2019 Community Health Needs Assessment
Mercy Health Lorain
(Including Mercy Health – Lorain Hospital and Mercy Health – Allen Hospital)
Adopted by the Mercy Health Lorain Hospital Board of Trustees, October 2019

Mercy Health has been committed to the communities it serves for nearly two centuries. This long-standing commitment has evolved intentionally, based on our communities’ most pressing health needs.

Every three years we evaluate those needs through a comprehensive Community Health Needs Assessment (CHNA) process. The most recent assessments, completed by Mercy Health and community leaders, include quantitative and qualitative data that guide both our community benefit and strategic planning.

The following document is a detailed CHNA for Mercy Health Lorain, including Mercy Health – Lorain Hospital and Mercy Health – Allen Hospital. As a system, Mercy Health is dedicated to our Mission of extending the compassionate ministry of Jesus by improving the health and well-being of our communities and bringing good help to those in need, especially people who are poor, dying and underserved. We strive to meet the health needs of our community.

Mercy Health has responded to community health needs as part of a three-year strategic plan that concludes in 2021. In recent years, Mercy Health has invested in building and renovating hospitals and ambulatory facilities to serve patients and communities in Ohio and Kentucky.

As part of Bon Secours Mercy Health, the fifth-largest Catholic health system in the U.S., we contribute nearly $2 million per day in community benefit services as we carry out our Mission of extending care to the poor and underserved.
Mercy Health Lorain has identified the greatest needs in our community. This ensures our resources for outreach, prevention, education and wellness are directed toward 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 https://www.mercy.com/global/about-us/contact-mercy-health.

“Mercy Health - Lorain has been serving families for nearly 130 years,” said Edwin Oley, president, Mercy Health – Lorain. “Over that century of caring, we have built upon the legacy of our Sisters of Humility of Mary to serve the health care needs of our community in a meaningful and mission-driven way, ensuring that no person lacks the access to high-quality, compassionate care -- even in times of uncertainty.”
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2. Preventive Health
3. Cancer – Men and Women
4. Maternal Infant and Child
5. Mental Health
6. Substance Abuse
7. Access to Care
8. Sexually Transmitted Diseases (STDs)
9. Social Determinants of Health – Health Disparity

Prioritized health needs
1. Chronic Disease
2. Preventive Health
3. Cancer – Men and Women
4. Maternal Infant and Child
5. Mental Health
6. Substance Abuse
7. Access to Care
8. Sexually Transmitted Diseases (STDs)
9. Social Determinants of Health – Health Disparity
Resources available

PROGRESS ON 2016 CHNA

APPENDIX
Introduction

JOINT CHNA
T.R. §1.501(r)-3(b)(6)(i)
This is a “joint CHNA report,” within the meaning of Treas. Reg. §1.501(r)-3(b)(6)(v), by and for Mercy Health Lorain, including Mercy Health – Lorain Hospital and Mercy Health – Allen Hospital. This report reflects the hospitals’ collaborative efforts to conduct an assessment of the health needs of the community they serve. That assessment included seeking and receiving input from that community.

COMMUNITY SERVED BY HOSPITAL
T.R. §1.501(r)-3(b)(1)(i) and (3)

Mercy Health Lorain has defined its communities served as Lorain County, Ohio. Mercy Health chose this area as the community served for several reasons including that the primary and secondary service areas of both Mercy Health - Lorain Hospital and Mercy Health - Allen Hospital lie nearly exclusively within Lorain county. Mercy Health - Lorain Hospital and Mercy Health - Allen Hospital are separately licensed. They are affiliated facilities with a common parent that jointly meet the needs of all Lorain County residents. The Community Health Needs Assessment was done in collaboration with the Lorain County Public Health district with nearly 20 organizations providing input for the residents of the entire county.

Mercy Health Lorain Hospital (“Mercy” or “Hospital”) is a 338-bed, full service hospital providing inpatient, outpatient and ancillary health care services. Mercy Health – Allen Hospital (“Mercy” or “Mercy Allen”) is a 25-bed, full service community hospital providing inpatient, outpatient ancillary healthcare services.

According to the U.S. Census Bureau, Lorain County has over 309,461 residents, with 73% being adults over the age of 18, 22% of the population is between the ages of 5 and 18 and the remaining 5.6% under the age of 5. The majority of our population is Caucasian (77.9%), followed by Hispanics (10.2%), African Americans (9.0%), Asian (1.3%), two or more races (3.0%), American Indian (4.2%) and Pacific Islander (0.1%). The median household income in 2017 dollars was $54,987 while the per capita income was $28,555 with 13.5% of our community living in poverty and 6.2% of the population under the age of 65 living without insurance. Within Lorain County, there are 118,594 household with an average 2.5 people living in each home.
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

<table>
<thead>
<tr>
<th>Public health departments (T.R. §1.501(r)-3(b)(5)(i)(a))</th>
<th>Date of data/information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lorain County Public Health</td>
<td>2018 - 2019</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>At-risk populations (T.R. §1.501(r)-3(b)(5)(i)(b))</th>
<th>Date of data/information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol and Drug Addiction Services Board of Lorain County</td>
<td>2018 - 2019</td>
</tr>
<tr>
<td>Lorain County Board of Mental Health</td>
<td>2018 - 2019</td>
</tr>
<tr>
<td>Lorain County Health &amp; Dentistry</td>
<td>2018 – 2019</td>
</tr>
<tr>
<td>Lorain County Metroparks</td>
<td>2018 - 2019</td>
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<tr>
<td>Lorain County Urban League</td>
<td>2018 – 2019</td>
</tr>
<tr>
<td>El-Centro</td>
<td>2018 – 2019</td>
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<tr>
<td>Lorain City Schools</td>
<td>2018 – 2019</td>
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<tr>
<td>Amherst City Schools</td>
<td>2018 – 2019</td>
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<tr>
<td>Elyria City Schools</td>
<td>2018 – 2019</td>
</tr>
<tr>
<td>Oberlin City Schools</td>
<td>2018 – 2019</td>
</tr>
<tr>
<td>Elyria Catholic High School</td>
<td>2018 – 2019</td>
</tr>
<tr>
<td>Wellington City Schools</td>
<td>2018 – 2019</td>
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<tr>
<td>Lorain County Pastors Group</td>
<td>2018 – 2019</td>
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<tr>
<td>Elyria YWCA</td>
<td>2018 – 2019</td>
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<tr>
<td>CHIP – Coalition for Hispanic / Latino Issues in Progress</td>
<td>2018 – 2019</td>
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<tr>
<td>Second Harvest Food Bank</td>
<td>2018 – 2019</td>
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<tr>
<td>Blessing House</td>
<td>2018 – 2019</td>
</tr>
<tr>
<td>Boys and Girls Club – Lorain / Elyria</td>
<td>2018 – 2019</td>
</tr>
<tr>
<td>Lorain County Free Clinic</td>
<td>2018 – 2019</td>
</tr>
<tr>
<td>El Centro de Servicios Sociales, Inc.</td>
<td>2018 – 2019</td>
</tr>
<tr>
<td>The LCADA Way</td>
<td>2018 – 2019</td>
</tr>
</tbody>
</table>
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)

The Mercy Health Lorain Market worked collaboratively with the Lorain County Public Health in the development and the implementation of the Community Health Assessment for all of Lorain County.

**Lorain County CHA**
Each Community Health Needs Assessment we have done for the Mercy Health Lorain Market has been done collectively with the Lorain County Public Health which has been conducting CHA’s since 2011. The data that we used for this Community Health Needs Assessment was taken in accordance with the most recent Lorain County CHA. The data for the Lorain County CHA was compiled and collected in 2018 and released on May 23, 2019. The Lorain County CHA was a cross-sectional in nature survey which included a written survey of adults and an electronic survey of youth with Lorain County. The adult questions were modeled after the survey instruments used by the Centers for Disease Control and Prevention (CDC) for their national and state Behavior Risk Factor Surveillance System (BRFSS). The youth survey was completed by Communities that Care (CTC) of Lorain County as required by the Drug Free Communities Support Program. This has allowed Lorain County to compare their CHA data to the national, state and local health trends.

Mercy Health Lorain Hospital and Lorain County Public Health contracted with the Hospital Council of Northwest Ohio (HCNO), a neutral, regional, and non-profit hospital association, to facilitate the CHNA, CHA and CHIP. Several community stakeholders participated in the process and were members of the Lorain County CHIP Steering Committee. Data from the most recent CHA was carefully considered and categorized into community priorities with accompanying strategies. This was done using the National Association of County and City Health Officials’ (NACCHO) national framework, Mobilizing for Action through Planning and Partnership (MAPP).

**MAPP Framework**
The Process for developing the Community Health Needs Assessment used the MAPP Framework: Mobilizing for Action through Planning and Partnerships (MAPP), a tool used by NACCHO. The MAPP Framework took six phases to our approach:

1. Organizing for success and partnership development
2. Visioning
3. The four assessments
4. Identifying strategic issues
5. Formulate goals and strategies
6. Action cycle

The MAPP process included four assessments: community themes and strengths, forces of change, local public health system assessment, and the community health status assessment. These four assessments were used by the Lorain County Health Partners to prioritize specific health issues and population groups which are the foundation of this plan. Figure 1.1 illustrates how each of the four assessments contributes to the MAPP process.

