by the Center of Social Research, Indiana University-Purdue University Fort Wayne obtained Putnam County health data. The project provided an overview of health-related data for Putnam County residents who participated in a county-wide health assessment survey during 2010. The findings were based on self-administered surveys using a structured questionnaire. The questions were modeled after the survey instruments used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System and Youth Risk Behavior Surveillance System. The Center for Social Research, Indiana University - Purdue University Fort Wayne collected the data, guided the health assessment process and integrated sources of primary and secondary data. In 2013, The Ohio State University College of Public Health was consulted to augment the survey data gathered in 2010 with updated secondary data regarding demographic and health information.

External sources

- 2015 County Health Rankings
- 2014 County Health Rankings
- Allen County Health Risk and Community Needs Assessment
- Auglaize County Health Assessment
- · Center for Disease Control
- Centers for Medicare and Medicaid Services
- Ohio Annual Cancer Report 2015
- National Cancer Institute State Cancer Profiles
- · Ohio Department of Health Center for **Public Statistics**
- Putnam County Community Health Assessment
- Secondary Data Updates to the 2010 Putnam County Health Assessment
- U.S. Census Bureau American Community Survey

Other sources

Patient discharges by county

Collaborating partners

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

- Allen County Community Needs Assessment Steering Committee
- Auglaize County Community Needs Assessment Steering Committee
- · Center for Social Research, Indiana University-Purdue University, Fort Wayne
- Putnam County Community Needs Assessment Committee
- The Community Sustainability Advisory Committee
- The Hospital Council of Northwest Ohio
- The Ohio State University College of Public Health

Community input

T.R. §1.501(r)-3(b)(6)(iii)

No written comments were received on the most recently completed CHNA.

Input from members of the community was obtained through focus groups and surveys held from January-April 2016.

A focus group was comprised of the members of the Community Health Improvement Plan (CHIP) Committee for Allen County. The CHIP Committee includes community stakeholders and representatives of organizations knowledgeable and interested in community health issues. Participation on the CHIP committee allowed community leaders and public health experts to discuss their concerns in a small group setting. The CHIP committee provided input about community capacity including organizations and resources available to address community needs.

A general survey was used to gather information about significant health needs from community members, stakeholders, providers and public health experts. The survey, given both on paper and online, collected qualitative data about community-perceived health needs. Paper copies were used to collect information from low income, minority, and at-risk community members in an effort to include the opinions of people with limited computer access. Paper copies were distributed to neighborhood associations, a drop in center for adults with mental illness, substance abuse issues, and homeless, and a local soup kitchen. The surveys consisted of forced-choice and open-ended questions. Survey responses were anonymous. The purpose of the survey was to obtain the perceptions, concerns, and identify barriers for community members, especially members of the poor and underserved populations. The forced-choice questions on the survey were: 1) From your perspective, what health topics are most burdensome to our community 2) Rank the health topics you feel require our immediate attention 3) From your perspective, what health issues are troubling the youth within our community. The open ended questions were: 1) From your experience, what are the financial barriers that prevent individuals from receiving health care in our community 2) From your perspective, what other barriers to receiving health care do people experience in our community.

Individuals from the hospital examined the data from the various community sources and discussed the alignment of this data with the experience and observations of senior hospital leadership. The meeting attendees ranked the health needs based on four weighted criteria: the size of population (4), the severity of health need (3), the ability to evaluate outcome data (2), and the current community capacity to address the health need (1).

The ranking of health needs based on weighted criteria was developed by the CHNA Collaborative of Mercy Health. Members of the CHNA Collaborative Committee included Mercy Health employees with the following areas of expertise: mission, finance, corporate responsibility, legal and strategic planning.

