



2022 Community Health Needs Assessment

Mercy Health, Springfield

2022 Community Health Needs Assessment

Mercy Health – Springfield Regional Medical Center Adopted by the Springfield Board of Trustees, October 5, 2022

As a Ministry of which Mercy Health Springfield Regional Medical Center is a member, Bon Secours Mercy Health has been committed to the communities it serves for nearly two centuries. This longstanding commitment has evolved intentionally, based on our communities' most pressing health needs.

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

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

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

Written comments regarding the health needs that have been identified in the current CHNA should be directed to Carolyn Young.

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 More than **\$376 million** provided in community benefits

30,311 associates 

\$57,801,991 payroll taxes paid 

 **19%** Medicaid patients

50% Medicare patients

27% commercial payer patients

 **2,774** employed and affiliated physicians and advanced practice clinicians

9,380 employed and contingent nurses

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Executive Summary

Overview

Springfield Regional Medical Center (Service Area: SRMC) strives to ensure all residents of Clark County and surrounding communities have access to advanced medical technology and quality care. These areas are represented by the following ZIP Codes: : 43010, 45319, 45323, 45341, 45344, 45349, 45368, 45369, 45372, 45501, 45502, 45503, 45504, 45505 and 45506.

Organizations Consulted:

- Wellspring
- Clark County Combined Health District
- Rocking Horse Center
- Mercy Health
- Mental Health & Recovery Board
- Clark County ESC
- City of Springfield
- Clark County, Ohio
- Family & Children's First Council
- Ohio Valley Surgical Hospital
- Community Health Foundation
- Wittenberg
- Mental Health Services, Clark Co.
- Developmental Disabilities of Clark Co.
- Springfield Foundation
- United Senior Services
- CCCHD
- Springfield Metropolitan Housing
- Second Harvest Food Bank
- Sheltered Inc. (Interfaith Hospitality Network)
- McKinley Hall
- Clifton Ave. Church of God
- Nehemiah Foundation
- NAACP (Springfield/Clark Co.)
- Welcome Springfield (Hispanic/Latino)
- Springfield Promise Neighborhood
- Family & Youth Initiatives (FYI)

Methods of collecting information & prioritizing needs:

- Regional participation: Community Survey (Digital & Print Versions made available)
- Regional participation: Provider Survey (Digital)
- Regional participation: Focus Groups
- Community Themes & Strengths Assessment (in Partnership with Champaign Co. Health District)
- Forces of Change (in Partnership with Champaign Co. Health District)
- Data Review & Prioritization Meeting with Urbana Hospital Leadership Team
- Community Prioritization (in partnership with Champaign Co. Health District)

Significant Health Needs

1. Access to care
2. Health Risk Prevention – Social Determinants of Health
3. Behavioral Health
4. Chronic Disease: Heart Disease, Cancer, Stroke
5. Maternal Infant Health

Prioritized Health Needs

1. **Access to Care:** Focus on Primary Care, Women’s Health, Appropriate Point of Care: (Non-Emergent Options: Urgent, Palliative, Paramedicine, Virtual)
2. **Health Risk Prevention** – Social Determinants of Health with Specific Focus on Environmental, Education, Transportation and Food Access
3. **Behavioral Health** – Including Mental Health, Addiction (Including overdose deaths) and Trauma
4. **Chronic Disease:** Heart Disease, Stroke and Cancer (with specific focus on Breast, Lung & Bronchus, Colon & Rectum, and Melanoma/Skin Cancer)
5. **Maternal Infant Health & Vitality**

Resources Available

City of Springfield	Mercy Health
Clark County Combined Health District	NAACP (Springfield/Clark Co.)
Clark County ESC	Nehemiah Foundation
Clark County, Ohio	Ohio Valley Surgical Hospital
Clifton Ave. Church of God	Springfield Promise Neighborhood
Community Health Foundation	Springfield Metropolitan Housing
CCCHD	Rocking Horse Center
Developmental Disabilities of Clark Co.	Second Harvest Food Bank
Family & Children's First Council	United Senior Services
Family & Youth Initiatives (FYI)	Welcome Springfield (Hispanic/Latino)
Interfaith Hospitality	Wellspring
Mental Health Services, Clark Co.	Wittenberg
McKinley Hall	Springfield Foundation

Feedback

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

Our Mission

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

Our Vision

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

Our Values

Human Dignity

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

Integrity

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

Compassion

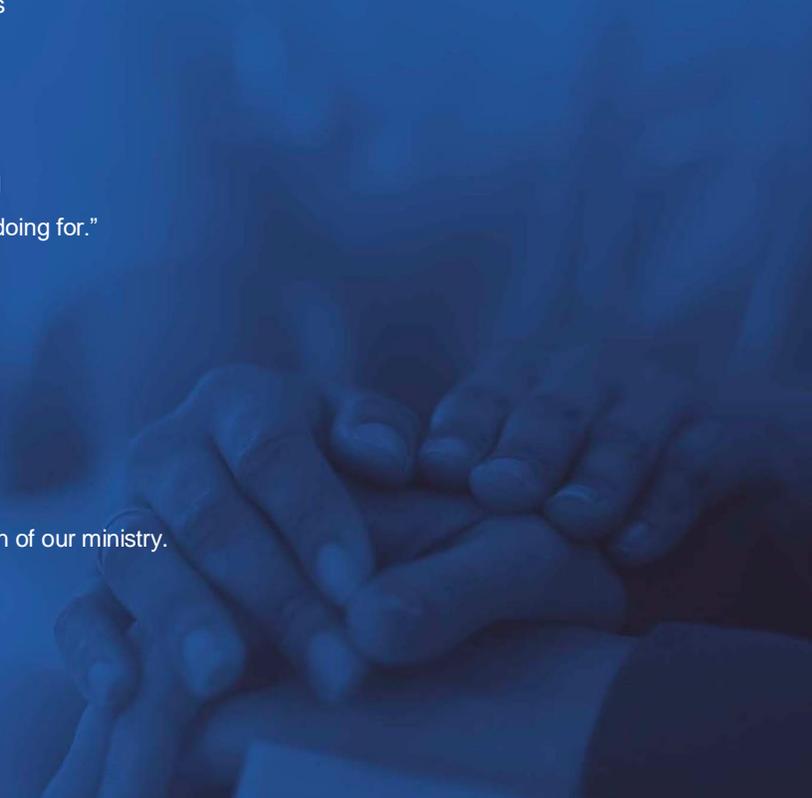
We commit to accompanying those we serve with mercy and tenderness, recognizing that "being with" is as important as "doing for."

Stewardship

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

Service

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



Facilities Description

For over 100 years, Mercy Health has provided comprehensive medical services for residents of Clark County and surrounding communities. As a Catholic Health Ministry, we strive to meet the health needs of the communities we serve

Springfield Regional Medical Center is a 220-bed hospital. As Springfield's only full-service hospital, we offer complete care, including 24/7 emergency services, maternity services, critical and intensive care, orthopedic, cardiovascular care and more — all provided by skilled doctors and highly trained health professionals.