FIGURE 1.1 THE MAPP MODEL
Beginning in June 2019, the Lorain County Health Partners met four (4) times and completed the following planning steps:

<table>
<thead>
<tr>
<th>Meeting Type</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community Surveyed</strong></td>
<td>Community was surveyed with a 94-question survey in which was mailed to 2400 individuals with a 29% return rate with 646 being returned. The response rate for the Lorain County Urban population was 25% with 272 being returned</td>
</tr>
<tr>
<td><strong>Community Data Release</strong></td>
<td>The survey data was unveiled to the community with over 200 community members present</td>
</tr>
<tr>
<td><strong>Initial Meeting</strong></td>
<td>Review the Process and timeline/ Finalize Committee Members / Create or review vision</td>
</tr>
<tr>
<td><strong>Priorities were chosen</strong></td>
<td>Use of quantitative and qualitative data to prioritize target impact areas</td>
</tr>
<tr>
<td><strong>Ranking of Priorities</strong></td>
<td>Health problems were ranked based on magnitude, seriousness of consequences and feasibility of correcting</td>
</tr>
<tr>
<td><strong>Community Themes and Strengths Assessment</strong></td>
<td>Open-ended questions for committee on community themes and strengths</td>
</tr>
<tr>
<td><strong>Forces of Change Assessment</strong></td>
<td>Open-ended questions for committee on forces of change</td>
</tr>
<tr>
<td><strong>Local Public Health Assessment</strong></td>
<td>The committee reviewed the Local Public Health Assessment</td>
</tr>
<tr>
<td><strong>Gap Analysis</strong></td>
<td>The team determined the discrepancies between community needs and viable community resources to address the needs while identifying strengths, weaknesses and evaluation strategies</td>
</tr>
<tr>
<td><strong>Quality of Life Survey</strong></td>
<td>The Quality of Life Survey was sent out to local community members with over 325 respondents</td>
</tr>
<tr>
<td><strong>Strategic Action Identification</strong></td>
<td>Evidence-based strategies were identified to address the health priorities</td>
</tr>
<tr>
<td><strong>Best Practices</strong></td>
<td>The best practices, proven strategies and feasibility of items were reviewed</td>
</tr>
<tr>
<td>Resource Assessment</td>
<td>Resources were assessed by talking to the community and program leads at Mercy Health Lorain Hospital to identify the needs</td>
</tr>
<tr>
<td>--------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Community Leader Discussions</td>
<td>Community Leaders were engaged in discussion what the key</td>
</tr>
<tr>
<td>Draft Plan</td>
<td>A draft plan was created with strategies and measurements</td>
</tr>
<tr>
<td>Draft Plan</td>
<td>A draft plan was created with strategies and measurements</td>
</tr>
</tbody>
</table>

**External sources**

HCNO utilized data from the following information sources to complete the Lorain County CHA:

- American Association of Suicidology, National Suicide Statistics
- American Cancer Society, 2019 Cancer Facts, Figures and Estimates
- American College of Allergy, Asthma & Immunology, 2016
- Centers for Disease Control – several sources of data to support statistics for alcohol use and underage drinking, arthritis, asthma, cancer, children’s mental health, diabetes, marijuana use, mold prevention, mean’s health data, oral health, smoking and tobacco use, violence, etc.
- Brady Campaign to Prevent Gun Violence
- Centers for Disease Control – Wonder statistics
- County Health Rankings
- Healthy People 2020
- The Henry Kaiser Family Foundation
- Lorain County Transportation Barriers Assessment
- The Ohio Automated Rx Reporting System
- Ohio Department of Health – several sources of data including 2017 Ohio Drug Overdose Data, Informant Mortality Rates
- Lorain County and Ohio Birth Statistics
- Lorain County and Ohio Leading Causes of Death, Mortality Statistics
- Lorain County and Ohio STD Surveillance Data and Statistics
- Ohio Department of Public Safety – 2017 Lorain County and Ohio crash facts
- National Alliance on Mental Illness
- National Institute on Drug Abuse, Drug Facts
- U.S. Department of Commerce, Census Bureau
- U.S. Department of Health & Human Services – 2018 Physician Activity Guidelines
Collaborating partners
The hospital collaborated with the following organizations as part of the process of conducting the needs assessment:

- Hospital Council of Northwest Ohio (HCNO)
- Lorain County CHIP Steering Committee members (Lorain County Health Partners):
  - Mercy Health Lorain Hospital
  - Mercy Health Allen Hospital
  - Alcohol and Drug Addiction Services Board of Lorain County
  - Cleveland Clinic Avon Hospital
  - Lorain County Board of Mental Health
  - Lorain County Health and Dentistry
  - Lorain County Metro Parks
  - Lorain County Office of Aging
  - Lorain County Public Health
  - Mental Health, Addiction and Recovery Services Board of Lorain County
  - Special Hospital of Lorain
  - University Hospitals Elyria Medical Center
- Mercy Health Community Inclusion and Diversity Committee
- Lorain County Community College

Community input
T.R. §1.501(r)-3(b)(6)(iii)

No written comments were received on the previously completed CHNA.

Under the direction of HCNO, the Lorain County CHA included community input in its assessment process in several different ways as noted below.

Community Surveys
Under the direction of the HCNO, a 94-question survey was mailed to 2400 adult individuals living within Lorain County, resulting in a return rate of 29%, or 646 responses. Of those responses, 272 responses were for individuals from the Lorain County Urban population. All data was analyzed by health education researchers at the University of Toledo using SPSS 23.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Lorain County, the adult data collected was weighted by age, gender, race, and income using Census data. Multiple weightings were created based on this information to
account for different types of analyses.

In addition to the adult surveys, Communities that Care of Lorain County anonymously surveyed youth in grades 6, 8, 10, and 12 at Lorain County Public Schools, as required by the Drug Free Communities and Support Program. The number of students surveyed, and their response rate were as follows: 6th graders surveyed: 666 (24% response rate); 8th graders surveyed: 859 (31% response rate); 10th graders surveyed: 668 (24% response rate); 12th graders surveyed: 572 (21% response rate). Approximately 21% of all students in these grades were surveyed. Survey questions focused on: past 30-day drug use; student’s perception of risk; students’ perception of parents’ disapproval; age of first use; perception of availability; where and when students use cigarettes, alcohol, marijuana; and prescription drugs. Additionally, the survey gathered data about other drugs (e.g. e-cigarettes, heroin), violence indicators, school safety, and risk and protective factors. Ten additional questions were added to the survey to inquire about anxiety, depression, suicide, healthy eating, physical activity and screen time. A passive consent was disseminated to parents of students participating in the survey.

Community Themes and Strengths Assessment (CTSA)
The Lorain County Health Partners engaged in a Community Themes and Strengths Assessment (CTSA) in which we gained a deeper understanding on what the residents of Lorain County felt were most important by asking the following open-ended questions to the Lorain County Steering Committee members: What is important to our community? How is Quality of life perceived in our community? What assets do we have that can be used to improve community health? The survey outcomes are included in the attached Appendix A.

Quality of Life Survey
The Lorain County Health Partners urged community members to fill out a short Quality of Life Survey via SurveyMonkey. There were 394 Lorain County community members who completed the survey. The anchored Likert scale responses were converted to numeric values ranging from 1 to 5, with 1 being lowest and 5 being highest. For example, an anchored Likert scale of “Very Satisfied” = 5, “Satisfied” = 4, “Neither Satisfied or Dissatisfied” = 3, “Dissatisfied” = 2, and “Very Dissatisfied” = 1. For all responses of “Don’t Know,” or when a respondent left a response blank, the choice was a non-response and was assigned a value of 0 (zero). The questions and scored responses are included in the attached Appendix B.
Forces of Change Assessment
The Forces of Change Assessment focuses on identifying forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate. This assessment answers the questions: "What is occurring or might occur that affects the health of our community or the local public health system?" and "What specific threats or opportunities are generated by these occurrences?" The Lorain County Health Partners were asked to identify positive and negative forces which could impact community health improvement and overall health of this community over the next three years. This group discussion covered many local, state, and national issues and change agents which could be factors in Lorain County in the future. A table summarizing the forces of change agent and its potential impacts can be referenced in the attached Appendix C.