Organizations providing input

Organization providing input	Nature and extent of input	Medically underserved, low- income or minority populations represented by organization
Allen County Health Department	Member of the Allen County 2014-2016 Community Health Improvement Plan Committee focus group	Many populations
Allen County Jobs and Family Services	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus and survey group	Low-income
Area Agency on Aging	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus and survey group	Elderly
Auglaize County Health Department	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus group	Many populations
Auglaize County Strategic Planning Committee	Community leaders; Members part of survey group.	Community at large
Changing Seasons	Patrons participated in survey	Mental illness, substance abuse issues and homeless
Coleman Professional Services	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus and survey group	Mentally ill
Council on Aging	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus and survey group	Elderly
Family and Child First Council	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus and survey group	Children and families
Lima Allen County Regional Planning Commission	Member of the Allen County 2014-2016 Community Health Improvement Plan Committee focus group	Community at large
Lima City Schools	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus group	Children and families

Organizations providing input ...continued

Organization providing input	Nature and extent of input	Medically underserved, low- income or minority populations represented by organization
Lima Memorial Health System	Member of the Allen County 2014-2016 Community Health Improvement Plan Committee focus group	Many populations
Mental Health and Recovery Services Board	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus and survey group	Mentally ill and addicts
Ohio State University Lima Campus	Member of the Allen County 2014-2016 Community Health Improvement Plan Committee focus and survey group	Young adults
Our Daily Bread Soup Kitchen	Patrons participated in survey	Low-income
Partners for Healthy Putnam County	Community leaders; Members part of survey group.	Community at large
Partnership for Violence Free Families	Member of the Allen County 2014-2016 Community Health Improvement Plan Committee focus and survey group	Victims of abuse
Putnam County Health Department	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus group	Many populations
West Central Ohio Regional Health Care Alliance	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus and survey group	Community hospitals
West Ohio Health Ministries	Member of the Allen County 2014-2016 Community Health Improvement Plan Committee focus and survey group	Faith organizations and minority populations
YMCA	Member of the Allen County 2014–2016 Community Health Improvement Plan Committee focus and survey group	Children and families

Executive summary

Significant health needs

T.R. §1.501(r)-3(b)(4)

ACCESS TO HEALTH SERVICES

Access to Health Services is served when community members have access to primary care providers and health insurance coverage.

Capacity and adequacy of service levels

- The ratio of population to primary care physician is 1,402:1 in Allen County, 2,182:1 in Auglaize County and 2,280:1 in Putnam County. The Ohio ratio of population to primary care physician is 1,336:1.
- At least 87% of adults in the community report using one or more doctors or healthcare professionals for routine medical care.
- The percentage of adults who report having health insurance coverage is 89% in Allen County, 88% in Auglaize County and 95% in Putnam County.
- The percentage of children with health insurance coverage is 95% in Allen County, 95% in Auglaize County and 94% in Putnam County. The percentage of adults and children with health insurance coverage in the community exceeds the Ohio healthcare coverage percentages.

Current service providers

St. Rita's Medical Center provides services to ensure access to primary care providers and health insurance coverage. Other service providers in the community include Lima Memorial Health System, Bluffton Hospital, Health Partners of Western Ohio, Mental Health and Recovery Services, West Central Ohio Health Ministries, primary care and specialty care providers.

CANCER

Cancer needs are served when community members have access to services for early detection, treatment and prevention education.

Capacity and adequacy of service levels

- · Cancer is the leading cause of death in Putnam County and the second leading cause of death in Allen and Auglaize counties.
- The cancer incidence rate per 100,000 is 454.4 in Allen County, 478.3 in Auglaize County and 393.6 in Putnam County. The statewide incidence rate is 439.1.
- The incidence rate and age adjusted death rate for breast cancer is greater in the community than statewide.
- The incidence rate and age adjusted death rate for colorectal cancer is greater in the community than statewide.
- The incidence rate for oral cavity and pharynx cancer is greater in the community than statewide.
- The age adjusted death rate for prostate cancer is higher within the community than statewide.
- The rate of women receiving mammography screening for breast cancer is increasing, but remains below the Ohio screening rate for Auglaize County.
- Colon cancer screening is on an increasing trend. The percentage of community members who are screened is greater than the statewide screening rate.