Community Served by the Hospital

SRMC strives to ensure all residents of Clark County and surrounding communities have access to advanced medical technology and quality care. These areas are represented by the following ZIP Codes: 43010, 45319, 45323, 45341, 45344, 45349, 45368, 45369, 45372, 45501, 45502, 45503, 45504, 45505 and 45506.

Springfield City proper is predominantly a manufacturing community with jobs still rooted in that industry today. As a county, our primary demographics are comprised of residents who are: White, Non-Hispanic at 84.1%, African American at 8%, Hispanic at 3.4% and Two or more races at 3.6%. Forty-seven percent (47%) of our residents are married, while 29% have never married or are divorced at 13.7%. Forty-five percent (45%) of our married households have families, while 14% are single, female parent families. 28.9% of our residents are individuals living alone.

Clark County has higher than average health risk factors and higher averages of individuals with disabilities, sexually transmitted diseases, and chronic diseases. Additionally, babies in Clark County are more likely to be born below average birth weight and pre-term in comparison with the state averages. Nearly 20% of Clark County women who are pregnant smoke during their pregnancy and only about 66% of Clark County women receive Adequate (or better) prenatal care.



Process and Methods

Springfield Regional Medical Center participated in a regional Community Health Needs Assessment (CHNA) process through participation with the Health Collaborative and Greater Dayton Area Hospital Association as well as a local Community Health Needs Assessment (CHNA) process coordinated by the Clark County CHNA/CHIP Stakeholder Group (“Stakeholder Group” or “Group”). Because the regional assessment included Cincinnati, Dayton, Springfield, and Urbana, we wanted to make sure the data collected, and priorities selected had the appropriate mix of localized data and health prioritization.

The Clark County Stakeholder Group included a team of community leaders, organizations, non-profits, education, and faith-based entities, including Clark County Combined Health District, Mental Health and Recovery Board of Clark, Greene, and Madison Counties, Rocking Horse Center, and Springfield Regional Medical Center, The Springfield Foundation, The Community Health Foundation, United Senior Services, Clark County ESC and more. The health district steering committee provided executive oversight.

Here for reference is an overview of the Regional CHNA process and methods for collecting data. This information was included in the Clark County Mobilizing for Action through Planning and Partnerships (MAPP) process as detailed below:

For the collaborative design, the process for gathering primary data, and the process for identifying, collecting, interpreting, and analyzing secondary data, the consultants referenced numerous methods for both qualitative and quantitative data. The consultants sought data that reflected recent as well as emerging issues by people who lived in the hospitals’ service areas, with attention to vulnerable populations and social determinants of health. Secondary data provided information about demographics, health conditions, and health-related issues. Primary data reflected the opinions and attitudes of individuals and agencies motivated to attend a meeting or complete a survey. Their passion and level of interest is helpful to hospitals who are contemplating future programs that depend on community support. While not designed to be statistically representative of all 3.3 million residents of the region, there was often remarkable alignment among the top 5-10 priorities from meetings, individual surveys, agency surveys, and health departments.

Here is a brief description of the activities and tools utilized most often:

- Analysis of priorities to identify areas of consensus from all data sources
- Communication by email to prospective meeting attendees
- Community meetings that included a visual, interactive, and collective feedback exercise Comparison of most frequent topics by geographic area and across data source (i.e., community meeting participant or survey response from individual, agency, or health department)
- Consultation with topic experts (i.e., epidemiology, air quality, public health)
Design and feedback meetings with hospital and health department representatives
Discourse analysis to categorize and analyze key concepts and topics in all collected responses



- Geographic Information System (GIS) mapping program to identify compelling data and represent data visually
- Marketing materials for hospitals, health departments, and meeting hosts to use or adapt to their needs
- Meeting sites, with refreshments, in convenient locations that were welcoming, accessible, and perceived as community asset or resource
- Online databases for researching accurate and reliable data
- Oversampling with vulnerable populations and the general public, including focus groups, use of interpreters and translators, and surveys administered one-to-one in person and via tablet at events
- Proofreading at least twice of secondary data entry for accuracy and consistency
- Regular communication with hospital and health department representatives
- Review of reports and publications on health and health-related topics
Scripts, handouts, and supplemental resource materials provided to trained facilitators and scribes
- Shared data at meetings in form of County Snapshots and Community Need Index maps
- Standard set of stakeholder questions (for individual, agency, meeting, health department)
- SurveyMonkey (Gold) for tracking responses at meetings, from interviews, or on surveys, and use of feature to create custom tags for each response
- Tabulation of responses by geographic area, region-wide and for immigrants, children, and urban residents
- Team approach with diverse consultants
- Trend analysis that considered local data measures worse than state and/or U.S. measures and/or trending worse than prior years
- Word count to determine frequent categories and to identify dominant topic within a category (e.g., how many times 'heroin' was mentioned within 'Substance abuse' category)

The Clark County CHNA Stakeholder Group leveraged the Mobilizing for Action through Planning and Partnerships (MAPP) process to identify top priorities. The MAPP process is a community-driven strategic planning tool for improving community health. Facilitated by public health leaders, this tool helps communities apply strategic thinking to prioritize public health issues and identify resources to address them. MAPP is an interactive process that can improve the efficiency, effectiveness, and, ultimately, the performance of local public health systems.

Youth Risk Behavior Survey (YRBS)

Additionally, in partnership, Clark County Completed a Search Institute Survey - Collecting Youth Data from the schools to identify youth risk. The survey was distributed collaboratively by Clark County Combined Health District with the Clark County ESC and local School Administrators. The YRBS data was collected in 2019 and in 2021.

Clark Co. Combined Health District Data

Clark County Combined Health District provided data to identify local health needs from current data: hospital discharge data (ICD10 data grouped into different health topics), demographic data (pulled from Census API), market potential data, food access data, school data, birth data, death data, cancer data and infectious disease data.

With the help of the Community Health Leadership Committee in Clark County, we were able to identify 3 top health needs: Chronic Disease, Behavioral Health and Health Risk Prevention. After further review of regional data provided by The Health Collaborative and local data pulled by the Clark County Epidemiologists, the data reflected additional focus areas should be added to the initial list. These topics include Maternal/Infant Health, Healthy Births & Infant Mortality and Access to Care.

Significant health needs

1. Access to care
2. Health Risk Prevention – Social Determinants of Health
3. Behavioral Health
4. Chronic Disease: Heart Disease, Cancer, Stroke
5. Maternal Infant Health

External sources

- Ohio Department of Education (ODE)
- Ohio Department of Health (ODH)
- Springfield Regional Medical Center
- U.S. Census American Community Survey (ACS)
- U.S. Department of Agriculture (USDA)

Collaborating partners

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

- The Health Collaborative
- Greater Dayton Area Hospital Association
- Champaign Health District
- Clark County Combined Health District (Shared Epidemiology with Champaign County)

Other sources

- Development Services Agency
- Center for Disease Control
- SHA
- Factfinder
- Robert Wood Johnson CHR
- CHR
- Ohio Jobs & Family Services
- Mercy Health

Community Input

As part of our regional CHNA data collection process, The Health Collaborative supported by providing tools for community input. Please note the process and methods as described in the published regional CHNA through the Health Collaborative, also listed below for your reference. For full details included in the Health Collaborative Regional CHNA, please see Appendix C.

