INTRODUCTION ................................................................. 2
Community served by hospital ................................................................. 2
Mission statement .............................................................................. 2

EXECUTIVE SUMMARY ..................................................................... 3
Background and processes ................................................................. 3

IDENTIFYING SIGNIFICANT NEEDS ............................................... 4

IMPLEMENTATION PLAN .................................................................... 5
Prioritized significant needs .............................................................. 5
Implementation strategies ................................................................. 5
1. Cancer – breast .............................................................................. 5
2. Cancer – colorectal ....................................................................... 6
3. Cancer – lung ................................................................................. 7
4. Drugs and alcohol – substance abuse/addiction ......................... 8
5. Diabetes ....................................................................................... 10
6. Infant mortality and premature births ...................................... 12
Introduction

Mercy Health — St. Joseph Warren Hospital (SJWH) is a 219-bed, full-service hospital providing inpatient, outpatient and ancillary healthcare services. SJWH, along with local health, education, social service, non-profit and governmental agencies, participated in a Community Health Needs Assessment (CHNA) conducted for Trumbull County and surrounding areas. The detailed process, participants and results are available in the CHNA report which is available at www.mercy.com.

This CHNA Implementation Plan will address the significant community needs identified through the CHNA. The plan indicates which needs SJWH will address and how, as well as which needs SJWH won’t address and why.

Beyond the programs and strategies outlined in this plan, SJWH will address the healthcare needs of the community by continuing to operate in accordance with its Mission to extend the healing ministry of Jesus by improving the health of its communities with emphasis on the poor and under-served. This includes providing care for all individuals regardless of their ability to pay.

The strategies and tactics of this implementation plan will provide the foundation for addressing the community’s significant needs between 2017 and 2019. However, we anticipate that some of the strategies, tactics and even the needs identified will evolve over that period. Our flexible approach to addressing significant community needs will enable us to adapt to changes in collaboration with other community agencies.

COMMUNITY SERVED BY HOSPITAL

For the purposes of the CHNA, SJWH used Trumbull County, Ohio as the main service area. Patient data from 2014 indicates that 81% of patients reside in Trumbull County, specifically in Zip codes 44483, 44485, 44446, 44484, 44410, 44481, 44444 and 44430.

Based on the U.S. Census Bureau’s 2010-2014 American Community Survey, Trumbull County has 207,596 residents. Of this population: 17.3% live in poverty; 12.4% are uninsured; 88.3% of adults graduated from high school; and 9.3% are a minority.

MISSION

We extend the healing ministry of Jesus by improving the health of our communities with emphasis on people who are poor and under-served.

Mercy’s Mission and culture are expressed through the organizational core values:

**Compassion**
Our commitment to serve with mercy and tenderness

**Excellence**
Our commitment to be the best in the quality of our services and the stewardship of our resources

**Human Dignity**
Our commitment to value the diversity of all persons and to be respectful and inclusive of everyone

**Justice**
Our commitment to act with integrity, honesty and truthfulness

**Sacredness of Life**
Our commitment to reverence all life and creation

**Service**
Our commitment to respond to those in need
Executive summary

BACKGROUND AND PROCESS

The CHNA process began in January 2016 and included input from various sources:

Individual and organizational surveys were widely distributed throughout the community asking for their input on four specific questions:

• What are the top five health concerns in our community?
• What do you think most impacts the health of the people in our community?
• What are the major barriers that keep people in our community from being healthy?
• Please share anything else you want us to know about the health needs of our community.

Survey results were reviewed and results were weighted by the number of responses received for each category.

In addition, a focus group was held by St. Joseph Warren Hospital in May 2016 to obtain input from health commissioners with the Trumbull County Combined Health District and the Warren City Health District regarding community health needs. The results of the focus group were then compared with the results of the state, local and hospital survey.