Identification of the significant health needs
Based on the primary and secondary data obtained throughout the Lorain County CHA process, the following needs were identified as significant for Lorain County:

1. Chronic Disease
2. Social Determinants of Health – Health Disparity
3. Substance Abuse
4. Cancer – Men and Women
5. Mental Health
6. Maternal Infant and Child
7. Access to Care
## Organizations providing input

<table>
<thead>
<tr>
<th>Organization providing input</th>
<th>Nature and extent of input</th>
<th>Medically under-served, low-income or minority populations represented by organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amherst Exempted Village Schools</td>
<td></td>
<td>Children and families</td>
</tr>
<tr>
<td>Community Foundation of Lorain County</td>
<td></td>
<td>Public charity connecting people who want involvement with causes that matter</td>
</tr>
<tr>
<td>El Centro de Servicios Sociales, Inc.</td>
<td></td>
<td>Organization providing support services, youth leadership and employment education programs for the Latino community in Lorain County, including seniors and youth.</td>
</tr>
<tr>
<td>Firelands Counseling &amp; Recovery Services</td>
<td></td>
<td>Behavioral and Psychiatric support for the Mental Health Population</td>
</tr>
<tr>
<td>French Creek YMCA</td>
<td></td>
<td>Lorain County YMCA</td>
</tr>
<tr>
<td>Linking Employment, Abilities and Potential (LEAP)</td>
<td></td>
<td>Employment Connector Agency</td>
</tr>
<tr>
<td>Lorain County Board of Developmental Disabilities – Murray Ridge Center</td>
<td>Organizations who participated in community surveys and supported the CHA process by providing community input to the Steering Committee</td>
<td>Organization that ensures the availability of services and support that assist eligible individuals in living the life they choose, promoting health and achieving their goals. Serves those with dual diagnosis, developmentally disabled and mental illness.</td>
</tr>
<tr>
<td>Lorain County Drug Task Force</td>
<td></td>
<td>County Drug Task Force</td>
</tr>
<tr>
<td>Silver Maple Recovery</td>
<td></td>
<td>Newly built Drug / Rehabilitation Facility</td>
</tr>
<tr>
<td>The LCADA Way</td>
<td></td>
<td>People with drug and alcohol addiction</td>
</tr>
<tr>
<td>The Nord Center</td>
<td></td>
<td>Private, non-profit agency that provides comprehensive behavioral and mental health services to residents in greater Lorain County,</td>
</tr>
<tr>
<td>The North Family Foundation</td>
<td></td>
<td>Foundation that endeavors to build community through support of projects that bring opportunity to the disadvantaged, strengthen the bond of families and improve the quality of people's lives. Provides assistance to</td>
</tr>
<tr>
<td>Organization</td>
<td>Description</td>
<td></td>
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<td>------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>Lorain County Urban League</td>
<td>African Americans and other minorities or disadvantaged people, uninsured, poor, disadvantaged and homeless, and students.</td>
<td></td>
</tr>
<tr>
<td>United Way of Greater Lorain County</td>
<td>Low income and working families below 200% of poverty level</td>
<td></td>
</tr>
<tr>
<td>Alcohol and Drug Addiction Services Board of Lorain County</td>
<td>At-risk population – low-income and minority dealing with Alcohol and drug addiction</td>
<td></td>
</tr>
<tr>
<td>Cleveland Clinic Avon Hospital</td>
<td>Hospital that Serves community residents.</td>
<td></td>
</tr>
<tr>
<td>Lorain County Health and Dentistry</td>
<td>Federally funded community health center that serves the underserved in Lorain and surrounding communities by providing outpatient medical and dental services. Serves at-risk population – FQHC</td>
<td></td>
</tr>
<tr>
<td>Lorain County Metro Parks</td>
<td>Organization which oversees the park system in Lorain County. Serves community at large.</td>
<td></td>
</tr>
<tr>
<td>Lorain County Public Health Department</td>
<td>Community at large, low-income and uninsured residents. Responsible for the WIC Program of Lorain County.</td>
<td></td>
</tr>
<tr>
<td>Lorain County Board of Mental Health</td>
<td>Local public agency that plans, funds, monitors and evaluates a system of services for residents with mental illness in Lorain County</td>
<td></td>
</tr>
<tr>
<td>Lorain County Office of Aging</td>
<td>Organization that improves the health, well-being and independence of Lorain County residents by serving vulnerable aging individuals and other adults with special needs.</td>
<td></td>
</tr>
<tr>
<td>Special Hospital of Lorain</td>
<td>Serves community residents.</td>
<td></td>
</tr>
<tr>
<td>University Hospital Elyria Medical Center</td>
<td>Integrated healthcare network that includes full-service hospital in Elyria and OP satellite offices throughout Lorain County</td>
<td></td>
</tr>
<tr>
<td>Lorain County CHIP Steering Committee</td>
<td>Members involved in reviewing primary and secondary data sources, determined priority health issues, determined gaps in current programming and policies, examined best practices and solutions, and determined specific strategies to address the priority issues.</td>
<td></td>
</tr>
</tbody>
</table>
Executive summary: Significant health needs
T.R. §1.501(r)-3(b)(4)

CHRONIC DISEASE

Capacity and adequacy of service levels
In Lorain County, when someone was diagnosed with diabetes, they also had one of the following chronic disease issues: 82% had high blood pressure; 79% were obese or overweight; 65% were diagnosed with high cholesterol.

In 2018, 85,475 Lorain County adults accounting for 70% of our population were either overweight (32%) or obese (38%) when measuring the body mass index. In Lorain County, our urban health is in need of attention as thirteen (13%) of Elyria and Lorain City adults did not have the health care coverage at all. More than one-third of these adults (34%) had high blood cholesterol; nine percent (9%) were classified as overweight or obese and 27% were current smokers. In our suburban locations, seven (7%) adults did not have insurance coverage with one fourth (29%) of adults having high blood pressure with thirteen percent (13%) being current smokers. Nearly two-fifths (38%) of Lorain County women were obese, 29% had high blood pressure, 29% had high cholesterol and 14% were current smokers with 12% being diagnosed with diabetes. Two-fifths (40%) of men in Lorain County were diagnosed with high blood pressure and high cholesterol, thirty-eight (38%) were diagnosed as being obese. Lorain County adults that were diagnosed with high blood pressure or high cholesterol were more likely to be 65 years and older; 40% are male; 44% and live in an urban area.

Current service providers
The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

- **Lorain County Urban League** - the community resource for African Americans and all disadvantaged persons in our community to get empowered and connected to opportunities
- **El-Centro** - The community center that connects the Hispanic and Latino population for all of Lorain County supporting education / health / youth / housing / food and nutrition
- **Second Harvest Food Bank** – Facility that provides nutritious food options for families of all ages at various locations
• **Lorain County Free Clinic** – Coordinates community resources for low-income and uninsured residents of Lorain County, providing comprehensive healthcare at minimal or no cost.

• **Lorain County Public Health** - They create programs and services that allow and encourage the healthy choice to be the easy choice, operate in a sustainable fashion that reflects responsible stewardship, lead by example in the community, and manage our organization to effectively face current and future public health challenges. Main priorities for 2018 through 2022 are: Link to needed services / Expand coordinated education and prevention / Improve weight issues and obesity / Strengthen organizational efficiency and effectiveness

• **Lorain County Health and Dentistry** – Federally funded community health center that serves the underserved in Lorain and surrounding communities by providing outpatient medical and dental services.

• **Lorain County Metro Parks** - The Lorain County Metropolitan Park District was created in 1957 by the Lorain County Probate Court, under the authority of Ohio’s innovative, time-proven Park District Law of 1917. Beginning with the donation of Mill Hollow in 1958 by Dorothy Bacon DeMuth, and the gifts of the Burrell Family, Otto Schoepfle, John Caley, the City of Lorain, Buddy Miller, Eric Nord and others, the park district has steadily grown to over 9,000 acres.

• **Mercy Health Parish Nursing Program** – Fully grant funded program that provides free chronic disease health screening and exercise programs for the church and congregations throughout Lorain County

**PREVENTATIVE HEALTH**

Capacity and adequacy of service levels
Lorain County adults indicated that their doctor or healthcare professional talked to them about the following: Immunizations (44%); weight control – diet and physical exercise (43%); family history (38%); safe use of prescription medication (27%); depression, anxiety or emotional problems (27%); tobacco use (16%); falls (15%); bone density (14%); injury prevention such as safety belt use; helmet use, or smoke detectors (14%); alcohol use (12%); safe use of opiate-based pain medication (11%); family planning (11%); sexually transmitted disease (STD’s) (10%); self-testicular exams (7%); illicit drug abuse (6%); domestic violence (4%); substance abuse treatment options (3%) and firearm safety (2%). Lorain County adults have participated in the following preventative exams in the past two years: vision (72%); breast cancer (33%); hearing (25%); colorectal cancer
(24%); skin cancer (20%); prostate cancer (19%); osteoporosis (9%) and memory screening (5%).

**Current service providers**
The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

- **The Alcohol and Drug Addiction Services Board of Lorain County (ADAS)** – has now combined boards with the Lorain County Board of Mental Health and is now the Mental Health Addiction and Recovery Board of Lorain County – Government agency responsible for planning, evaluating, funding, and contracting for the delivery of publicly-financing alcohol and other drug-addiction, prevention and treatment services for the benefit of Lorain County residents.

- **The LCADA Way** - Organization which cares for individuals and families struggling with drug and alcohol addiction

- **Lorain County Free Clinic** – Coordinates community resources for low-income and uninsured residents of Lorain County, providing comprehensive healthcare at minimal or no cost.