The needs assessment utilized a mixed-method approach to data collection including secondary quantitative data and primary quantitative (Regional CHNA community and provider surveys) and qualitative (focus groups and interviews) data.

Secondary data collection, beginning in January 2021, sought to understand the greatest health conditions of the region, including prevalence and impact on community members. These results informed the creation of survey items that were organized around a set of co-created research questions.

Each data collection strategy adhered to a recruitment plan to ensure a representative sample of community members, voices of marginalized populations, and providers across the health and social services sectors were captured. All results are summarized for the region which includes the Cincinnati Metropolitan Statistical Area (MSA),¹ Dayton-Kettering MSA (to include Clark County which is not part of the Dayton MSA but is similar in that it borders the Dayton MSA and is not a rural county),² and other rural counties in the geographic service area that are predominately rural and not included in other MSAs.³

1 Includes the following counties: Grant, Butler, Clermont, Hamilton, Warren, Dearborn, Kenton, Boone, Campbell, Brown, Ohio, Union, and Franklin.

2 Includes the following counties: Clark, Montgomery, Miami, and Greene.

3 Includes the following counties: Clinton, Highland, Adams, Preble, Shelby, Darke, Auglaize, and Champaign.



Overall, the scope of data collection was robust and informed the results of this Regional CHNA. This includes:

8,321 community surveys available in five languages. Within this sample, representation was seen across 26 counties, males, females, ages 18-65+, Black/African American, Multiracial, Asian, American Indian, Alaskan Native, White, and Hispanic/Latino populations.

859 provider surveys inclusive of behavioral health, education, emergency medical services, faith-based organizations, federally qualified health centers, justice/corrections, medical care (adult, geriatric, pediatric) oral health, organizations addressing health related social needs and social determinants of health, pharmaceutical, and public health departments.

- Providers also represented administration, direct patient care, academic, support staff, and supervisors/management.
- Providers reported serving a variety of populations including children/youth, people with disabilities, ethnic minorities, people experiencing homelessness, people in the justice system, veterans, young adults, low-income populations, and LGBTQ+ populations.**

Specific Data Collected for Clark County is electronically noted in Appendix A.

Full Regional Assessment is available electronically via Appendix B.

Clark County Combined Health District also facilitated 5 focus groups, including:

- One session was held with the **Latino Coalition**. Made up of community partners/service providers and interested community members.
- One session was held with **Springfield Promise Neighborhood**. Made up of community members.
- Two sessions were held at **Family Youth Initiatives**. One session was primarily attended by community members, with the other primarily attended by partners/service providers.
- One session with **Restored Life Ministries**. Made up of congregation and community members from this neighborhood.



**Excerpt taken from The Health Collaborative Regional Health Needs Assessment and can be located here <https://healthcollab.org/community-health-needs-assessment/>*

Discussion Questions Asked

1. What do you believe are the 2-3 most important characteristics of a healthy community?
2. What makes you most proud of our community?
3. What do you believe is keeping our community from doing what needs to be done to improve health and quality of life?
4. What do you think are the biggest health priorities of the community?

Summary of Responses

What do you believe are the 2-3 most important characteristics of a healthy community?

- Whole Food Nutrition
 - Accessibility to dietary-restricted options
 - Availability of health foods and produce
- Accessible health facilities
 - Safe place for children to play
- Referral system to access services
- Public transportation: No public transport in New Carlisle
- Diversity and inclusion
 - Language services not just access to interpreters. Barriers of interpreters include lack of trust, not comfortable sharing personal information.
 - Access to affordable Insurance
 - Financial stability
 - Stable and Safe Housing
 - Access to quality healthcare

What makes you most proud of our community?

- Close-knit community
- Active support for community
- Rally around people in need
- Community events every weekend: New Carlisle Farmer's Market is a large event
- Opportunity for migrant workers
- Community gardens
- Faith Based Community
- Strong Advocates
- Collaboration among community services/agencies

What do you believe is keeping our community from doing what needs to be done to improve health and quality of life?

- Accessibility (Transportation, healthcare, food, rec centers): The individuals that need help the most can't get it. Those that are at a disadvantage keep getting hit with barrier after barrier, so how can they ever achieve positive health outcomes?
 - Limited Public transportation
- Access to jobs with livable wages
- Lack of affordable housing
- Stigma associated with asking for help/accessing needed services: Mental health, food pantries, etc.
- Lack of trust in services providers among minority populations
- Ideology/Inclusivity/Intolerance
 - Racial and cultural
- Lack of life skills for students
- Vaping: Emphasis on student vaping. There are kids vaping in plain sight during class and the teachers sometimes seem lax about punishment. If they don't see it, there's nothing they can do about it. Teachers feel like they don't hold a lot of power when it comes to being able to do anything about it.
- Parental Education: How do we teach parents that it begins with them? There is a great need to be able to reach parents in the community and educate them about the dangers of vaping. If we start with the parents, hopefully it will help the kids.
- School Lunches: Kids relying on school lunch for nutrition. School lunches are not nutritious and if they want seconds of anything they have to purchase the whole meal. Breakfasts that they offer are unhealthy; the lunch they give you when you don't have money in your account is literally a cheese sandwich. This in turn can take a toll on children's mental health.

- **Mental Health Providers:** Mental health issues have increased since COVID, especially in households that had already seen an increase in domestic violence/abuse. Families are stuck in the same house together during quarantine, which can lead to an increase in already-negative situations. Substance abuse issues have increased along with the feeling of isolation from having to be away from family and friends over the past couple of years. It took a toll having to see family members through windows at the hospital/nursing homes, and sometimes not even being able to be there when someone passes away.
- **Food Scarcity**

What do you think are the biggest health priorities of the community?

- **Mental Health**
 - The effect of COVID: Lack of socialization/interaction; Stress
 - Substance Abuse
 - Suicide: Bullying in school
- **Access** (transportation, health care (including female health care), food, affordable housing, insurance, language)
 - Affordability
- **Parent Education**
- **Financial Stability**
 - Poverty Cliff
 - Livable wages
- **Domestic Violence survivor support**
 - Trauma
- **Dental Care**
- **Lack of services provided on the south side of Springfield**
- **Stigma**

No written comments were received regarding Springfield Regional Medical Center's most recently conducted Community Health Needs Assessment or most recently adopted implementation strategy.