The CHNA process also validated alignment with current community health needs and priorities identified by a Community Health Assessment (CHA) from the Trumbull County Combined Health District and Warren City Health District, as well as the Ohio Department of Health’s 2015-2016 State Health Improvement Plan. These data sources also were used to confirm current community resources directed at these health needs.

Finally, Kent State University College of Public Health reviewed and analyzed data related to key health findings within the counties of Mahoning, Trumbull and Columbiana. This data included: population; social and environmental risks; prevalent chronic diseases; lifestyle factors; maternal and child health; and mental health. The statistics came from the 2014 U.S. Census Bureau, Network of Care, County Health Rankings, Community Commons and Ohio Department of Health.

External sources

• Community Commons
• County Health Rankings and Roadmaps from the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute
• Kent State University College of Public Health
• National Comprehensive Cancer Network
• Network of Care from Trilogy Integrated Resources LLC
• Child and Family Health Services (CFHS) and Reproductive Health and Wellness Program (RHWP) health status profiles from the Ohio Department of Health
• 2015 Ohio Cancer Report from the Ohio Department of Health
• 2015-2016 State Health Improvement Plan from the Ohio Department of Health
• “A 15-year look at Trumbull County child deaths” from the Trumbull County Combined Health District
• Community Health Assessment (CHA) 2016 Addendum from the Trumbull County Combined Health District and Warren City Health District

List of organizations providing input

• Howland Township
• Compass Family and Community Services
• Ohio Senate
• Strong Cities/Strong Communities initiative
• Catholic Charities Diocese of Youngstown
• Trumbull County Board of Developmental Disabilities
• Cortland Senior Citizens Opportunity for Personal Endeavor (SCOPE)
• Cortland Healthcare Center (Saber Healthcare Group)
• Diabetes Partnership of the Mahoning Valley
• Community Legal Aid Services, Inc.
• Trumbull Community Action Program
• Trumbull Neighborhood Partnership
• Beatitude House
• Community Concerned Citizens, Inc.
Identifying significant needs

The CHNA relied heavily on key findings identified by the sources previously noted:

Data provided by KSU supports the following health need priorities of the community: cancer (breast, colorectal and lung); drugs and alcohol (substance abuse/addiction); diabetes; and infant mortality/premature births.

Based on the 456 individual surveys returned, the top three prioritized health concerns were cancer, drug and alcohol abuse and diabetes. The individual surveys also indicated that the top three ranked impacts on health were lack of physical activity, poverty and smoking, and the top three ranked barriers were out-of-pocket expense, can’t afford medications and lack of insurance.

Analysis of the 17 surveys completed by local community organizations identified the top three prioritized health concerns as: drug and alcohol abuse, diabetes and cancer. The top three ranked impacts on health were poverty, lack of physical activity and lack of access to healthy food, and the top three ranked barriers were lack of insurance, out-of-pocket expense and can’t afford medications.

Based on input from health commissioners with the Trumbull County Combined Health District and Warren City Health District, the impacts and barriers identified by individuals in the survey were in alignment with community health needs identified by state and local health departments. Additionally, the health commissioners identified the epidemic of heroin/opioid use, abuse and deaths as a high-priority health need in the community.

Priorities of the Ohio Department of Health’s 2015-2016 State Health Improvement Plan Addendum were: decrease infant mortality and reduce disparities in birth outcomes; prevent and reduce the burden of chronic disease; reduce and/or prevent reportable infectious diseases; implement integrated mental and physical healthcare models; confirm Ohio’s public health organizations have the resources and capacity needed to assure the health and well-being of all Ohioans; ensure a sufficient quantity of competent public health and clinical health workers to meet the needs of all Ohioans; and generate value by providing the right information in the right place at the right time to improve overall health system performance.

The Mercy Health — Youngstown Community Benefits Planning Committee (CBPC) reviewed all data collected from individual surveys, organizational surveys, input from county and city health commissioners and county, city and state health improvement plans. The committee then facilitated the prioritization methodology. The top six health needs identified by the CBPC and key stakeholders (cancer, diabetes, drugs/alcohol and substance abuse, infant mortality, obesity and mental health) were discussed using a two-step process: (1) Committee members rated each health need based on the size of the population, the severity of the health need, the ability to evaluate outcomes and the current community capacity to address the health need; (2) Members evaluated the hospital’s capacity to address the need and the impact on the hospital’s Mission.