Current service providers

St. Rita's Medical Center provides services for the prevention, early detection and treatment of cancer. Other cancer service providers in the community include Lima Memorial Health System, Bluffton Hospital, Health Partners of Western Ohio, American Cancer Society, the Breast Cancer Awareness Coalition, the Colorectal Cancer Coalition, primary care and specialty care providers.

DIABETES

Diabetes needs are served when community members have access to diagnosis, treatment and coordination of care for their diabetes.

Capacity and adequacy of service levels

- A diabetes diagnosis has been given to 14% of adult residents in Allen County, 12% in Auglaize County and 11% in Putnam County. In Ohio, 11% of residents have received a Diabetes diagnosis.
- For the Medicare population, the diagnosis rate in the community is as high as 30%.
- Routine monitoring of diabetes is reported by 83% of adult residents in Allen County, 86% in Auglaize County, and 84% in Putnam County.
- The Ohio age-adjusted death rate for diabetes is 26.1. The Putnam County rate exceeds the state rate at 28. The rates for Allen and Auglaize are below the state rate per 100,000 people.

Current service providers

St. Rita's Medical Center's Diabetes Clinic focuses on early diagnosis, treatment and coordination of care. Other service providers include Lima Memorial Health System, Bluffton Hospital, Health Partners of Western Ohio, Area Agency on Aging, Activate Allen County, primary care and specialty care providers.

DISABILITIES

Disabilities needs are met by providing services to the population that is limited in any activities because of physical, mental or emotional problems.

Capacity and adequacy of service levels

The percentage of the population reporting a disability is 14.5% in Allen County, 11.2%, in Auglaize County and 9.4% in Putnam County.

Current service providers

St. Rita's Medical Center offers a variety of services to address the needs of disabled persons. Other service providers include: Lima Memorial Health System, Bluffton Hospital, Health Partners of Western Ohio, Allen County Board of Developmental Disabilities, Auglaize County Board of Developmental Disabilities, Putnam County

Board of Developmental Disabilities, Allen County Council on Aging, Children's Developmental Center, The ARC of Allen County, primary care and specialty care providers.

EXERCISE, NUTRITION AND WEIGHT

Exercise, nutrition & weight needs are served by providing coordinated care, education and programs that enable healthy behaviors.

Capacity and adequacy of service levels

- The percentage of the population that is obese or overweight is 67% in Allen County, 71%, in Auglaize County and 71% in Putnam County. The Ohio percentage of residents that is obese or overweight is 65%
- The percentage of adults who engage in physical activity three or more times a week in Allen County is 70%, Auglaize County is 73%, Putnam County is 74% and Ohio is 74%.
- Within the community, the percentage of adults who do not engage in physical activity outside of their regular job is greater than the statewide percentage of 26%.
- The rates of low-income preschool students, 3rd grade students and teens who are obese or overweight are higher within the community than Ohio rates.

Current service providers

St. Rita's Medical Center operates the Health Management Group to coordinate care and educate obese patients. Other service providers include Lima Memorial Health System, Bluffton Hospital, Health Partners of Western Ohio, Activate Allen County, Creating Healthy Communities, Allen County Bike and Pedestrian Task Force, primary care and specialty care providers.

HEART DISEASE AND STROKE

Heart disease and stroke needs are served by providing cardiac services, treatment and education.

Capacity and adequacy of service levels

- Heart disease is the leading cause of death in Allen and Auglaize counties and the second leading cause of death in Putnam County.
- For the Medicare population within the community, rates exceed Ohio rates for the following conditions: atrial fibrillation, heart failure, hyperlipidemia, hypertension, ischemic heart disease and stroke.
- The age adjusted death rate due to cerebrovascular disease in Allen County is 51.1, Auglaize County is 48.6, Putnam County is 47.4 and Ohio is 46.1 deaths per 100,000 people.
- The age adjusted death rate due to coronary heart disease in Allen County is 164.9, Auglaize County is 164.7, Putnam County is 130.8 and Ohio is 144.5 deaths per 100,000 people.

Current service providers

St. Rita's Medical Center offers cardiac services, treatment and education. Other service providers include Lima Memorial Health System, Bluffton Hospital, Health Partners of Western Ohio, primary care and specialty care providers.