Information and Data Considered in Identifying Potential Need

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

Public health departments	Date of data/information
Clark Co. Combined Health District	2018-2020 Drug Death Report
The Health Collaborative	Information received in December 2021 & February 2022
Ohio Department of Education (ODE)	2018-2020 Clark County Data
Ohio Department of Health (ODH)	2018-2020 Clark County Data
Springfield Regional Medical Center	2018-2020 Clark County Data
U.S. Census American Community Survey (ACS)	2018-2020 Clark County Data
U.S. Department of Agriculture (USDA)	2018-2020 Clark County Data

At-risk populations	Date of data/information
Latino Coalition	March 2022 Focus Group, Community Stakeholder Meeting
Springfield Promise Neighborhood	March 2022 Focus Group, Community Stakeholder Meeting
Family Youth Initiatives	March 2022 Focus Group, Community Stakeholder Meeting
Restored Lie Ministries	March 2022 Focus Group, Community Stakeholder Meeting

Organizations providing input

Organization providing input	Nature and extent of input	Medically under-served, low-income or minority populations represented by organization
Latino Coalition	Focus Group	Hispanic/Minority population
Springfield Promise Neighborhood	Focus Group	Low Income/Minority/Underserved population
Family Youth Initiatives	Focus Group	Hispanic/Minority population, New Carlisle underserved population
Restored Lie Ministries	Focus Group	African American/Minority Population
Clark County Combined Health District	Steering Committee/Facilitator/ Data Gathering	General Public
Clark County ESC	Steering Committee member	Local Schools/School Districts
Rocking Horse Center, FQHC	Steering Committee member	Low Income, Underserved populations
Mental Health & Recovery Board	Steering Committee member	Mental health; individuals in need of mental & behavioral health support
Family and Children’s First council	Steering Committee member	Family & Children
United Senior Services	Steering Committee member	Senior Citizens 55+
Springfield Metropolitan Housing Authority	Steering Committee member	Low Income, Underserved Populations
Community Health Foundation	Steering Committee member	General Public
Citi Lookout	Steering Committee member	Mental Health, Including Low Income and Underserved Populations
Clark County	Steering Committee member	General Public
Clark County Developmental Disabilities	Steering Committee member	Developmentally Disabled
Mercy Health	Steering Committee member	General Public, Including Minority, Low Income and Underserved

Significant Community Identified Health Needs

1. Access to care
2. Health Risk Prevention – Social Determinants of Health
3. Behavioral Health
4. Chronic Disease: Heart Disease, Cancer, Stroke
5. Maternal Infant Health

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

Health Risk Prevention & Social Determinants of Health

- Capacity and adequacy of service levels
 - Social determinants of health are proven to have a lasting impact on health outcomes, and these are prevalent in Clark County: failing public schools, sub- par housing with increasing Blood Lead Levels present in children, limited access to healthy foods with most Clark County Schools providing Free Lunches, Exponential increase of individuals and families relying on local food pantries and limited/inflexible transportation options.
 - Food security and limited and inflexible transportation is being responded to by the community at both an individual and systems level.
 - The Obesity and Physical Inactivity rates are both higher than the state average. This is responded to on both a systems and individualized level by the community.
 - A significant portion of single mothers with children are at or below the poverty level. This is responded to on both a systems and individualized level by the community.
 - The Obesity and Physical Inactivity rates are both higher than the state average.
 - A significant portion of single mothers with children are at or below the poverty level.
- Current service providers or resources
 - Springfield Regional Medical Center, our physician partners, and staff as well as our service lines are continuously working to provide necessary and much needed social and referral services in areas of Social Determinants of Health. We partner with local agencies like Second Harvest Food Bank, Clark County Transportation Council, Springfield City Area Transit, Clark County Housing Consortium, The Clark County Local Foods Council, Clark County ESC (CTC) and others to help impact areas of Social Determinants of Health.
 - Agencies like Family & Children's First Council, Rocking Horse Center, Wellspring, Clark County Combined Health District, and others to provide much- needed preventative health care, education, and support information.

Significant Clinical Health Needs

Access to Care

- Capacity and adequacy of service levels
 - In Clark County, the population per primary care provider is 2,280:1 (almost 1000 more people per provider compared to the state average.)
 - Health Resource availability is slightly lower than the state average.
 - Preventable hospital stays were nearly 300 more than the state average
- Current service providers or resources
 - Mercy Health Springfield Regional Medical Center
 - Mercy Health Springfield Medical Group, Including Primary & Specialty Care Physicians
 - Mercy Health, Enon Emergency Department
 - Ohio Valley Surgical Hospital
 - Kettering Health Springfield (Walk-in/Emergency)
 - Rocking Horse FQHC

Behavioral Health

- Capacity and adequacy of service levels
 - Presently, unintentional injuries, (which are overdose deaths,) is the 4th leading cause of death in Clark County, with 36% of those individuals having reported at some point in their disease progression some type of unresolved mental or emotional trauma, and more than 40% reporting depression accompanying their addiction.
 - Mental Health providers are 710:1 in Clark County with waiting lists for mental health providers for youth and adults, alike.
 - Constant need for both youth and adult residential mental health facilities have been reported by agencies across the county.
 - Since 2019 Clark County has experienced 184 unintentional overdose deaths and while this number is slightly lower than what was experienced in 2017 and 2018, numbers in 2021 were on the rise.
- Current service providers or resources
 - Springfield Regional Medical Center currently supports these needs by offering initial Medically Assisted Treatment (MAT) within the Emergency Department at our locations. Upon which an individual is referred to a local addiction treatment agency.
 - SRMC is an active stakeholder on the Clark County Substance Abuse Coalition and strategic planning committee along with services provided by addiction treatment services provided by Mercy Behavioral Health & REACH Services.
 - Springfield Regional and Mercy Health Springfield also partners with agencies like McKinley Hall, Clean Slate, Clark County Mental Health, The Mental Health & Recovery Board the Clark County Combined Health District. We provide referral of individual to these and others to support seamless treatment to individuals who come in through our Emergency Department and through the support of our local 1 to 1 needle exchange at our local Soup Kitchen.

Chronic Disease: Heart Disease, Cancer, Stroke

- Capacity and adequacy of service levels
 - Heart disease, cancer and stroke are the top 3 causes of death in Clark County.
 - High Instances of tobacco use are risk factors contributing to these chronic conditions and diseases
 - With the COVID-19 Pandemic, we saw a significant drop in individuals being screened for Cancers and a significant drop in individuals seeking care from their primary care physician, suggesting we will see more, higher-acuity patients with less manageable conditions and worse outcomes.
- Current service providers or resources
 - Springfield Regional Medical Center has excellent programs to support cardiovascular needs and disease. SRMC has pursued the top certifications in those areas: Chest Pain Center Accreditation from the Society of Cardiovascular Patient Care, Joint Commission’s Gold Seal of Approval, the American Heart Association/American Stroke Association’s Heart-Check mark for Advanced Certification for Primary Stroke Centers. Cardiac Surgery at Springfield Regional received a 3 out of 3-Star highest rating from the Society of Thoracic Surgeons. Aetna Institutes of Quality® recognizes Springfield Regional Medical Center for consistently delivering evidence-based, quality care for cardiac medical intervention, cardiac rhythm & cardiac surgery.
 - Additionally, the Springfield Regional Cancer Center offers quality care and cutting-edge treatment for those with cancer in Clark County. A recent partnership with Ohio State and The James Cancer Center, we are continuing to do and offer more based on the needs of the community.