- **Lorain County Public Health** - They create programs and services that allow and encourage the healthy choice to be the easy choice, operate in a sustainable fashion that reflects responsible stewardship, lead by example in the community, and manage our organization to effectively face current and future public health challenges. Main priorities for 2018 through 2022 are: Link to needed services / Expand coordinated education and prevention / Improve weight issues and obesity / Strengthen organizational efficiency and effectiveness

- **Lorain County Metro Parks** - The Lorain County Metropolitan Park District was created in 1957 by the Lorain County Probate Court, under the authority of Ohio’s innovative, time-proven Park District Law of 1917. Beginning with the donation of Mill Hollow in 1958 by Dorothy Bacon DeMuth, and the gifts of the Burrell Family, Otto Schoepfie, John Caley, the City of Lorain, Buddy Miller, Eric Nord and others, the park district has steadily grown to over 9,000 acres.

- **Lorain County Health and Dentistry** – Federally funded community health center that serves the underserved in Lorain and surrounding communities by providing outpatient medical and dental services.

- **Lorain County Urban League** - the community resource for African Americans and all disadvantaged persons in our community to get empowered and connected to opportunities
• **El-Centro** - The community center that connects the Hispanic and Latino population for all of Lorain County supporting education / health / youth / housing / food and nutrition

• **Mercy Health Parish Nursing Program** – Fully grant funded program that provides free chronic disease health screening and exercise programs for the church and congregations throughout Lorain County

**CANCER**

**Capacity and adequacy of service levels**

From 2015 to 2017, cancer caused 22% (2,066 of 9,429 total deaths) of all Lorain County resident deaths. Fifty-five percent of (55%) of Lorain County females over the age of 40 had a mammogram in the past year. While 55% of women had their mammograms, only 24% of those women were from the urban community. Prostate cancer is the most common cancer among American men. More than half (51%) of Lorain County males had a prostate-specific antigen (PSA) test at some time in their life and 29% had on in the past year with 46% of men over the age of 50 that had a PSA test. Fifty-eight percent (58%) of men had a digital rectal exam in their lifetime within Lorain County. Cancer accounts for 23% of the deaths for men and 21% of the deaths for women in Lorain County. Fifteen (15%) of the cancer deaths were from breast cancer and lung / bronchus cancer with in Lorain County closely followed by thirteen percent (13%) prostate cancer and nine percent (9%) colon and rectal cancer.

**Current service providers**

The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

• **Mercy Health Cancer Center** – Cancer center located in Elyria that can provide both chemotherapy and radiation therapy care for patients within Lorain County.

• **Mercy Health Angels and Amiga’s Program** – Grant funded program that provides free mammograms to the Hispanic / Latina and African American community

**MATERNAL AND CHILD HEALTH**

**Capacity and adequacy of service levels**

From 2014 to 2018 there was an average of 3,311 live births in Lorain County and of those 10.3% had a gestational period of less than 10.3% which was an increase from the previous year. Twenty-one percent (21%) of the births in Lorain County were a low birth weight of less than the national average of 5.8 pounds. Twenty-seven (27%) of Lorain County
women had been pregnant in the past five years in Lorain County. During their pregnancy, Lorain County women took a multi-vitamin with folic acid during pregnancy (63%); had a prenatal appointment in the first three months (61%) folic acid / prenatal vitamins (51%), took a multi-vitamin with folic acid pre-pregnancy (49%), had a dental exam (38%), took folic acid during pregnancy cy (38%), received WIC services (28%), folic acid pre-pregnancy (23%), experienced depression (9%), used marijuana (2%) consumed alcohol (2%) and smoked cigarettes or tobacco products (2%). Infant mortality occurred at a rate of 6.6 for every 1,000 live births for Lorain County which was less than the state number of 7.2.

Current service providers
The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

- **Lorain County Health and Dentistry** – Federally funded community health center that serves the underserved in Lorain and surrounding communities by providing outpatient medical and dental services.
- **Mercy Health Resource Mothers** – Fully grant funded program in which Community Health Workers provide at home care for at-risk pregnant women in the community to ensure proper pre-natal and post-birth care
- **Cornerstone Among Women** – Assists low-income women with pregnancy issues
- **Lorain County Children and Families Council** – Promotes the well-being of children and families in Lorain County
- **Oberlin Kids** - Supports the parents and families of children ages 0-5 and give them the resources necessary to support their child’s development. The goal is to give each child birth to kindergarten who live in Oberlin the opportunity to be successful in school and in life, to support our children and families and make our community stronger.
- **Lorain County Public Health / WIC / SNAP** - They create programs and services that allow and encourage the healthy choice to be the easy choice, operate in a sustainable fashion that reflects responsible stewardship, lead by example in the community, and manage our organization to effectively face current and future public health challenges. Main priorities for 2018 through 2022 are: Link to needed services / Expand coordinated education and prevention / Improve weight issues and obesity / Strengthen organizational efficiency and effectiveness.
MENTAL HEALTH

Capacity and adequacy of service levels
In 2018, 4% of Lorain County adults considered attempting suicide. From 2013 to 2018 there were a total of 294 suicides with 38% of suicide deaths occurred between the ages of 45 and 64. The number of males that committed suicide was four times greater than that of a female in which out of the 294 suicides seventy-nine percent (79%) or 233 men committed suicide compared to 59 females during that time period.

Thirteen percent (13%) of Lorain County adults used a program or service for themselves or a loved one to help with depression, anxiety or emotional problems. Twenty-five percent (25%) of those under the age of 30 felt sad or depressed for two or more weeks in a row. For those in the county with an income less than $25,000, sixteen percent (16%) felt sad or depressed for two or more weeks in a row. Within Lorain County, this percentage as a whole from 2011 to 2015 increased from 13% to 20% therefore showing a need in access for mental health care for the community.

Lorain County adults reported that they looked for programs for themselves or loved ones: depression, anxiety or mental health (25%); marital/family problems (5%); smoking cessation (4%); alcohol abuse (4%); drug abuse (3%) detoxification for opiates / heroin (2%). One in twenty hospital admissions were mental / behavioral health related as a primary diagnosis while a secondary diagnosis for hospitalization was commonly: nicotine dependence (21.1%); anxiety disorder (13.2%) and major depressive order episode (16.7%) totaling over half of hospitalized inpatients throughout Lorain County.

The Youth of Lorain County also struggle with mental health as one-fourth (25%) of sixth graders reported they felt sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities. More than one-fourth (28%) of 12th grader youth reported they had seriously considered attempting suicide in the past 12 months. Those that took the survey between grades sixth through twelfth grade states that they experienced: depression; anxiety; stress; bullying; concerns of what others thought of them; thoughts of suicide; alcohol and drugs and finally aggression and violence.

Current service providers
The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

- The Alcohol and Drug Addiction Services Board of Lorain County (ADAS) – has now combined boards with the Lorain County Board of Mental Health and is now the Mental Health Addiction and Recovery Board of Lorain County –
Government agency responsible for planning, evaluating, funding, and contracting for the delivery of publicly-financing alcohol and other drug-addiction, prevention and treatment services for the benefit of Lorain County residents.

- **The LCADA Way** - Organization which cares for individuals and families struggling with drug and alcohol addiction
- **The Nord Center** - a private, non-profit agency providing comprehensive behavioral and mental health services to children, adolescents and adults in the greater Lorain County area. Our services include outpatient counseling; sexual assault / rape crisis services; drug and alcohol addiction; dual diagnosis (substance abuse and mental illness); psychiatry and medication management; employment and vocational services; supportive housing as well as homelessness prevention. We also offer culturally specific services to bilingual and African American consumers.
- **Mercy Health Physicians** – 4 Clinical Psychologists that accept patients through a Primary care referral
- **Mercy Health Inpatient Psychiatric Unit** – 25 inpatient unit for admission
- **Lorain County Pride Initiative** – off-shoot of the Alcohol and Drug Addiction Services of Lorain County that provides resources to residents of the city of Lorain experiencing anxiety, depression and problematic substance abuse issues due to recent economic downturn.
- **Mercy Health Parish Nursing Program** – Fully grant funded program that provides free chronic disease health screening and exercise programs for the church and congregations throughout Lorain County
- **Pathways Counseling and Growth Center** – non-profit that provides mental health counseling services primarily to Medicaid and low-income residents
- **Local School Systems** - Oberlin City Schools; Lorain City Schools; Elyria City Schools; Vermilion City Schools; Amherst City Schools; Avon City Schools

**SUBSTANCE ABUSE**

**Capacity and adequacy of service levels**

In 2018, 10% of Lorain County adults had used recreational marijuana during the past 6 months with 13% of that number being males and 17% were under the age of 30. Eight percent (8%) of adults had used medication not prescribed for them or took more than prescribed to feel good or high and/or more active or alert during the past 6 months. We continue to see prescription opiate related drug overdose and unintentional overdose deaths annually and therefore education and support is still needed in the community.
The 2018 Pride Survey Report indicated the 4% of Lorain County 8th grade youth and 8% of 12th grade youth had smoked cigarettes in the past month. Twenty-Three percent (23%) of 10th graders and Thirty-seven (37%) of 12th grade youth used an e-cigarette, vape pen or e-liquid rig in the last 30 days. When considering alcohol consumption, three (3%) of 6th grade youth were current drinkers having a drink in the last 30 days and seventeen percent (17%) of 8th graders had alcohol in the past year. When we consider youth use of illicit drugs, four percent (4%) of sixth graders and thirty-one (31%) of twelfth graders used marijuana or hashish while thirty-one (31%) in the past 30 days while six percent (6%) of 12th graders used prescription drugs in the past year.