IMMUNIZATION AND INFECTIOUS DISEASE

Immunization and infectious disease needs are served by providing access to recommended immunizations throughout life to reduce vaccine preventable diseases.

Capacity and adequacy of service levels

- The percentage of the population that received their flu shot in the past year in Allen County is 50%, Auglaize County is 40% and Putnam County is 48%.
- The incidence rates for chlamydia and gonorrhea are higher in Allen County than statewide averages.
- The HIV/AIDS prevalence rate in Allen County is 174, Auglaize County is 40, Putnam County is 21 and Ohio is 178 per 100,000 people.

Current service providers

The following providers address immunization and infectious disease needs of the community: Allen County Health Department, St. Rita's Medical Center and affiliated services, Lima Memorial Health System, primary care and specialty care providers.

MATERNAL, FETAL AND INFANT HEALTH

Maternal, fetal and infant health needs are served by providing access to prenatal, birth and postpartum care; providing education; and encouraging policies in businesses and public places that promote healthy behaviors.

Capacity and adequacy of service levels

- The infant mortality rate for 2012 in Allen County is 8.6, Auglaize County is 5.8, Putnam County is 8.0 and Ohio is 7.52 deaths per 1,000 live births within the first year of life.
- The percentage of mothers that received early prenatal care in Allen County is 82.6%, Auglaize County is 89.8%, Putnam County is 90.1% and Ohio is 86.7%.
- The percentage of mothers who smoked during pregnancy in Allen County is 22.9%, Auglaize County is 20.1%, Putnam County is 10.6% and Ohio is 17.8%.
- The teen birth rate per 1,000 live births in Allen County is 41.4, in Auglaize County is 29.8, in Putnam County is 20.6 and in Ohio is 33.5.
- The teen pregnancy rate per 1,000 females ages 15–19 is 59.3 in Allen County, 42.1 in Auglaize County, 34.5 in Putnam County and 55.3 in Ohio.

Current service providers

St. Rita's Medical Center provides maternal, fetal and infant health through The Birthplace at St. Rita's and the Level II Special Care Nursery. Other providers include Lima Memorial Health System, Bluffton Hospital, Allen County Health Department, Help Me Grow, Activate Allen County, Breastfeeding Coalition, primary care and specialty care providers.

MENTAL HEALTH

Mental health needs are served by providing coordinated care, education, support and programs that enable healthy behaviors.

Capacity and adequacy of service levels

- The average number of reported mentally unhealthy days per month was 4 in Allen County, 3.2 in Auglaize County, 1.5 in Putnam County and 3.8 in Ohio.
- The age adjusted suicide rate in Allen County is 9.7, Auglaize County is 10.2, Putnam County is 7.3 and Ohio is 12 deaths per 100,000 people.
- The ratio of population to mental health providers is 885:1 in Allen County, 3,532:1 in Auglaize County, and 2,005:1 in Putnam County. The Ohio ratio of population to primary care physician is 716:1.

Current service providers

St. Rita's Medical Center provides comprehensive mental health and chemical dependency services. Other service providers include Mental Health and Recovery Services Board, Partnership for Violence Free Families, Coleman Professional Services, Family Resource Center of Northwestern Ohio, Health Partners of Western Ohio, SAFY Behavioral Services, Open Gate, primary care and specialty care providers.

ORAL HEALTH

Oral health needs are served by providing access to dental providers, access to dental insurance coverage and access to dental services.

Capacity and adequacy of service levels

- The percentage of adults who could not receive needed dental care in Allen County is 12.4%, Auglaize County is 9.2%, Putnam County is 5.2% and in Ohio is 14.8%.
- The percentage of adults who have dental insurance coverage is in Allen County is 63.6%, Auglaize County is 64.2%, Putnam County is 78.2% and in Ohio is 63.6%.
- The percentage of youth who have never visited a dentist is in Allen County is 11.1%, Auglaize County is 18.1%, Putnam County is 18.6% and in Ohio is 12.4%.