Maternal Infant Health

- Capacity and adequacy of service levels
 - In 2019 and 2020, 57% of women had first trimester prenatal care – 11% lower than the state average. For African American women, this number was even lower, with only 50% having first trimester prenatal care.
 - In 2020, a staggering 18% of pregnant women smoked at some point during their pregnancies, with 15% smoking for the full duration of their pregnancies.
 - Since 2012, our pre-term births have consistently been higher than state average, with African American women delivering early 15% of the time (2018-2020 average)
- Current service providers or resources
 - Springfield Regional Medical Center serves on the Start Strong Clark County Infant Vitality coalition is focused on providing more streamlined access to community supports, education and services.
 - Clark County Combined Health District, WIC, Rocking Horse Center FQHC, The Pregnancy Resource Clinic, The Sexual Wellness Clinic all have Mother-baby related programming and Resources and serve on the Start Strong coalition for better coordination of services.
 - SRMC is a level 2 birthing center with 2 operating rooms and a special care nursery. In 2021, the Birthing Center added a Maternal Fetal Medicine Program in partnership with Ohio State University.
 - The Birthing Center also offers 3 prenatal classes for expectant Moms and their support person: childbirth, newborn, and breastfeeding classes.

Prioritization of Health Needs

As noted in the process above, each need was grouped into a category and area of focus. The close connection and overlap of these health needs and the strategies to impact them are interconnected. In our strategy and execution, we hope to see a greater shift by recognizing the cause and effect of certain needs, outcomes, as well as Socio-Economic, Behavioral and Social Determinants of Health that may be of impact.

Springfield Regional Medical Center will continue to participate in the Community Health Needs Assessment Strategy group, through Clark County Combined Health District to support collaboration and ongoing community strategic development. In addition, internal leadership will continue to be involved and invested in the alignment of strategies that can help to impact these most pressing health needs. Prioritized health needs have been selected because of their focus on prevention of more critical, long-term health issues and their causal factors.

For the top 5 significant needs presently identified, Mercy Health met with the Clark County Combined Health District and their Epidemiology team to review local survey data, regional CHNA data, county, statewide and national data to compare and evaluate where we are in Clark County comparatively. We also looked at and prioritized root causes that are proven contributors to critical community health needs. From there, this information was presented to several teams within the Mercy Health - Springfield market leadership for alignment, and planning from a hospital, operations, and medical intervention perspective.

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

- Access to Care –Primary Care, Women’s Health, & Appropriate Point of Care (Non-Emergent Options: Urgent, Palliative, Paramedicine, Virtual)
- Health Risk Prevention – Social Determinants of Health with Specific Focus on Environmental, Education, Transportation and Food Access
- Behavioral Health – Including Mental Health, Addiction (Including overdose deaths) and Trauma
- Chronic Disease: Heart Disease, Stroke and Cancer (with specific focus on Breast, Lung & Bronchus, Colon & Rectum, and Melanoma/Skin Cancer)
- Maternal, Infant Health & Vitality

Prioritized Social Determinants of Health & Social Health Needs

Health Risk Prevention – Social Determinants of Health with Specific Focus on Environmental, Education, Transportation and Food Access (to be addressed at both a systems and individual level.)

Risk Factors in Clark County are high across the board, from obesity and lack of physical activity to low access to healthy foods, poor and failing schools, limited transportation options and increases in blood lead levels in children, connected to older and poorly maintained housing stock. We believe, the best way to address those items is through strategies in environment, education, food access and transportation.

In 2020 - 2021 Clark County initiated a County wide and Regional Transportation study where opportunities were suggested that could help residents have better access to the things they need most: food, work, home, and school. With an increase in transportation, an increase in education, and an increase in food access, we believe these areas will impact the wellbeing of the community and we will see a dip in the risk behavior and individuals wanting to live healthier, happier lives. Improving the risk factors also present in our community, environmentally, can help individuals have a better outlook on their life, improved health and wellness factors and better mental health.

In 2020, during the COVID-19 pandemic, Mercy Health began a partnership with Second Harvest Food Bank (SHFB). Regionally, SHFB distributes 9,102,206 meals to Clark Champaign & Logan Counties. 1 in 7 people locally face hunger.* While we continue to find new ways to support our local community and their access to food, we recognize this work is not done. With initial strategies outlined with SHFB, Clark County Local Foods Council, and Creating Healthy Communities work through the Clark County Combined Health District, we want to continue this good work, based on our existing community needs.

Mercy Health has always been a supporter of education. However, with identified Youth Risk Behavior Survey (YRBS 2019 - 2021) showing significant increases in Mental Health Concerns, increasing body weight concerns, worsening dietary behaviors, we felt like supporting our education system with good health-related information as well as supporting local schools with new opportunities for hands-on learning and career pathways should be a focus.

The local data collected and previously outlined in the sections above supports the identification of these items as community issues. Through our partnership with Clark County Combined Health District, community feedback, prioritization through the MAPP process, as well as Mercy Health market socialization and strategies, these items have been highlighted as opportunities and areas we will focus.

As outlined above, we recognize the identified social determinants of health, including blood lead levels, access to food, access to transportation and educational opportunities will impact our patient base at a system level, but that we will also need to address each item on a person-by-person basis. This may take place at a one of our local physician practices, through our social support services programs like Mercy Reach or the Mercy Health Community Medication Assistance program, through individual and consultation and follow-up with our case and care management teams. This may take place through 1 on 1 support to get patients or associates connected to the best resources for their area of need, or this may simply be addressed through new internship programs, hiring opportunities or continuing education offered by Mercy Health – Springfield. None-the-less, each of these identified SDOH items will be addressed on both an individual and systems level. Additionally, we have 3 on-site pantries in partnership with Second Harvest Food Bank and recently began an internship program in partnership with our local technical schools.

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Prioritized Clinical Health Needs

Access to Care – Focus on Primary Care, Women’s Health, & Appropriate Point of Care (Non-Emergent Options: Urgent, Palliative, Paramedicine, Virtual)

With the significant health needs we are seeing in Clark County, particularly in the areas of chronic disease and the desire to prevent increasing health risk, we will focus on continuously providing better access to emergency, specialty, and primary care throughout Clark County with the desire to recruit and expand services offered for the community. Through the development of new clinical pathways to encounter patients, it is our hope to better address these needs throughout their lives for greater impact.

The local data collected and highlighted previously identifies these items as a community issue. Through our partnership with Clark County Combined Health District, community feedback, prioritization through the MAPP process, as well as Mercy Health market strategies, these items have been highlighted as opportunities and areas we will focus.

Behavioral Health – Including Mental Health, Addiction (Including overdose deaths) and Trauma

At Springfield Regional Medical Center, we define behavioral health as issues affecting an individual’s physical health due to trauma, mental health, or addiction. Addiction, or substance use disorder, is continuing to be one of the top community challenges in Clark County. We will focus on ways we can help to improve individual’s behavioral health by addressing their issues with substance use disorder, mental health, and trauma. We continue to see a high community need for both inpatient and outpatient support in this space. The local data collected and highlighted previously identifies these items as a community issue. Through our partnership with Clark County Combined Health District, community feedback, prioritization through the MAPP process, and Mercy Health market strategies, these items have been highlighted as opportunities and areas we will focus.