Current service providers
The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

- **The Urban Minority Alcoholism and Drug Abuse Outreach Program** – serves on of Ohio’s largest Hispanic communities as well as large African American populations by ensuring they have affordable access to programs that treat alcohol, tobacco and drug abuse

- **The Alcohol and Drug Addiction Services Board of Lorain County (ADAS)** – has now combined boards with the Lorain County Board of Mental Health and is now the Mental Health Addiction and Recovery Board of Lorain County – Government agency responsible for planning, evaluating, funding, and contracting for the delivery of publicly-financing alcohol and other drug-addiction, prevention and treatment services for the benefit of Lorain County residents.

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ACCESS TO CARE

Capacity and adequacy of service levels
In 2018, 10% of Lorain County adults were without healthcare coverage totaling over 22,494. Many Lorain County adults continue to have issues with their healthcare insurance which can create their access to care barriers such as: cost (37%); opted out of certain coverage as they could not afford it (9%); could not understand their insurance plan (7%); working with their insurance company (6%); service not deemed medically necessary (6%); limited visits (5%); opted out of certain coverage because they did not need it (3%); provider no longer covered (3%); service no longer covered (3%); and pre-existing conditions (2%). The data on the uninsured tells us that part of the reason for poor access among the uninsured is that 50% do not have a regular place to go when they are sick or need medical advice. While access is an issue, seventy-one percent (71%) of Lorain County adults visited a doctor for a routine checkup in the year with over fifty (50%) of the adults in Lorain County saying that they have one person that they consider their personal doctor or healthcare provider.

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- **Mercy Health Parish Nursing Program** – Fully grant funded program that provides free chronic disease health screening and exercise programs for the church and congregations throughout Lorain County

- **Mercy Health Physicians** – Key physicians to present on topics
SEXUALLY TRANSMITTED DISEASES - STD’S

Capacity and adequacy of service levels
In 2018, 69% of Lorain County adults had sexual intercourse. Seven percent (7%) of adults had more than one partner. Within Lorain County, there has been a significant rise in Chlamydia cases from 1,154 in 2015 to 1,492 in 2017 demonstrating a 22% increase in two years. There was also a substantial increase in the number of Gonorrhea from 268 reported cases in 2015 to 524 reported cases in 2017 demonstrating an increase by over 45%.

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The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

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- **Mercy Health Infectious Disease Clinic** – Mercy Health department that specializes in infectious diseases throughout the county.
- **Lorain County Health and Dentistry** – Federally funded community health center that serves the underserved in Lorain and surrounding communities by providing outpatient medical and dental services.

SOCIAL DETERMINANTS OF HEALTH / HEALTH EQUITY

Capacity and adequacy of service levels
Healthy people 2020 developed five key determinants as a “place-based” organizing framework: Economic stability; education; social and community context; health and
health care; and neighborhood and built environment. In Lorain County, adults received assistance for the following in the past year: Medicare (13%); food (12%); health care (12%); mental illness issues including depression (11%); dental care (7%); employment (6%); prescription assistance (8%); utilities (5%); rent/mortgage (4%); transportation (4%); legal aid services (3%); credit counseling (2%); diapers (2%); drug or alcohol addiction (2%); clothing (2%); unplanned pregnancy (1%) and gambling (<1%).

Nine percent of Lorain County adults experienced one or more types of food insecurities in the past year. Thirteen (13%) of all Lorain County residents were living in poverty and the unemployment rate was 5.5%. Nineteen (19%) of Lorain county adults experienced four or more different types of Adverse Childhood Experiences (ACE’s) in their lifetime, increasing to 24% for those with incomes less than $25,000.

Approximately 13.7% of Lorain County residents were below the poverty line during the survey cycle according to the 2013-2017 American Community Survey 5-year estimates. For this reason, the data that we attained was able to be broken down by income throughout the report demonstrating at times two levels: less than $25,000 and greater than $25,000 in order to better understand the disparity. Healthcare disparities exist when you compare the rural – suburban and urban needs of the community.

Current service providers
The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

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- **Mercy Health Parish Nursing Program** – Fully grant funded program that provides free chronic disease health screening and exercise programs for the church and congregations throughout Lorain County

Prioritization of health needs
The prioritization of significant health needs was accomplished through our “Forces of Change Assessment” which focuses on identifying forces such as legislation, technology, and other impending changes that affect the context in which the community and its public health system operate.
The Lorain County Health Partners were asked to identify positive and negative forces which could impact community health improvement and overall health of this community over the next three years. This group discussion covered many local, state, and national issues and change agents which could be factors in Lorain County in the future. Therefore, the collective of the process by the county, the assessments, our internal committee, and our community diversity committee enabled us to prioritize and develop a plan to address the significant community health needs for 2020 – 2022 for both Mercy Health - Lorain Hospital and Mercy Health - Allen Hospital.

As noted above, the Lorain County CHA utilized the MAPP Framework to combine the data and results from the four assessments (community themes and strengths, forces of change, local public health system assessment, and the community health status assessment). These four assessments were used by the Lorain County Health Partners to prioritize specific health issues and population groups to identify the prioritized health needs.

The CHIP was planned by various agencies and service-providers within Lorain County and included both determining priority issues based on the primary and secondary data sources, and identification of specific strategies to address the priority issues. From June to July 2019, the Lorain County Health Partners reviewed many primary and secondary data sources concerning the health and social challenges that Lorain County residents were facing. We determined priority issues which, if addressed, could improve future outcomes; determined gaps in current programming and policies; examined best practices and solutions; and determined specific strategies to address priority issues. In addition, we engaged affiliate organizations which also provided feedback to both the county and our hospital.

The Mercy Health Community Inclusion and Diversity Committee also met to review the survey data and provide recommendations of the pillars, strategies and metrics for the Mercy Health Lorain Plan. This committee is comprised of leaders throughout Lorain County that have served for the past 5 years on our hospital Diversity and Inclusion community. These leaders represent the voice of the community. Prior to coming to our planning meeting, all attendees were sent a survey to allow them to prioritize the needs from their perspective enabling us to have a detailed conversation on what the true needs of the community. Over fifty community members completed the survey monkey that allowed all to rank what they felt was the most important to them for men and women from a chronic disease perspective to their concerns on cancer. This data coupled with the group discussion allowed us to come to consensus on the Community Health Needs Assessment for the Mercy Health - Lorain Hospital and the Mercy Health - Allen Hospital.
Based on the prioritization process outlined above, Mercy Health – Lorain Hospital and Mercy Health – Allen Hospital determined that all of the identified significant health needs should be considered prioritized health needs for the Lorain County community.

**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.

**CHRONIC DISEASE**
In 2018, 85,475 Lorain County adults accounting for 70% of our population were either overweight (32%) or obese (38%) when measuring the body mass index. In Lorain County, our urban health is in need of attention as thirteen (13%) of Elyria and Lorain City adults did not have the health care coverage at all. More than one-third of these adults (34%) had high blood cholesterol; nine percent (9%) were classified as overweight or obese and 27% were current smokers. In our suburban locations, seven (7%) adults did not have insurance coverage with one fourth (29%) of adults having high blood pressure with thirteen percent (13%) being current smokers. Nearly two-fifths (38%) of Lorain County women were obese, 29% had high blood pressure, 29% had high cholesterol and 14% were current smokers with 12% being diagnosed with diabetes. Two-fifths (40%) of men in Lorain County were diagnosed with high blood pressure and high cholesterol, thirty-eight (38%) were diagnosed as being obese.

**PREVENTATIVE HEALTH**
Lorain County adults indicated that their doctor or healthcare professional talked to them about the following: Immunizations (44%); weight control – diet and physical exercise (43%); family history (38%); safe use of prescription medication (27%); depression, anxiety or emotional problems (27%); tobacco use (16%); falls (15%); bone density (14%); injury prevention such as safety belt use; helmet use, or smoke detectors (14%); alcohol use (12%); safe use of opiate-based pain medication (11%); family planning (11%); sexually transmitted disease (STD’s) (10%); self-testicular exams (7%); illicit drug abuse (6%); domestic violence (4%); substance abuse treatment options (3%) and firearm safety (2%). Lorain County adults have participated in the following preventative exams in the past two years: vision (72%); breast cancer (33%); hearing (25%); colorectal cancer (24%); skin cancer (20%); prostate cancer (19%); osteoporosis (9%) and memory screening (5%).
CANCER
From 2015 to 2017, cancer caused 22% (2,066 of 9,429 total deaths) of all Lorain County resident deaths. Fifty-five percent of (55%) of Lorain County females over the age of 40 had a mammogram in the past year. While 55% of women had their mammograms, only 24% of those women were from the urban community. Prostate cancer is the most common cancer among American men. More than half (51%) of Lorain County males had a prostate-specific antigen (PSA) test at some time in their life and 29% had one in the past year with 46% of men over the age of 50 that had a PSA test. Fifty-eight percent (58%) of men had a digital rectal exam in their lifetime within Lorain County. Cancer accounts for 23% of the deaths for men and 21% of the deaths for women in Lorain County. Fifteen (15%) of the cancer deaths were from breast cancer and lung / bronchus cancer with in Lorain County closely followed by thirteen percent (13%) prostate cancer and nine percent (9%) colon and rectal cancer.