After full data review with key stakeholders and identification of the priorities, the hospital president and strategy development committee took into consideration the hospital’s mission, capacity and strategic plan in order to determine priority health needs for the community the hospital serves.
Implementation Plan

St. Joseph Warren Hospital is working with other county agencies to develop a county-wide community health improvement plan (CHIP). While that plan is still being finalized, SJWH is committed to addressing the health needs of the community through the strategies and tactics described in this implementation plan, which will be in alignment with the overall CHIP.

PRIORITIZED SIGNIFICANT COMMUNITY HEALTH NEEDS

The table below lists the significant community needs that were identified through the CHNA and specifies which needs SJWH will address.

<table>
<thead>
<tr>
<th>Prioritized significant community health need</th>
<th>Addressed by hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast, colorectal and lung cancer</td>
<td>Yes</td>
</tr>
<tr>
<td>Drugs and alcohol – substance abuse/addiction</td>
<td>Yes</td>
</tr>
<tr>
<td>Diabetes</td>
<td>Yes</td>
</tr>
<tr>
<td>Infant mortality and premature births</td>
<td>Yes</td>
</tr>
</tbody>
</table>

IMPLEMENTATION STRATEGIES TO ADDRESS SIGNIFICANT COMMUNITY HEALTH NEEDS

SJWH provides significant charity care and community benefits. The defined strategies include increasing services to the under-served, including people who are poor, and taking advantage of grant opportunities to provide services.

BREAST CANCER

Description
As detailed in St. Joseph Warren’s CHNA report: Ohio ranks fourth in the nation in breast cancer mortality, with a rate of 24.8 per 100,000 individuals. Northeast Ohio’s mortality rate matches the state rate of 24.8, but both the state and local rates are higher than the national average of 22.6.

African-American women remain more likely to die from breast cancer, even though they are less likely to be diagnosed with the disease. High-risk groups include women who are over the age of 40, non-white and/or ages 18-64 without insurance. Pertinent factors in identifying high-risk communities include those high-risk female populations, the high percentage of females age 40 and older who have not had a mammogram in the past year and the high female breast cancer incidence rate.

Based on market demand forecasts for outpatient services, Mercy Health projects the number of breast cancer diagnoses in Mahoning, Trumbull and Columbiana counties will increase an average of 4% over the next five years.

Goal
Optimize outcomes and reduce the mortality rate of breast cancer in the Mahoning Valley

Expected impact
Improve the early detection and prevention of breast cancer in women in the Mahoning Valley
Targeted populations
All women at risk of developing breast cancer in the Mahoning Valley, with special emphasis on at-risk groups, especially African-American and under-served women

Strategies
- Increase access to quality breast care for those residing in areas where mammography services are limited, by providing convenient access that promotes screening, early detection and intervention
- Ensure community outreach to African-American and under-served women
- Use an innovative care delivery model to identify breast cancer at the earliest stage possible
- Ensure women 50-74 years of age who visit a Mercy Health primary care physician will have appropriate screening for breast cancer

Strategic measures
- Utilize the Joanie Abdu Mobile Mammography Van, the Joanie Abdu Comprehensive Breast Care Center and radiology departments at Mercy Health — St. Joseph Warren Hospital and Mercy Health — St. Elizabeth Boardman Hospital to do the following:
  - Increase the annual number of screening mammograms provided by 5%
  - Achieve less than a 15% call-back rate (patients who require follow-up imaging due to suspicious or inconclusive screening results; the benchmark established by the National Comprehensive Cancer Network is 5-15%)
  - Increase the number of breast cancers detected on a quarterly basis
  - Identify and report the staging of identified breast cancers on a semi-annual basis, and identify the greatest percentage of diagnoses at stage 1
- Use payer mix and Zip code analysis to identify and report economic and geographic patient utilization trends, on a semi-annual basis
- Increase screening mammography among women ages 50-74 who visit a Mercy Health primary care physician (with the goal of screening 80% of this population)