Chronic Disease: Heart Disease, Stroke and Cancer (with specific focus on Breast, Lung & Bronchus, Colon & Rectum, and Melanoma/Skin Cancer)

Chronic health issues are a significant portion of our top 10 causes of death in Clark County. We continue to focus on ways we can help to improve the health outcomes of those already suffering with a chronic disease, with specific focus on heart disease, failure, COPD, and cancer. Specifically, our focus on cancer will be breast, lung, bronchus, colon & rectum, and skin/melanoma. It is our goal to detect earlier to improve the health outcomes of individuals suffering in these areas.

The local data collected and highlighted previously identifies these items as a community issue. Through our partnership with Clark County Combined Health District, community feedback, prioritization through the MAPP process, as well as Mercy Health market strategies, these items have been highlighted as opportunities and areas we will focus.

Maternal, Infant Health & Vitality

In recent years, it has been noted in our birthing statistics that pre-term, low birth weight and overall vitality in the first year of life show higher-than-state-average risks in Clark County. Since our last CHNA, Springfield Regional Medical Center has been hard at work with both internal and external strategies to combat these community challenges. Coupled with our strong partnership with Start Strong Clark County, our infant vitality coalition, we would like to continue this focus on the health of mothers, as well as the opportunities to impact Women’s health in a primary care and educational settings. We strive to deliver healthy babies in our birthing center and improve maternal and infant health in Clark County.

The local data collected and highlighted previously identifies these items as a community issue. Through our partnership with Clark County Combined Health District, community feedback, prioritization through the MAPP process, as well as Mercy Health market strategies, these items have been highlighted as opportunities and areas we will focus.

Resources Available to Meet Prioritized Needs

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

Prioritized Social Determinants of Health & Social Health Needs

Health Risk Prevention – Social Determinants of Health with Specific Focus on Environmental, Education, Transportation and Food Access

- Wellspring
- Clark County Combined Health District
- Clark County ESC
- City of Springfield (Transportation Planning)
- Clark County, Ohio (Transportation Council)
- Family & Children's First Council
- Wittenberg University
- Clark State College
- Mental Health Services, Clark Co.
- Mental Health & Recovery Board
- Rocking Horse Center, FQHC
- Community Health Foundation
- Springfield Foundation
- United Senior Services
- Second Harvest Food Bank
- NAACP (Springfield/Clark Co.)
- Springfield Promise Neighborhood
- Springfield City School District

Prioritized Clinical Health Needs

Access to Care – With Focus on Primary Care, Women’s Health, & Appropriate Point of Care (Non-Emergent Options: Urgent, Palliative, Paramedicine, Virtual)

- Springfield Regional Medical Center
- Mercy Health Physicians Primary & Specialty Care
- Mercy Health Enon Emergency Department
- Ohio Valley Surgical Hospital
- Kettering Health Emergency Walk-in Care
- Urgent Care Providers
- Springfield Fire & EMS
- Springfield Township Fire & EMS
- Moorfield Township Fire & EMS
- Physicians & Surgeons for Women
- Springfield Regional Birthing Center
- Mercy Health Springfield OBGYN
- Rocking Horse, FQHC

Behavioral Health – Including Mental Health, Addiction (Including overdose deaths) and Trauma

- Mercy Health Behavioral Health & REACH Services
- Mental Health & Recovery Board
- Mental Health Services, Clark Co.
- Family & Children's First Council
- Rocking Horse, FQHC
- The Nehemiah Foundation
- Faith Community Nursing & Health Ministry Program
- Local Addiction Support Providers
- McKinley Hall
- United Senior Services
- Citi Lookout
- Wellspring
- Clark County Combined Health District
- Local Police, Fire & EMS

Chronic Disease: Heart Disease, Stroke and Cancer (with specific focus on Breast, Lung & Bronchus, Colon & Rectum, and Melanoma/Skin Cancer)

- Springfield Regional Medical Center
- Mercy Health Physicians - Specialty & Primary Care
- Springfield Regional Cancer Center
- Ohio Valley
- Kettering Health
- Oakview Dermatology
- Buckeye Dermatology

Maternal, Infant Health & Vitality

- Springfield Regional Medical Center - Birthing Center
- Mercy Health Physicians
- Mercy Health Springfield OBGYN
- Physicians & Surgeons for Women
- Pregnancy Resource Clinic
- Clark County Sexual Wellness Clinic
- Rocking Horse, FQHC
- Start Strong Clark County Coalition
- Family & Children's First Council
- Clark County Combined Health District
- Family & Youth Initiatives

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

Cross Cutting Factors: Health Risk Prevention & Healthy Living & Access to Care

Initiative	Impact
Community Outreach	<ul style="list-style-type: none"> • 2019, 2021 Clark County Fairs: Offered educational information, Mobile Mammography Screenings • 2019 & 2021 Clark County Service Day • A day of service and volunteering to support local community non-profits. (mental & physical health benefits through volunteer work and physical labor, especially during the pandemic.) • 2019 Fall Planting Day & 2021 Fall Planting Day new programming to promote mental, spiritual, and physical health for the community, especially during the pandemic • 2020-Present: Launch of Faith Community Nursing & Health Ministry Program: Partnership with CCCHD (Clark Co. Combined Health District), Springfield Fire & EMS and 5 local faith communities to launch Faith Community Nursing & Health Ministry Program. An outreach program focused on building capacity for additional health expertise within faith communities in an area of high EMS run rate, higher socio-economic and SDOH need. • In 2021: 3 out of 5 churches hosted COVID testing & vaccinations on-site in partnership with CCCHD for better local access. All five churches were able to select members of their congregation to receive Faith Community Nursing & Health Ministry Training through West Virginia University • Q1 of 2022 we expanded to 6 more churches for a total of 11 churches and are exploring the possibility of a paramedicine program in Clark Co.
2021 Community Education:	<ul style="list-style-type: none"> • Lunch & Learn Programs which were free educational events for the general public which could be attended in person or via zoom: • May 2021: Dr. Carman and Jackie Dahlberg education on weight management • July 2021: Dr. Ashraf education on heart health • August 2021: David Comer, education on shoulder replacement • September 2021: Dr. Zartman, education on hip replacement • October 2021: Dr. Osterholt education on breast and women’s health • November 2021: Dr. Neravetla education on lung health & lung cancer awareness • February 2022: Dr. Alam on heart month • March 2022: Dr. Gabbard on colon cancer awareness & screening • April 2022: Dr. Carmen on healthy weight & weight management