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MENTAL HEALTH
In 2018, 4% of Lorain County adults considered attempting suicide. From 2013 to 2018 there were a total of 294 suicides with 38% of suicide deaths occurred between the ages of 45 and 64. The number of males that committed suicide was four times greater than that of a female in which out of the 294 suicides seventy-nine percent (79%) or 233 men committed suicide compared to 59 females during that time period.
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ACCESS TO CARE
In 2018, 10% of Lorain County adults were without healthcare coverage totaling over 22,494. Many Lorain County adults continue to have issues with their healthcare insurance which can create their access to care barriers such as: cost (37%); opted out of certain coverage as they could not afford it (9%); could not understand their insurance plan (7%); working with their insurance company (6%); service not deemed medically necessary (6%); limited visits (5%); opted out of certain coverage because they did not need it (3%); provider no longer covered (3%); service no longer covered (3%); and pre-existing conditions (2%). The data on the uninsured tells us that part of the reason for poor access among the uninsured is that 50% do not have a regular place to go when they are sick or need medical advice. While access is an issue, seventy-one percent (71%) of Lorain County adults visited a doctor for a routine checkup in the year with over fifty (50%) of the adults in Lorain County saying that they have one person that they consider their personal doctor or healthcare provider.

SEXUALLY TRANSMITTED DISEASES - STD'S
In 2018, 69% of Lorain County adults had sexual intercourse. Seven percent (7%) of adults had more than one partner. Within Lorain County, there has been a significant rise in Chlamydia cases from 1,154 in 2015 to 1,492 in 2017 demonstrating a 22% increase in two years. There was also a substantial increase in the number of Gonorrhea from 268 reported cases in 2015 to 524 reported cases in 2017 demonstrating an increase by over 45%.

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Approximately 13.7% of Lorain County residents were below the poverty line during the survey cycle according to the 2013-2017 American Community Survey 5-year estimates. For this reason, the data that we attained was able to be broken down by income
throughout the report demonstrating at times two levels: less than $25,000 and greater than $25,000 in order to better understand the disparity. Healthcare disparities exist when you compare the rural – suburban and urban needs of the community.

**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:

**CHRONIC DISEASE**
- Resources available include Lorain County Urban League, El-Centro, Second Harvest Food Bank, Lorain County Free Clinic, Lorain County Public Health, Lorain County Health and Dentistry, Lorain County Metro parks, and Mercy Health Parish Nursing Program.

**PREVENTATIVE HEALTH**
- Resources available include The Alcohol and Drug Addiction Services Board of Lorain County (ADAS) and The LCADA Way.

**CANCER**
- Resources available include the Mercy Health Cancer Center and the Mercy Health Angels and Amiga’s Program.

**MATERNAL AND CHILD HEALTH**
- Resources available include the Lorain County Health and Dentistry, Mercy Health Resource Mothers, Cornerstone Among Women, Lorain County Children and Families Council, Oberlin Kids, and Lorain County Public Health / WIC / SNAP.

**MENTAL HEALTH**
- Resources available include The Alcohol and Drug Addiction Services Board of Lorain County (ADAS), the LCADA Way, the Nord Center, Mercy Health Physicians, Mercy Health Inpatient Psychiatric Unit, Lorain County Pride Initiative, Mercy Health Parish Nursing Program, pathways Counseling and Growth Center, and the Local School Systems.

**SUBSTANCE ABUSE**
- Resources available include The Urban Minority Alcoholism and Drug Abuse Outreach Program, The Alcohol and Drug Addictions Services Board of Lorain
ACCESS TO CARE
- Resources available include Lorain County Free Clinic, Lorain County Public Health, Lorain County Health and Dentistry, Mercy health parish Nursing Program, and Mercy health Physicians.

SEXUALLY TRANSMITTED DISEASES - STD'S
- Resources available include Lorain County Free Clinic, Lorain County Public Health, Mercy Health infectious Disease Clinic, and Lorain County Health and Dentistry.

SOCIAL DETERMINANTS OF HEALTH / HEALTH EQUITY
- Resources available include Lorain County Public Health and Mercy Health Parish Nursing Program.
Progress on Health Priorities Identified in the 2016 Health Needs Assessment

Mercy Health – Lorain Hospital

EXERCISE AND WEIGHT

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Impact</th>
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<tbody>
<tr>
<td>Celebrate your Plate</td>
<td>Celebrate your Plate is a marketing program designed to reach out to families with Children that participate in the SNAP-Ed Program. The program is designed to raise awareness to what a healthy plate looks like. Participated in the development of a regional strategy through The Center for Health Affairs: Member hospitals selected one initiative and will collaborate on the regional initiative through The Center for Health Affairs to increase awareness of fruit and vegetable consumption through the SNAP-Ed “Celebrate Your Plate” marketing campaign. The SNAP-Ed Program will measure consumption of fruits and vegetables purchases made with a card for households with children under 18 years old who are at or below 185% of the Federal Poverty Level.</td>
</tr>
<tr>
<td>Parish Nurse Program</td>
<td>Mercy provides free or low cost exercise classes and nutritional education classes throughout the community through the Parish Nurse Program. 18,400 and 16,840 individuals participated in these classes in 2017 and 2018, respectively. In 2017 and 2018 combined, 135 nutritional classes were offered.</td>
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LEADING CAUSE OF DEATH

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Lung Nodule Program</td>
<td>Hospital continue to implement strategies, including establishing a lung nodule screening program with a nurse navigator component, to decrease the percentage of lung and bronchus cancers diagnosed in late stage in Lorain County. The lung nodule screening program was not available prior to 2016. In 2018, our Lung Nodule Program partnered with the Primary Care Physicians to refer to Dr. Charles Wehbe. He and the Nurse Navigator, Crystal Youngless, worked in 2018 towards ensuring that all patients were educated and had access to the Lung Nodule Program. In 2018, there were 581 lung node procedures compared to 375 in 2017.</td>
</tr>
</tbody>
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ACCESS TO CARE

| Initiative | Impact |
Increase number of patients that have PCPs

Implemented a Parish Nurse Screening program to solicit those that attend our Parish Nursing Screenings to access if they have a Primary Care Physician and do referrals if applicable. 2017 was the first year the Parish Nursing collaborated with the Mercy Health Physicians (MHP) to support the initiative of all getting a Primary Care Physician. Their presence and collaboration allowed us to connect with 196 individuals in 2018 who needed a Primary Care physician and who made an appointment.

MHP Primary Care Physician Initiative

The Mercy Health Physician practices traced that total number of patients that took on a Primary Care Physician. We saw a decrease from 2017 against an aggressive goal. The previous year we hit 10,117 which was a 5% increase from the previous year. In 2018, 9,865 patients established a PCP.

### MENTAL HEALTH

<table>
<thead>
<tr>
<th>Initiative</th>
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<tbody>
<tr>
<td>MHP Behavioral Health Initiative</td>
<td>Mercy Health Physicians worked collaboratively to have a presence around behavioral health throughout Lorain County. Due to the demand, they hired an additional Clinical Psychologist enabling us to expand to 6 location in 2017, and 9 locations in 2018. In 2018, there were 3,679 visits to the Mercy Behavioral Health Clinicians at the access points outlined above. This was a significant increase compared to 2,801 visits in 2017.</td>
</tr>
</tbody>
</table>

Mercy Health – Lorain Hospital did not implement strategies to address use of alcohol, tobacco, and other drug use among adults or youth, preventive health, or maternal and child health. Mercy continues to support other organizations in Lorain County that are specifically designed and better prepared to respond to these needs through resources and experience. The Maternal and Child Health Needs initiatives were continued through the Resource Mothers Family Outreach Program which is a fully grant funded program that continued with the same vigor as in previous years with an added grant from the Lorain County Public Health to focus on Infant Mortality for the African American Community.

Reducing the incidence of smoking among youths and adults and reducing the number of deaths from opiates/ heroin are both objectives being addressed through Lorain County’s Health Improvement Plan (CHIP). Mercy has representation on the CHIP steering
committee as well as on all individual health needs subcommittees, and is committed to fulfilling the goals set forth in the overall CHIP. Additionally, Mercy will continue to enforce its tobacco-free campuses policy, as well as promote smoking cessation programs for both employees and patients. Mercy, as a system, is developing a policy to address the epidemic of heroin overdoses in its communities.