Community collaborations and resources available
Existing community collaborations, healthcare facilities and other resources available to meet the prioritized need include:
- Joanie Abdu Mobile Mammography Van, the Joanie Abdu Comprehensive Breast Care Center and radiology departments at St. Joseph Warren Hospital and St. Elizabeth Boardman Hospital
- Lymphedema rehabilitation at St. Elizabeth Boardman Wellness Center
- JACBCC’s Joanie’s Sisters support group
- American Cancer Society
- Reaching Out breast cancer support group at Trinity Medical Center East
- East Liverpool Breast Cancer Support Group at Dawson Family Center
- Caregivers support program at Yellow Brick Place
- Caregivers support group at St. Mary’s Church
- OCCHA breast cancer support group at the Hispanic Community Center
- Cancer support group at St. Michael Church
- Grief support services at Hospice of the Valley
- Lymphedema support at Austintown Therapy Center

COLORECTAL CANCER

Description
As detailed in St. Joseph Warren’s CHNA report:
Colorectal cancer is the third leading cause of death in men and women in the United States and the second leading cause for both sexes combined. In the tri-county area, the average incidence rate is 46.8, compared to 43.1 in Ohio and 42.4 in the nation. Around one in three adults between the ages of 50 and 75 are not getting screened as recommended. Through screening, some colorectal cancers can be prevented through the detection and removal of precancerous polyps, while others can be detected in the early stages when treatment is more likely to be successful. Groups less likely to get tested are men ages 50-64, Hispanics, people living in rural areas and individuals with lower education and income.
Goal
Optimize outcomes and reduce the mortality rate of colorectal cancer in the Mahoning Valley, focusing on people who are uninsured, under-served and/or over the age of 50

Expected impact
Improve early detection and prevention of colorectal cancer through an increase in colorectal screenings in the target populations

Targeted populations
Anyone in the Mahoning Valley at risk of developing colorectal cancer, with special emphasis on at-risk groups, including those who are uninsured, under-served and/or over the age of 50

Strategies
• Increase awareness for early detection of colorectal cancer, and the importance of screening for adults ages 50-75 (especially those with a family history of colorectal cancer)
• Provide educational programs to the public in accordance with a national campaign initiated by the National Colorectal Cancer Roundtable and the American Cancer Society (with the goal of increasing screening rates to 80% by 2018, among adults age 50 and older)
• Distribute OC-Light colorectal screening kits to patients in Mercy Health Physicians offices
• Identify the number of new colon cancers diagnosed
• Ensure Mercy primary care physicians offer appropriate colorectal cancer screening to patients ages 50-75

Strategic measures
• Number of adults age 50 and older who receive screening as a result of educational sessions
• Number of OC-Light kits distributed to patients in Mercy Health Physicians offices
• Number of OC-Light kits returned
• Number of new colon cancers found, as tracked through the Mercy Health tumor registry
• Percentage of Mercy primary care patients, ages 50-75, who receive appropriate colorectal cancer screening

Community collaborations and resources available
Existing community collaborations, healthcare facilities and other resources available to meet the prioritized need include:
• Mercy Health Physicians
• American Cancer Society
• YMCA
• Kent State University
• Youngstown State University
• Youngstown Office on Minority Health
• Senior Citizens Opportunity for Personal Endeavor (SCOPE)
• Yellow Brick Place
• A Silver Lining Foundation
• OCCHA
• Eastern Gateway Community College

LUNG CANCER

Description
As detailed in St. Joseph Warren’s CHNA report:
Lung cancer is the second most common cancer in both men and women, and the leading cancer killer in men and women in every ethnic group.