<p>Partnership with Second Harvest Food Bank</p>	<ul style="list-style-type: none"> • On-site pantries launched at Springfield Regional Medical Center, Urbana Hospital & Cancer Center • One call system purchased for SHFB • Three outreach events in 2021 at SHFB, Supported by Mercy Health Med Assist, Mobile Mammo, Mercy REACH, Lung Cancer Outreach. • Support for Champaign County Mobile/Drive through pantry in 2019, 2020, 2021 and 2022 																
<p>Recruitment of new physicians and specialty services where gaps were present in the community</p>	<table border="0"> <tr> <td></td> <td style="text-align: right;">.....2019.....2020..... 2021</td> </tr> <tr> <td>1. Primary Care Providers added.....</td> <td style="text-align: right;">+7.....+5.....+4</td> </tr> <tr> <td></td> <td style="text-align: right;">.....2019.....2020..... 2021</td> </tr> <tr> <td>2. NEW EMPLOYED.....</td> <td style="text-align: right;">90.....103..... 121</td> </tr> <tr> <td>3. NEW SPECIALISTS.....</td> <td style="text-align: right;">27.....3138</td> </tr> <tr> <td style="padding-left: 40px;">TOTAL.....</td> <td style="text-align: right;">117.....134..... 159</td> </tr> <tr> <td colspan="2">3. New Services Added:</td> </tr> <tr> <td colspan="2"> <ul style="list-style-type: none"> • Neurology • Spine/Musculoskeletal • Maternal Fetal Medicine • OBGYN • Cancer Expansion & Partnership with Ohio State University • Cardiovascular Thoracic Surgeon </td> </tr> </table>	2019.....2020..... 2021	1. Primary Care Providers added.....	+7.....+5.....+4	2019.....2020..... 2021	2. NEW EMPLOYED.....	90.....103..... 121	3. NEW SPECIALISTS.....	27.....3138	TOTAL.....	117.....134..... 159	3. New Services Added:		<ul style="list-style-type: none"> • Neurology • Spine/Musculoskeletal • Maternal Fetal Medicine • OBGYN • Cancer Expansion & Partnership with Ohio State University • Cardiovascular Thoracic Surgeon 	
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Behavioral Health: Mental Health, Addiction & Trauma

Initiative	Impact
Mercy REACH	<ul style="list-style-type: none"> In 2019 Mercy REACH (drug, alcohol, addiction, mental health & counseling services) served 11260 people in Clark & Champaign Counties In 2020 (Covid-19 Pandemic) Mercy REACH served 7,956 people in Clark & Champaign Counties In 2021 (Covid-19 Pandemic) Mercy REACH served 8,573 people in Clark & Champaign Counties In 2022 (April/YTD) Mercy REACH served 3143 people in Clark & Champaign Counties Total people served: 30,932
Expanded Services	<ul style="list-style-type: none"> Mercy REACH (drug, alcohol, addiction) and outpatient mental health services were reorganized under one umbrella as Mercy Health – Behavioral Health & REACH services for better community access. From 2018 – 2022 we operated a senior behavioral health unit for patients 55+ at the Urbana Hospital. In 2021 Mercy REACH (drug, alcohol, addiction) restarted their Vivitrol program and Springfield Regional Medical Center launched their first dose MAT (medically assisted treatment) program, where individuals could receive their first dose at SRMC and be referred to another agency for follow-up outpatient care.
Safe Disposal of Unused Medications	In 2018 we installed a prescription drug disposal box at Springfield Regional Medical Center in the Outpatient Pharmacy and provided drug disposal bags through our primary care offices.
SBIRT Screening	In 2019 Mercy Health - Springfield Region participated in SBIRT screenings and continuously monitor Physician prescriber practices at a system level.
Community taskforces	Beginning in 2018, Mercy REACH and Community Health Director participated in the Clark County Substance Abuse Taskforce as an attendee and in a leadership capacity Mercy REACH also participated in Clark County Drug Death Review.
Trauma Informed Care Training Pilot	In the summer of 2022, Mercy Health – Springfield Region will complete a trauma informed care training pilot with best-in-class partner Trauma Free World of Back2Back ministries for all Emergency Department and Birthing Center staff in Clark & Champaign counties

Chronic Disease: Cancer (Specific focus on Bronchial & Lung and Colon & Rectum) Heart Failure, Diabetes, COPD

Initiative	Impact
Med Assist Program Expansion	In 2021, Med Assist underwent a department reorganization to help support new methods for better connecting with community members who need the program. Med Assist employees round to physicians practices, community organizations and non-profits, community events, Mercy Health facilities to make sure individuals know about and can take advantage of their services through the application process. Patients who meet the program guidelines can receive up to \$200 in medication vouchers monthly.
Diabetes Outpatient Outreach & Education	Mercy Health physicians launched a diabetes navigator to support outpatient needs for diabetes education.
Cancer Education & Screenings	Additional education offered to the community for bronchial & lung cancer (2019, 2020, 2021), colon cancer (2019, 2021) and breast cancer/mobile mammography was launched in 2018, with full screening dates offered in 2019, 2020 (paused with COVID), 2021 and 2022. Community screenings were added and completed in the areas of bronchial/lung cancer screenings, breast cancer screenings, colorectal cancer screenings. Planning for 2022 outreach and education underway: mobile Mammo, lung cancer awareness
Expanded offerings for Cardiovascular Services	<ul style="list-style-type: none"> Expanded Cardiovascular Services offered in Champaign County – 2018 TAVR Program Launched in 2019 Springfield Heart Failure Center (2019) Education in Hospital and Follow up with NP and additional education <p>Handoff processes for CHF & COPD were developed with the Walk-in Clinic so patients could be seen if they were not able to get an appointment with their primary care doctor or specialty care cardiologist, additionally, patients diagnosed with Diabetes receive a consult from our dietitian prior to discharge to help with their dietary requirements. On-site food pantries launched in 2021 with Chronic disease friendly foods so food insecure patients can take food home with them upon discharge.</p> <ul style="list-style-type: none"> IV lasics therapy expanded to be offered in an outpatient/office setting (2020) Chest Pain Coordinator added (2021) Heart Failure Navigator added (2022 – Added to Springfield Regional Medical Center) American Heart Association Virtual Panel for Community Education (2021) Expanded Cardiac Rehab - Both Springfield & Urbana (2019 & 2020) Smoking Cessation & Dietary needs (72 visits with patients)

Maternal Infant Health, Healthy Births & Infant Mortality

Initiative	Impact
<p>Maternal Infant Health Strategy & Outreach</p>	<p>In 2021:</p> <ul style="list-style-type: none"> • Mercy Health - Springfield hired their first OBGYN group and began implementing strategic actions around community outreach and planning. • Community discussions around childbirth, parenting, breastfeeding education, and more, began taking place with a goal to revamp and collaborate better for our community audiences. • Prenatal education was revamped for expectant moms & families. 3 classes were offered to the general public: newborn, breastfeeding, & childbirth. • 9 childbirth classes were offered with 41 attendees • 3 newborn classes were offered with 12 attendees • 1 breastfeeding class was offered with 2 attendees <p>In 2022:</p> <ul style="list-style-type: none"> • We received an Ohio Department of Health grant to help us focus and expand education: • 11 childbirth classes were offered with 58 attendees • 6 newborn classes were offered with 27 attendees • Monthly breastfeeding class was offered with 16 attendees
<p>Yomingo App</p>	<p>In 2022:</p> <ul style="list-style-type: none"> • Mercy Health Launched Yomingo. An App resource for expectant moms to track their pregnancy. In addition, it is multi-lingual, providing better localized access to our community resources in many languages.
<p>Start Strong Clark County</p>	<p>In 2019:</p> <ul style="list-style-type: none"> • As a revamp of the Healthy Births and Sexuality taskforce, Mercy partnered with Clark County Combined Health District and Family & Children’s First Council to launch Start Strong Clark County – an infant vitality coalition with resources for moms and families. <p>In 2021:</p> <ul style="list-style-type: none"> • Start Strong launched the clinical collaborative. A bi-annual connect between social service agencies, physicians, and clinical providers in the material infant health space for better collaboration. <p>In 2022:</p> <ul style="list-style-type: none"> • Start Strong Clark County met as stakeholders to write a job description for a maternal/infant vitality coordinator to assist in supporting much-needed social service health and referrals.