For preventive health, Mercy will continue to offer thousands of free screenings through its Parish Nursing Program, many of which are attended by underserved and impoverished residents who otherwise would not be able to afford or receive this service. Mercy will also continue to provide free educational sessions throughout the year on crucial health topics such as hypertension, cardiac health, diabetes, the importance of flu vaccines and breast health. These sessions often occur in the parishes, where the residents have easy access to and are hosted by physicians. The collaboration with the Lorain County General Health District in promoting its vaccine programs, especially flu vaccines, will also continue. Mercy Allen will also directly address this community need through working to improve mammography utilization in the rural portion of Lorain County, where the mammography rate for women over 40 is low.

Mercy will continue to support the underserved women and infants in Lorain County through its Resource Mothers Program. This program is specifically designed to respond to the critical need for preventive healthcare education and support services for low income, high-risk pregnant and parenting women and their families. The goal is to enhance birth outcomes, promote healthy behaviors and empower the parent by assisting them with connections to various community services. Targets for healthy birth weights and immunizations are being met for all births occurring through this program.

Mercy’s Resource Mother’s program also supports those who can’t afford necessities through its short-term and long-term client programs. While short-term clients have their needs met during one visit, long-term clients are brought into the program during pregnancy and remain until the baby reaches the age of one. The client meets with their resource mother monthly to review a care plan and goals, as well as learn about proper car seat instructions, pediatricians and other resources available to them. Clients on these programs receive items such as formula, diapers, wipes, clothing, bottles, food, cribs and other baby essentials.
Reducing infant mortality is an objective being addressed through Lorain County’s Health Improvement Plan (CHIP). Mercy has representation on the CHIP steering committee as well as all on individual health needs subcommittees, and is committed to fulfilling the goals set forth in the overall CHIP. Additionally, Mercy’s Parish Nursing Program, obstetrics physicians, and birth and delivery department will continue to work with pregnant women as well as those who just gave birth on smoking cessation programs to promote a healthy environment for unborn babies and newborn infants.

Mercy Health – Allen Hospital

**EXERCISE AND WEIGHT STATUS**

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Celebrate your Plate</td>
<td>Celebrate your Plate is a marketing program designed to reach out to families with Children that participate in the SNAP-Ed Program. The program is designed to raise awareness to what a healthy plate looks like. Participated in the development of a regional strategy through The Center for Health Affairs: Member hospitals selected one initiative and will collaborate on the regional initiative through The Center for Health Affairs to increase awareness of fruit and vegetable consumption through the SNAP-Ed “Celebrate Your Plate” marketing campaign. The SNAP-Ed Program will measure consumption of fruits and vegetables purchases made with a card for households with children under 18 years old who are at or below 185% of the Federal Poverty Level.</td>
</tr>
<tr>
<td>Parish Nurse Program</td>
<td>Mercy provides free or low cost exercise classes and nutritional education classes throughout the community through the Parish Nurse Program. 18,400 and 16,840 individuals participated in these classes in 2017 and 2018, respectively. In 2017 and 2018 combined, 135 nutritional classes were offered.</td>
</tr>
</tbody>
</table>

**LEADING CAUSE OF DEATH**

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lung Nodule Program</td>
<td>Hospital continue to implement strategies, including establishing a lung nodule screening program with a nurse navigator component, to decrease the percentage of lung and bronchus cancers diagnosed in late stage in Lorain County. The lung nodule screening program was not available prior to 2016. In 2018, our Lung Nodule Program partnered with the Primary Care Physicians to refer to Dr. Charles Wehbe. He and the Nurse Navigator, Crystal Youngless, worked in 2018 towards ensuring that all patients were educated and had access</td>
</tr>
</tbody>
</table>


to the Lung Nodule Program. In 2018, there were 581 lung node procedures compared to 375 in 2017.

### ACCESS TO CARE

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase number of patients that have PCPs</td>
<td>Implemented a Parish Nurse Screening program to solicit those that attend our Parish Nursing Screenings to access if they have a Primary Care Physician and do referrals if applicable. 2017 was the first year the Parish Nursing collaborated with the Mercy Health Physicians (MHP) to support the initiative of all getting a Primary Care Physician. Their presence and collaboration allowed us to connect with 196 individuals in 2018 who needed a Primary Care physician and who made an appointment.</td>
</tr>
<tr>
<td>MHP Primary Care Physician Initiative</td>
<td>The Mercy Health Physician practices traced that total number of patients that took on a Primary Care Physician. We saw a decrease from 2017 against an aggressive goal. The previous year we hit 10,117 which was a 5% increase from the previous year. In 2018, 9,865 patients established a PCP.</td>
</tr>
</tbody>
</table>

### PREVENTIVE HEALTHCARE

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angels and Amigas and Parish Nursing</td>
<td>The Mercy Health Lorain Region Angels and Amigas Program focused on providing free mammograms for all, but specifically the Hispanic / Latina and African American population. The goal was to increase the mammography utilization rate of women aged 40 and older in the southern portion of Lorain County. In 2018, there was an increased mammography utilization rate of women aged 40 and older in the area from prior year. This year we had a utilization rate of 50% as compared to 37% in 2017. In 2018, the Hospital provided 12,329 mammogram screenings compared to 1,791 mammogram screenings in 2017. Our Mercy Health Allen Facility became a state authorized walk-in Mammogram provider. In 2018, 62.0% of women aged 50 and older had a mammogram in the MHP Southern Lorain County Practices (Oberlin / Wellington / LaGrange) compared to 48.6% in 2017.</td>
</tr>
</tbody>
</table>

### MENTAL HEALTH

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>MHP Behavioral</td>
<td>Mercy Health Physicians worked collaboratively to have a presence around behavioral health throughout Lorain County. Due to the demand, they hired an</td>
</tr>
</tbody>
</table>
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Reducing infant mortality is an objective being addressed through Lorain County’s Health Improvement Plan (CHIP). Mercy has representation on the CHIP steering committee as well as all on individual health needs subcommittees, and is committed to fulfilling the goals set forth in the overall CHIP. Additionally, Mercy’s Parish Nursing Program, obstetrics physicians, and birth and delivery department will continue to work with pregnant women.
as well as those who just gave birth on smoking cessation programs to promote a healthy environment for unborn babies and newborn infants.
## Appendix A: Community Themes and Strengths Assessment (CTSA) Results

| What do you believe are the 2-3 most important characteristics of a health community? | Optimal health for all  
| Quality schools and education  
| Healthy and accessible resources  
| Sense of belonging  
| Employment options  
| Resources for self-care  
| Accessible and affordable health care  
| Thriving community  
| Sense of safety  
| Generational interactions  
| Opportunities for families  
| Peer support  
| Lack of stigma for mental health issues and substance abuse  
| Diversity and inclusion  
| Support for re-entry  
| Built environment to support an active community  
| Access to healthy food  
| Thriving and engaged civic community  
| Environmental justice |
| What do you believe are the 2-3 most important characteristics of a healthy community? | Optimal health for all  
| Quality schools and education  
| Healthy and accessible resources  
| Sense of belonging  
| Employment options  
| Resources for self-care  
| Accessible and affordable health care  
| Thriving community  
| Sense of safety  
| Generational interactions  
| Opportunities for families  
| Peer support  
| Lack of stigma for mental health issues and substance abuse  
| Diversity and inclusion  
| Support for re-entry  
| Built environment to support an active community |
| What makes you the most proud of our community? | - Access to healthy food  
- Thriving and engaged civic community  
- Environmental justice  
- Collaboration  
- Quality health care  
- Resilience and grit of community members  
- Community colleges  
- Diversity of population  
- Communities willingness to give  
- Metro Parks  
- Access to mental health and substance abuse support  
- Competent and caring practitioners  
- Availability of community services |
| What are some specific examples of people or groups working together to improve the health and quality of life in our community | - Lorain County Health Partners  
- Parks and Recreation  
- Coalition for uninsured  
- Opiate collaboration  
- Homeless task force  
- Re-entry coalition  
- Libraries  
- United Way Community Collaboratives  
- Live Healthy groups  
- School systems |
| What do you believe are the 2-3 most important issues that must be addressed to improve the health and quality of life in our community? | - Less emphasis on screen time and technology  
- Employment options with livable wages  
- Transportation  
- Mental health  
- Community connections  
- Universal and high-quality education for youth  
- Social isolation and loneliness  
- Racism  
- Improved housing stock  
- Linkage of Lorain County to broader / regional approaches |
| What do you believe is keeping our community from doing what needs | - Lack of collaboration between municipal and county government  
- Turf and silos |
<table>
<thead>
<tr>
<th>Question</th>
<th>Actions/Strategies</th>
</tr>
</thead>
</table>
| What would excite you enough to become involved (or more involved) in improving our community? | - More private organization involvement  
- Sharing of data and information  
- Continuous show of successes  
- Mission and vision statements focused on collaboration  
- Explanation of data-driven decisions |
| What Actions policy, or funding priorities would you support to build a healthier community? | - Research and data driven approaches  
- Coordination of care across neighborhoods  
- Giving those with poor health a voice  
- Increased transportation  
- Local funding opportunities  
- Planning with sustainability in mind  
- Rural and Urban strategies from the state |
| to be done to improve health and quality of life?                        | - Leveraging of public knowledge  
- Seeing the root causes of issues  
- Aligned funding  
- Unemployment  
- History  
- Fundamental attribution error  
- Clear and actionable goals  
- Sharing of "silent" work |
### Appendix B: Quality of Life Survey Questions and Responses