Overall, the chance that a man will develop lung cancer is about 1 in 14; for women, the risk is 1 in 17. In 2016, the American Cancer Society estimates there will be 224,390 new cases of lung cancer and 158,080 deaths from lung cancer in the U.S. Tobacco use remains the single most preventable cause of death in the United States. Many lung cancers are undiagnosed until later stages of the disease. According to 2012-2015 data from the Mercy Health – Youngstown cancer registry, 69% of Mercy Health — Youngstown lung cancer cases were diagnosed at stage 3 or 4. An estimated 20,738 patients within the tri-county area are eligible for screening, yet less than 1% actually get screened.

Goal
Optimize outcomes and reduce the mortality rate of lung cancer in the Mahoning Valley
Expected impact
Detect lung cancer in earlier stages in order to increase survival rate and improve quality of life

Targeted populations
Everyone in the Mahoning Valley who is at risk of developing lung cancer, with a special emphasis on smokers

Strategies
• Utilize the lung nodule patient navigator to improve lung cancer screening in the community, through Mercy Health’s Lung Screening Program and Incidental Pulmonary Nodule Program
• Detect lung cancer at earlier stages and decrease percentage of stage 3 and 4 diagnoses (per data from Mercy Health cancer registry)
• Establish the lung nodule clinic, which currently is in business development
• Increase awareness of the need for lung cancer screening

Strategic measures
• Number of patients screened through Mercy’s CT Lung Screening Program
• Number of patients referred and registered in the Incidental Pulmonary Nodule Program
• Percentage of Mercy Health — Youngstown lung cancer cases diagnosed at stage 3 and 4
• Operational date of the lung nodule clinic
• Number of educational programs promoting early detection through lung cancer screening

Community collaborations and resources available
Existing community collaborations, healthcare facilities and other resources available to meet the prioritized need include:
• Mercy Health’s Lung Screening and Incidental Pulmonary Nodule programs
• American Cancer Society
• Yellow Brick Place
• Lung Cancer Alliance’s Shine a Light on Lung Cancer events

DRUGS AND ALCOHOL – SUBSTANCE ABUSE/ADDICTION

Description
As detailed in St. Joseph Warren’s CHNA report: Accidental drug overdose deaths are dramatically on the rise, related to heroin and prescription opiate pain medications. The onset of use of these drugs has even reached adolescents as young as age 12 and 13. Deaths due to accidental drug overdose have surpassed deaths related to motor vehicle accidents. In 2007-2012, Trumbull County had the sixth highest per-capita death rate for accidental overdoses in Ohio. 2011 state statistics also show Trumbull County has one of the highest rates of pain-medication prescriptions, with 91.5 doses of opiates per person, compared to the state average of 66.7. Along with these barriers to access, medical detox continues to be unaffordable for many people as most insurance policies do not cover the entire cost of treatment and payment is required before receiving services. Based on these factors, substance abuse has been identified as a priority health risk.

Goal
Reduce the incidences of alcohol- and opiate-related deaths in the Mahoning Valley
Improve access and appropriate treatment for people with substance abuse disorders

Expected impact
Reduce incidences of alcohol- and opiate-related overdoses and deaths
Improve access and appropriate treatment for people with substance abuse disorders

Targeted populations
Adults in the Mahoning Valley, specifically poor and under-served populations who are disproportionally at risk for overdose and unintentional death

Strategies
• Increase participation in Project DAWN (Deaths Avoided With Naloxone), a program from the Ohio Department of Health and Ohio Mental Health and Addiction Services (OMHAS) that educates affected individuals, their families and friends about overdose prevention and provides naloxone kits to participants
• Provide physicians and the public with prevention resource kits that include information about the:
  - Start Talking! program, sponsored by OMHAS
  - Generation RX initiative from the College of Pharmacy at The Ohio State University and the Cardinal Health Foundation
  - Health Resource Toolkit for Addressing Opioid Abuse, from the Governor’s Cabinet Opiate Action Team
  - OMHAS toll-free consumer and family bridge line (877-275-6364)
• Increase access to inpatient medical detoxification through opening an inpatient medical detoxification program at St. Elizabeth Youngstown Hospital
• Improve access to substance abuse services in Mahoning County
• Provide substance abuse services and inpatient medical detox services for adults, regardless of their ability to pay
• Train and educate healthcare students in providing Screening, Brief Intervention and Referral to Treatment (SBIRT)