 The ratio of population to dental health providers is 2,286:1 in Allen County, 2,292:1 in Auglaize County and 5,700:1 in Putnam County. The Ohio ratio of population to primary care physician is 1,848:1.

Current service providers

Oral health care providers include Health Partners of Western Ohio, dentists and Rhodes Dental Hygiene Clinic.

RESPIRATORY DISEASE

Respiratory disease needs are served by providing coordinated care, education, support, and encouraging facilities to establish smoke related policies that enable healthy behaviors.

Capacity and adequacy of service levels

- In Allen County, trends indicate that the number of residents diagnosed with asthma has decreased to 8% in 2014 from 11% in 2009.
- Per the Ohio Department of Health, 13.6% of adults in Region 3 have been diagnosed with asthma. Region 3 includes Allen, Auglaize, Putnam and additional counties.
- The percentage of youth diagnosed with asthma is in Allen County is 7.5%, Auglaize County is 10.6%, Putnam County is 18.0% and in Ohio is 15.4%.
- The percentage of the Medicare population diagnosed with COPD is in Allen County is 16.2%, Auglaize County is 12.1%, Putnam County is 10.6% and in Ohio is 13.4%.
- The emergency room visit rate due to asthma in Allen County is 73.7, Auglaize County is 42, Putnam County is 35 and Ohio is 52.9 visits per 10,000 people.

Current service providers

St. Rita's Medical Center provides services for the early diagnosis, proper treatment and education for respiratory diseases. Other service providers include Lima Memorial Health System, Health Partners of Western Ohio, Activate Allen County, Creating Healthy Communities, Allen County Tobacco Free Coalition, primary care and specialty care providers.

SUBSTANCE ABUSE

Substance abuse needs are served through treatment and prevention programs.

Capacity and adequacy of service levels

- The drug poisoning mortality rate in Allen County is 8, in Auglaize County is 7, in Putnam County is 5 and is 15 in Ohio per 100,000 people.
- The percentage adults who drink excessively in Allen County is 17%, Auglaize County is 18%, Putnam County is 23% and in Ohio is 18%.
- The percentage adults who smoke in Allen County is 23%, Auglaize County is 16% and in Ohio is 21%.

Current service providers

St. Rita's Medical Center offers treatment and referrals through our Behavioral Health Services. Other providers include Mental Health and Recovery Services Board, Lutheran Social Services, Lima UMADOAP, Coleman Professional Services, Covenant Ministries, Allen County Health Department, Central Ohio Poison Center and Partnership for Violence Free Families.

Prioritization of health needs

For each of the identified health topics, CHNA Committee analyzed the specific health indicators by county in comparison to state or national data. If the county indicator was less favorable than the state or national indicator, the issues were considered a potentially significant community health need and included in the prioritization process.

Specific criteria were used to prioritize health needs, including scope, severity, burden, urgency of need, the estimated feasibility and effectiveness of possible interventions, and the importance the community placed on addressing the need. From this data emerged the scope and severity of the health need.

A community survey measured the burden and urgency of the health need. The survey incorporated disparate groups and community leaders in the local community. Prioritization participants used a survey to rank each

health need based on the most troubling health topics to the community, the health topics requiring immediate action, and the health topics most troubling to youth. Participants also ranked the most common financial barriers to access and the most common other barriers to access for health care services.

The estimated feasibility and effectiveness of possible interventions were discussed between the CHNA Committee and senior leaders at St. Rita's Medical Center who have the authority to commit hospital resources to address community needs.

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, NUTRITION AND WEIGHT

The primary service area shows a higher percentage of adults who are overweight and obese compared to national and state averages. Each county's Community Health Improvement Plan has identified adult and youth obesity as a prioritized health need. From the health needs assessment, it show that chronic illnesses which can be directly correlated with exercise, nutrition and weight such as heart disease, cerebrovascular disease, diabetes, hypertension and hyperlipedema are underperforming in indicators compared to state and national averages.

MENTAL HEALTH AND SUBSTANCE ABUSE

Within the primary service area, community leaders, subject matter experts and community members show heightened concern regarding mental health needs and substance abuse. Age-adjusted death rate due to suicide, depression, and the opiate and heroin epidemic have been identified as high-priority focus areas to address.