<table>
<thead>
<tr>
<th>Quality of Life Questions</th>
<th>Likert Scale Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Are you satisfied with the quality of life in our community? (Consider your sense of safety, well-being, participation in community life and associations, etc.) [IOM,1997]</td>
<td>3.41</td>
</tr>
<tr>
<td>2. Are you satisfied with the health care system in the community? (Consider access, cost, availability, quality, options in health care, etc.)</td>
<td>3.44</td>
</tr>
<tr>
<td>3. Is this community a good place to raise children? (Consider school quality, day care, after school programs, recreation, etc.)</td>
<td>3.37</td>
</tr>
<tr>
<td>4. Is this community a good place to grow old? (Consider elder-friendly housing, transportation to medical services, churches, shopping; elder day care, social support for the elderly living alone, meals on wheels, etc.)</td>
<td>3.05</td>
</tr>
<tr>
<td>5. Is there economic opportunity in the community? (Consider locally owned and operated businesses, jobs with career growth, job training/higher education opportunities, affordable housing, reasonable commute, etc.)</td>
<td>2.92</td>
</tr>
<tr>
<td>6. Is the community a safe place to live? (Consider residents’ perceptions of safety in the home, the workplace, schools, playgrounds, parks, and the mall. Do neighbors know and trust one another? Do they look out for one another?)</td>
<td>3.28</td>
</tr>
<tr>
<td>7. Are there networks of support for individuals and families (neighbors, support groups, faith community outreach, agencies, or organizations) during times of stress and need?</td>
<td>3.47</td>
</tr>
<tr>
<td>8. Do all individuals and groups have the opportunity to contribute to and participate in the community’s quality of life?</td>
<td>3.29</td>
</tr>
<tr>
<td>9. Do all residents perceive that they — individually and collectively — can make the community a better place to live?</td>
<td>3.00</td>
</tr>
<tr>
<td>10. Are community assets broad-based and multi-sectoral? (There are a variety of resources and activities available county-wide)</td>
<td>3.16</td>
</tr>
<tr>
<td>11. Are levels of mutual trust and respect increasing among community partners as they participate in collaborative activities to achieve shared community goals?</td>
<td>3.19</td>
</tr>
<tr>
<td>12. Is there an active sense of civic responsibility and engagement, and of civic pride in shared accomplishments? (Are citizens working towards the betterment of their community to improve life for all citizens?)</td>
<td>3.14</td>
</tr>
</tbody>
</table>
## Appendix C: Forces of Change Assessment Results

<table>
<thead>
<tr>
<th>Force of Change</th>
<th>Threats Posed</th>
<th>Opportunities Created</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Technology</td>
<td>Decrease in job opportunities</td>
<td>Improved access to care (efficient and affordable)</td>
</tr>
<tr>
<td></td>
<td>Reduced access if technology is not available</td>
<td>Telemedicine opportunities</td>
</tr>
<tr>
<td></td>
<td>Isolation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sedentary lifestyles</td>
<td></td>
</tr>
<tr>
<td>2. Immigration</td>
<td>Access to care</td>
<td>Strong sense of community</td>
</tr>
<tr>
<td></td>
<td>Access to affordable housing</td>
<td>Work ethic</td>
</tr>
<tr>
<td>3. Opiate crisis/changes in drug epidemic</td>
<td>Loss of parents</td>
<td>Education and awareness</td>
</tr>
<tr>
<td></td>
<td>Increase in number of children in foster care</td>
<td>Community support</td>
</tr>
<tr>
<td></td>
<td>Changes in drug of choice</td>
<td></td>
</tr>
<tr>
<td>4. Levy for community college</td>
<td>Increase in tuition/reduced education options</td>
<td>Affordable higher education</td>
</tr>
<tr>
<td>5. Growing elderly population</td>
<td>Lack of public transportation</td>
<td>Opportunities for generational connections</td>
</tr>
<tr>
<td></td>
<td>Increase in loneliness and isolation</td>
<td>Increase acceptance/normalization of aging</td>
</tr>
<tr>
<td></td>
<td>Increase in older adults living alone</td>
<td>Integrate physical/behavioral health care</td>
</tr>
<tr>
<td></td>
<td>Reluctance to access preventive health care</td>
<td>Involvement with affordable child care</td>
</tr>
<tr>
<td></td>
<td>Rise in health care costs</td>
<td>Neighborhood support</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Disposable society</td>
<td>Loss of community values</td>
<td>None noted</td>
</tr>
<tr>
<td></td>
<td>Loss of shared family values</td>
<td></td>
</tr>
<tr>
<td>7. Social media/programming</td>
<td>Impact on youth (ex: increase in</td>
<td>Increased focus on youth to combat mental health issues</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Stigma of seeking services</td>
<td>Less service utilization</td>
<td>Opportunity for continue conversations Budget to address stigma issues Harm reduction strategies</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
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</tr>
<tr>
<td>9. Potential mayor change (Elyria/Lorain)</td>
<td>Loss of connections, partnerships, relationships</td>
<td>Opportunity for new relationships and collaboration Fresh ideas</td>
</tr>
<tr>
<td>10. Retirement of Lorain police chief</td>
<td>Loss of relationship with immigrant community (feeling unsafe)</td>
<td>Revisit gaps Community support</td>
</tr>
<tr>
<td>11. Increased violence</td>
<td>Often seen as common</td>
<td>Continued community support Parent education pieces</td>
</tr>
<tr>
<td>12. Abortion law changes</td>
<td>Potential impact on infant mortality</td>
<td>None noted</td>
</tr>
<tr>
<td>13. Deportation</td>
<td>Populations may be afraid to seek services</td>
<td>Opportunity to build relationships and strengthen community to calm fears</td>
</tr>
<tr>
<td>14. Aging workforce</td>
<td>Lack of providers</td>
<td>Community college pipeline programs Increase job opportunities</td>
</tr>
<tr>
<td>15. Increase in e-cigarette use</td>
<td>Increase in addiction</td>
<td>Public policy changes</td>
</tr>
<tr>
<td>16. Governor's budget</td>
<td>Potential decrease in funding Ability to deliver promises may be threatened</td>
<td>Increase in funding for addiction, foster care, etc.</td>
</tr>
<tr>
<td>17. Increase in fast food options</td>
<td>Increase in chronic conditions</td>
<td>Education</td>
</tr>
<tr>
<td>18. Single parenthood</td>
<td>Childhood obesity More criminal justice involvement</td>
<td>Reduce stigma Parenthood initiatives Mentoring opportunities</td>
</tr>
<tr>
<td>19. Medicaid policy/work requirements</td>
<td>Loss of coverage</td>
<td>None noted</td>
</tr>
<tr>
<td>20. Marijuana legalization</td>
<td>Addiction Misperceptions of harm Damage to developing brains</td>
<td>Social and emotional learning School and agency collaboration Peer to peer exchanges</td>
</tr>
<tr>
<td>21. Water management/quality</td>
<td>Highest Lake Erie water level Environmental issues</td>
<td>Agency collaboration Community education</td>
</tr>
<tr>
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<tr>
<td>---</td>
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<td>---</td>
</tr>
<tr>
<td>(pollution, flooding, etc.)</td>
<td>Water management ideas</td>
<td></td>
</tr>
<tr>
<td><strong>22. Segregation of neighborhoods</strong></td>
<td>Increase in disparities</td>
<td>Redevelopment of neighborhoods</td>
</tr>
<tr>
<td><strong>23. Merger of ADAMS and Mental Health Board</strong></td>
<td>Competing priorities/political agendas</td>
<td>Additional funding opportunities</td>
</tr>
<tr>
<td></td>
<td>Potential loss of services</td>
<td>Improved coordination of services</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Potential to build new shared vision to make powerful impact</td>
</tr>
<tr>
<td><strong>24. Tax reform</strong></td>
<td>Less donations</td>
<td>More money in family’s pockets</td>
</tr>
<tr>
<td></td>
<td>Nonprofit/charities losing funding</td>
<td>Opportunity for fundraisers/events</td>
</tr>
<tr>
<td><strong>25. Job mismatch</strong></td>
<td>No focus on trade opportunities</td>
<td>Creation of meaningful jobs</td>
</tr>
<tr>
<td><strong>26. School systems overloaded</strong></td>
<td>Lack of time to address issues during school hours</td>
<td>Continued support</td>
</tr>
<tr>
<td><strong>27. Impact of weather on economy/farmers</strong></td>
<td>Farmers cannot plant crops</td>
<td>Action on stormwater management</td>
</tr>
<tr>
<td></td>
<td>Loss of work (migrant population)</td>
<td></td>
</tr>
<tr>
<td><strong>28. Lack of livable wages</strong></td>
<td>Unemployment</td>
<td>Creativity and problem solving</td>
</tr>
<tr>
<td><strong>29. Increasing child care costs</strong></td>
<td>Financial stability</td>
<td>None noted</td>
</tr>
</tbody>
</table>