Strategic measures
• Number of participants and number of kits distributed via the Project DAWN program
• Number of prevention resource kits distributed
• Utilization of inpatient medical detoxification program at St. Elizabeth Youngstown Hospital:
  - Number of patients screened
  - Number of patients requiring medical detoxification
  - Number of patients receiving appropriate treatment for medical detoxification (admitted to St. Elizabeth Youngstown Hospital or referred to a collaborating facility)
• Expansion of substance abuse services at St. Elizabeth Youngstown Hospital:
  - Number of participants receiving substance abuse services at the facility
• Percentage of self-pay individuals utilizing services for substance-abuse treatment and inpatient medical detoxification
• Number of healthcare students, instructors and community agencies trained in SBIRT
• Number of instructors provided with SBIRT curriculum to ensure program continuity

Community collaborations and resources available
Existing community collaborations, healthcare facilities and other resources available to meet the prioritized need include:
• Mahoning County District Board of Health
• Trumbull County Combined Health District
• Youngstown City Health District
• Warren City Health District
• Columbiana County General Health District
• Alliance For Substance Abuse Prevention (ASAP), led by the Trumbull County Mental Health and Recovery Board
• ASAP Opiate Task Force
• Local sheriff’s departments
• Trumbull County Mental Health and Recovery Board
• Mahoning County Mental Health and Recovery Board
• Columbiana County Mental Health and Recovery Services Board
• Help Hotline Crisis Center, Inc.
• OCCHA
• Compass Family and Community Services
• Alta Behavioral Healthcare (formerly Turning Point Counseling Center)
• Trumbull County Coroner
• Mahoning County Coroner
• Columbiana County Coroner
• Trumbull-Ashtabula Group (TAG) Law Enforcement Task Force
• National Physicians Alliance
• The Centers for Disease Control and Prevention’s Enhanced State Surveillance of Opioid-Involved Morbidity and Mortality
• Meridian HealthCare
• Neil Kennedy Recovery Center
• Ohio Board Of Pharmacy’s Ohio Automated Rx Reporting System (OARRS)
• Ohio chapter of the American Psychiatric Nurses Association
• Ohio Department of Health
• OMHAS
• Peer recovery support systems
• Alcoholics Anonymous/Narcotics Anonymous/Heroin Anonymous
• Braking Point Recovery Center
• First Step Recovery
• New Vision services at University Hospitals Geauga Medical Center
• Windsor Laurelwood Center for Behavioral Medicine
• Cleveland Clinic
• Summa Health System — St. Thomas
• Andover United Methodist Church
• Glenbeigh
• Addiction Counseling and Treatment (ACT) Center for Recovery
• ONE Health Ohio
• Coleman Professional Services

DIABETES

Description
As detailed in St. Joseph Warren’s CHNA report: Diabetes mellitus (type 2 diabetes) is the seventh leading cause of death in Ohio and the United States. Diabetes was the primary cause of death for 3,600 Ohioans and was a contributing cause of many more deaths. In addition, it is estimated that more than 8 million Americans have type 2 diabetes but do not know it and another 86 million are at risk for developing it (known as prediabetes). Type 2 diabetes accounts for the vast majority (90-95%) of diabetes cases in the United States, with type 1 diabetes accounting for about 5% of cases. Risk of type 2 diabetes is associated with both genetic and lifestyle factors including obesity, poor diet, lack of physical activity and tobacco use. Uncontrolled, diabetes can lead to damage of the eyes, kidneys, blood vessels and nerves, and often complicates many other diseases.