CANCER

St. Rita's primary service area shows a higher incidence rate per 100,000 individuals in breast, colorectal and other forms of cancer. St. Rita's is also behind national and state averages for cervical cancer screening. Community leaders and health care professionals have identified a gap in the community for tobacco cessation services, which has been shown to be a risk factor for cancer.

MATERNAL, FETAL AND INFANT HEALTH

St. Rita's primary service area, specifically in Allen County, shows the following underperforming health indicators: lower rates of mothers who received early prenatal care, significantly higher incidence of mothers smoking during pregnancy, and babies with low birth weight.

ACCESS TO HEALTH SERVICES

Community members have identified barriers for individuals seeking medical advice or treatment, including continued gaps in insurance coverage coupled with high cost of care and prescription drugs and the inability to understand the complexities of health care.

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, NUTRITION AND WEIGHT

Resources available to address the exercise, nutrition, and weight needs of the community include St. Rita's Medical Center, Lima Memorial Health System, Bluffton Hospital, Health Partners of Western Ohio, Activate Allen County, Creating Healthy Communities, Allen County Bike and Pedestrian Task Force, YMCA, United Way, primary and specialty care providers.

MENTAL HEALTH AND SUBSTANCE ABUSE

Resources available to address the mental health and substance abuse needs of the community include St. Rita's Medical Center, Mental Health and Recovery Services Board, Lutheran Social Services, Lima UMADOAP, Coleman Professional Services, Partnership for Violence Free Families, Family Resource Center of Northwestern Ohio, Health Partners of Western Ohio, SAFY Behavioral Services, Open Gate, Covenant Ministry, Allen County Health Department, Central Ohio Poison Center, primary and specialty care providers.

CANCER

Resources available to address the cancer needs of the community include St. Rita's Medical Center. Lima Memorial Health System, Bluffton Hospital, Health Partners of Western Ohio, the American Cancer Society, The Breast Cancer Coalition, the Colorectal Cancer Coalition, primary and specialty care providers.

MATERNAL, FETAL AND INFANT HEALTH

Resources available to address the maternal, fetal, and infant health needs of the community include St. Rita's Medical Center, Lima Memorial Health System, Bluffton Hospital, Allen County Health Department, Help Me Grow, Activate Allen County, Breastfeeding Coalition, Family and Children First Council, March of Dimes, Guiding Light Teen Maternity Home, Heartbeat of Lima, primary and specialty care providers.

ACCESS TO HEALTH SERVICES

Resources available to address the need for access to health services in the community include St. Rita's Medical Center and affiliated services, Lima Memorial Health System, Bluffton Hospital, Health Partners of Western Ohio, Mental Health and Recovery Services, West Central Ohio Health Ministries, Area Agency on Aging, United Way, public transportation, transportation services, primary and specialty care providers.

Progress on Health Priorities Identified in the 2013 Health Needs Assessment

OBESITY/WEIGHT

Initiatives	Evaluation of Impact
Healthy youth initiatives	St. Rita's Healthy Kids Fair: St. Rita's found it to be more effective to have the local YMCA to coordinate the fair and St. Rita's to sponsor. The program continues to increase awareness and excitement about a healthy lifestyle for kids and parents. Veggie U: The outcome information provided by teachers implemented in their classrooms, proved this program to be effective in expanding students eating habits to include more vegetables and fruits through pre and post tests and lunch observations.
Healthy eating	Farmers Market: This initiative expanded from a stand on St. Rita's property to multiple stands in a central location in the community. Expanded efforts to provide fresh produce in convenient stores has proven to be effective in healthy food options in food deserts.
Exercise and physical activities	Fitness Events: Found it was effective to financially sponsor running and cycling events. To further participation, developed incentives which made the events more effective by increasing attendance. Limitation of this initiative is that it was reaching a very specific audience and a need to develop opportunities for individuals with other interests. Heart Chase event: Increase in participation and support provided awareness around cardiac wellness and promoting an active lifestyle. Participants are primarily St. Rita's employees and there is a need to increase community engagement.
Healthy lifestyle awareness initiatives	Health Fairs: In the early stages of the CHNA implementation plan, topics addressed by health fair participation were broad and generalized. On-going evaluation showed need to focus topics on prioritized health needs. By the end of the implementation plan education materials and resources were in alignment with these health needs. Healthy St. Rita's: Due to screenings, awareness and incentive opportunities, the impact of this program has increased employees' healthy lifestyle choices. Extensive data is available for specific objectives achieved.
Community collaborative	Activate Allen County: Data outcome information demonstrates that the program has exceeded expectations. Outcomes include environmental improvements, policy and procedure changes, strengthened community collaboration which have all increased access to healthy food options and physical activities. Recent evaluation indicates concern around sustainability of collaborative and a need for financial and organizational plan.