Appendix A

The appendices included below are the data linked from other sources including The Regional CHNA with the Health Collaborative, as well as information collected by The Clark County Combined Health District as we collaborate in this process.

2022 Community Health Assessment
Community Strengths and Themes Focus Groups
Draft Summary
3/11/2022

Four sessions have been completed and we are working to get a least one more scheduled. We are also working on up an online survey to gain feedback for the larger community.

Sessions:

- One session was held with the **Latino Coalition**. The group was made up of community partners/service providers and interested community members.
- One session was held with **Springfield Promise Neighborhood**. The group was made up of community members.
- Two sessions were held at **Family Youth Initiatives**. One was made up of mostly community members and the other one was majority partners/service providers.
- Planning a session with **Restored Life Ministries**- Will be made up of congregation/community members.

Discussion Questions Asked:

- What do you believe are the 2-3 most important characteristics of a healthy community?
- What makes you most proud of our community?
- What do you believe is keeping our community from doing what needs to be done to improve health and quality of life?
- What do you think are the biggest health priorities of the community?

Summary of responses:

- What do you believe are the 2-3 most important characteristics of a healthy community?
 - Whole Food Nutrition
 - Accessibility to dietary-restricted options
 - Availability of health foods and produce
 - Accessible health facilities
 - Safe place for children to play
 - Referral system to access services
 - Public transportation: No public transport in NC
 - Diversity and inclusion
 - Language services not just access to interpreters. Barriers of interpreters include lack of trust, not comfortable sharing personal information.
 - Access to affordable Insurance
 - Financial stability
 - Stable and Safe Housing
 - Access to quality healthcare

Appendix B



regional
community
health
needs
assessment 2021

Executive Summary

Vision of Health

We envision a region where everyone has the opportunity to be healthy. To achieve this vision, our region is working on eliminating health disparities by embracing community voice, investing in trusted partnerships, and implementing evidence-based strategies and best practices to achieve equitable health outcomes for all.

About the Regional CHNA

The 2021 Community Health Needs Assessment (CHNA) is a comprehensive, data-driven, and actionable review of the health of our region. Specifically, this regional, collaborative CHNA provides a summary of:

- The most prevalent health conditions in our community and conditions for which people most commonly did not receive treatment in past year,
- The social determinants of health (SDOH) that impact these poor health outcomes, and
- The systemic barriers that influence health disparities and inequities for our community members.

Because physical, environmental, and behavioral factors greatly impact health conditions, this CHNA focused on the SDOH and the underlying structural barriers influencing the SDOH that impact the health of community members.

The Region's Top Priorities

- Increase **access to services** in order to improve equitable outcomes for the region's top health needs: **behavioral health, cardiovascular disease, dental, and vision.**
- Address access to and use of resources for **food and housing**, with a focus on the development and strengthening of partnerships between providers and community-based organizations.
- Strengthen **workforce pipeline and diversity**, including cultural competence within the healthcare ecosystem.

Tri-State Region



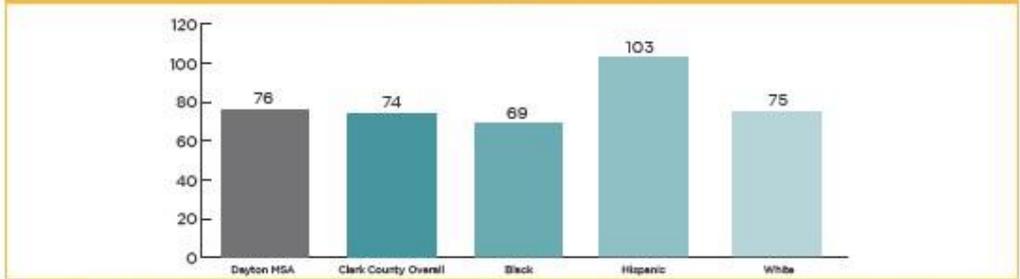
Community Health Needs Assessment (CHNA)

2021 REPORT

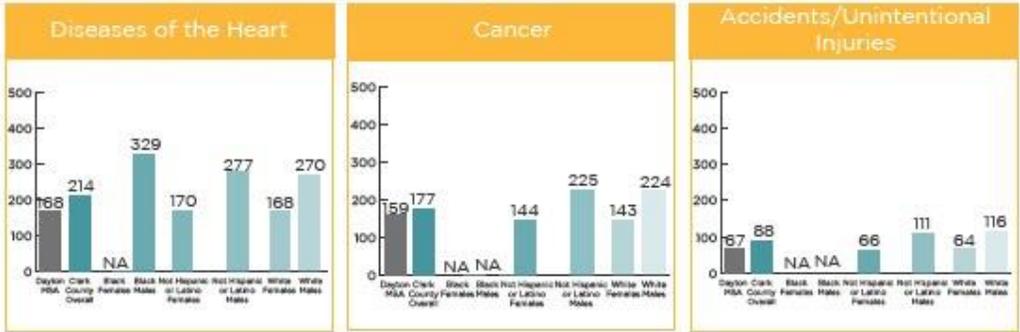


LOCAL HEALTH INDICATORS
SECONDARY DATA 2019 OR PRIOR (PRE-COVID-19)

Life Expectancy by Race¹
In Years



Cause of Death Summary (by Race) Age-adjusted Mortality Rates¹
Rates per 100,000



Other Causes of Death²

	Dayton MSA	Clark County
Drug Overdose Deaths	55.5	56.5
Firearm-related Fatality	15.1	16.2
Suicide	15.6	18.0
Homicide	7.8	6.7

Rate per 100,000

Prevalence of Disease

	Dayton MSA	Clark County
Heart Disease ³ <i>(population age 18 and over)</i>	7.3%	9.0%
Frequent Mental Distress ² <i>(14 days or more per month of mental distress)</i>	15.7%	17.1%

Preventable Hospitalization Rate⁴

Dayton MSA: **4,591**
Clark County: **5,251**
per 100,000 Medicare enrollees



Infant Mortality Rate⁵
Under 1

Dayton MSA: **6.8**
Clark County: **7.0**
per 1,000 live births



Childhood Mortality Rate⁶
Under 18

Dayton MSA: **60.7**
Clark County: **66.1**
per 100,000

Appendix C

Clark County Combined Health District

Updated 6/1/2022 | Contact bheine@ccchd.com for questions

2021 DRUG DEATH REPORT

Clark County



JUNE 1, 2022

CLARK COUNTY COMBINED HEALTH DISTRICT
529 East Home Road, Springfield, Ohio 45503

Data presented in this report was compiled during the Clark County Drug Death Review. Coroner's actual figures may vary. | 0