Successful control of blood sugar throughout one’s life is the cornerstone of diabetes care. Good nutrition, blood sugar monitoring, medications and proper healthcare screenings are critical for success, and regular physical activity and tobacco cessation greatly improve both diabetes control and quality of life.

Goal
Reduce incidences and complications of diabetes in Mahoning County and the surrounding area

Expected impact
Reduce the prevalence of diabetes in Mahoning County and the surrounding area

Targeted populations
Anyone at risk for diabetes and related complications, with an emphasis on at-risk populations such as minorities and the uninsured

Strategies
• Promote assessment, treatment and teaching of diabetes self-management by increasing the number of physician referrals for diabetes care
• Improve diabetes control by promoting participation and completion of Mercy diabetes education classes
• Promote individualized diabetes management counseling, including but not limited to meter instruction, insulin injection and nutrition education
• Ensure successful outcomes of women with gestational diabetes who participate in the Pathway to Success program
• Provide those in need with glucose meter strips for blood sugar management
• Promote lifestyle strategies and address concerns through community diabetes support group
• Offer Mercy Health’s nutrition/exercise program (a collaboration between the cardiac rehabilitation and diabetes education departments) to those who are underinsured
• Provide under-served and at-risk populations with access to healthy foods at farmers markets, through the Fruit and Vegetable Prescription Program (modeled after the non-profit Wholesome Wave program)
• Provide fitness activities to under-served communities through the Stepping Out program
• Provide excellent diabetes care for Mercy Health Physicians patients, as evidenced by improved HgbA1c levels
• Provide diabetes medication (oral and insulin) assistance through the prescription-assistance program
• Improve diabetes management through the diabetes management team program at St. Elizabeth Youngstown’s Ambulatory Care Clinic
• Provide diabetes education and screening at community events, with a focus on the under-served

**Strategic measures**

• Number of physician referrals for diabetes care will increase 5% or more

• Completion rate of participants in diabetes self-management classes will be 80% or higher

• 70% of patients completing diabetes education classes will reduce their HgbA1c level, as compared to their pre-class level

• Number of patients receiving individualized diabetes management counseling

• 90% of mothers who complete the gestational Pathway to Success program will give birth to babies less than 9 pounds, with no congenital anomalies

• Number of test strips distributed to patients in need through grant-funded program

• Number of persons attending the diabetes support group

• Enroll 20 or more participants in Mercy Health’s nutrition/exercise program

• Percent of Fruit and Vegetable Prescription Program vouchers utilized

• Attendance at Stepping Out activities

• A HgbA1c level of 9% or less among 80% of diabetic patients, ages 18 to 75, who visit Mercy Health primary care physicians

• Number of people served and number of diabetes medications provided through the prescription-assistance program

• Number of participants in the diabetes management team program

• Number of diabetes screenings provided in the community through:
  - Neighborhood Health Watch
  - Hispanic Health Program
  - St. Joe’s at the Mall
  - Women’s Heart Day
  - Community health education programs

**Community collaborations and resources available**

Existing community collaborations, healthcare facilities and other resources available to meet the prioritized need include:

• Mercy Health Physicians

• Diabetes Partnership of Mahoning Valley

• Well-Being Collaborative of Ohio

• Lake to River Food Cooperative

• Trumbull Neighborhood Partnership

• Youngstown Neighborhood Development Corporation

• Amedia Plaza Apartments

• Gentleman’s Quarter Barber Shop

• YWCA of Youngstown

• YMCA’s Diabetes Prevention Program

• Ankle and Foot Care Centers

• Austintown Podiatry Associates, Inc.