MENTAL HEALTH

Initiatives	Evaluation of Impact
Behavioral Health Program	Behavioral Health Services: Treatment model has evolved to a clinical institute that is an evidence-based model. Through this change, substantial improvement has recently been made in regards to the ability to collect data which provides information that measures the program effectiveness for individual patients. This data indicates the individual patient's perception of improved well-being. A challenge for the program has been recruiting physicians and the demand for the services.
	Patient Intervention Treatment Team: Designed to improve stabilization and community connections for individuals with Severe and Persistent Mental Illness, outcomes indicate a reduction in ED visits, increase in persons served by a primary care provider and individuals working or involved in a community based activity. Behavioral Access Center: Evaluation indicates that this program has improved access and the ability to connect individuals to needed behavioral health resources or level of care in a timely manner. ED time has decreased for behavioral health patients.
Community partners	Mental Health and Recovery Services Board and Coleman Professional Services: Collaboration has been effective in addressing continuum of care needs. Strengthened additional partnerships in the community.

CANCER

Initiatives	Evaluation of Impact
Community outreach and education	Community Education Events: Appropriate and effective events have been held to increase knowledge about cancer and prevention. Educators have been well received by the community. Cancer education team performs ongoing evaluation to address specific cancers of concern in the community. Breast Cancer Coalition and Colorectal Cancer Coalition: Appropriate and effective coalitions that perform ongoing evaluation as to effective modes of education and awareness. Cancer Resource Center: Provide information, resources and support based on individual need and distress screening. Current data indicates appropriate utilization of the program and connection to needed resources. Further specific data could enhance the measure of impact.
Sponsorship	American Cancer Society: Annual evaluation and dialogue around sponsorship and objectives that align with local community health improvement plans.
Clinical Research Program	ECOG Program: Participating in ongoing cancer research furthers knowledge for the medical community. St. Rita's remains committed to providing a clinical research program.

SUBSTANCE ABUSE

Initiatives	Evaluation of Impact
Substance abuse services	Substance Abuse Services: In evaluating both outpatient and acute care services, it was determined in 2015 to change the treatment model to a co-occurring diagnosis program with the Behavioral Health Institute. Medical Withdrawal Services: In evaluating service, design was changed to offer medical withdrawal services throughout medical center instead of one unit.
Tobacco free	Healthy Life Style Districts : Community collaboration effort with Activate Allen County—impact of efforts has included increase in businesses and organizations adopting tobacco free policies. The departure of dedicated resources has left a gap for tobacco cessation services.

MATERNAL, FETAL AND INFANT HEALTH

Initiatives	Evaluation of Impact
Ante partum	Ante partum education classes: Over the years a decrease in participation has caused implementation of varying methods to educate individuals including on-line, collaboration with community partners and traditional classes. Individuals completing antepartum education are more prepared for the birthing process and infant safety care.
Breastfeeding support	Breastfeeding support services: Community collaboration has been effective in addressing workplace policy changes to support breastfeeding. Lactation Specialists: St. Rita's Breastfeeding Support Group has been dedicated to increase prolonged duration for breastfed infants. Attendance has been consistent and demonstrates a continual need. Feedback from participants is positive.