• Senior Center of Mahoning County

• Trinity United Methodist Church

• SCOPE

• Youngstown Metropolitan Housing Authority

• Trumbull Metropolitan Housing Authority

• United Methodist Community Center

• Warren Family Mission

• Salvation Army

• Tequila Jalisco restaurant

• St. Paul Parish’s Centro San Pablo

• El Vallarta Mexican Restaurant and Cantina

• OCCHA

• Associated Neighborhood Center (ANC)

• McGuffey Centre

• Mill Creek Community Center

• American Diabetes Association

• American Association of Diabetes Educators

• Eli Lilly and Company

• LifeScan, Inc.

• Sanofi

• Abbott

• Merck

• Novo Nordisk

• Roche

• Becton, Dickinson and Company
INFANT MORTALITY/PREMATURE BIRTHS

Description
As detailed in St. Joseph Warren’s CHNA report: Ohio’s infant mortality rate is one of the worst in the nation. Of particular concern are the disparities in birth outcomes, with African American babies being twice as likely to die in the first year of life as Caucasian babies. Ohio’s black infant mortality rate ranks among the worst in the nation. The three leading causes of infant death are: prematurity due to preterm births; birth defects; and sleep-related deaths. Risk factors such as poverty, living in an under-resourced neighborhood and smoking increase the risk of all three leading causes of infant death. The Ohio Department of Health and CityMatCH partnered to form the Ohio Institute for Equity in Birth Outcomes (OEI). In Trumbull County, the task force called the Infant mortality Priority Group is addressing this need and in Mahoning County the M/Y (Mahoning/Youngstown) Baby’s 1st task force is taking the lead.

Goal
Reduce infant mortality in the Mahoning Valley

Expected impact
Reduce infant mortality rates in the Mahoning Valley and reduce incidences of premature and low-birth-weight infants

Targeted populations
Pregnant women in the Mahoning Valley, with a special emphasis on women who are African American, have a low income or less than a high school education

Strategies
- Reduce incidence of preterm births and low-birth-weight babies by:
  - Providing mentoring and support to pregnant women through Mercy Health’s Resource Mothers program
  - Providing an evidence-based group model of care for pregnant mothers through the Mercy Health Women’s Care Center’s CenteringPregnancy program
  - Increasing the use of progesterone therapy for mothers who have had preterm deliveries before 36 weeks pregnant

- Promote breastfeeding by:
  - Providing inpatient breastfeeding support and education
  - Providing electric breast pumps
  - Working with the Trumbull County Women, Infants and Children (WIC) program
  - Providing post-discharge lactation support
  - Providing breastfeeding education through CenteringPregnancy

- Ensure safe-sleep practices by:
  - Providing safe-sleep education and HALO SleepSacks to all mothers prior to discharge
  - Providing pack-n-plays to mothers who do not have a safe place for infant to sleep
  - Providing public/community education

- Consult neonatologists early to identify neonates at risk for neonatal abstinence syndrome (NAS), using the Finnegan scoring tool, and refer to Akron Children’s Hospital NICU for treatment

- Participate and collaborate in M/Y Baby’s 1st Collaborative and the Infant Mortality Priority Group

Strategic measures
- Number of mothers who attend Resource Mothers support group activities
- Incidence of preterm births among:
  - Resource Mothers clients
  - CenteringPregnancy patients
  - Maternity patients at St. Joseph Warren Hospital and St. Elizabeth Boardman Hospital
• Incidence of low-birth-weight babies among:
  - Resource Mothers clients
  - CenteringPregnancy® patients
  - Maternity patients at St. Joseph Warren Hospital and St. Elizabeth Boardman Hospital
• Number of CenteringPregnancy® sessions attended by participants
• Number of patients who receive progesterone therapy via maternal-fetal medicine
• Percentage of mothers who exclusively breastfeed at discharge
• Number of electric breast pumps provided to mothers who do not have the means to obtain electric breast pumps
• Breastfeeding rates of Trumbull County WIC clients
• Number of lactation consultations
• Number of breastfeeding support group attendants
• Number of CenteringPregnancy® participants and their rates of breastfeeding
• Number of mothers receiving safe-sleep education and HALO SleepSacks at discharge
• Number of pack-n-plays provided for mothers who do not have a safe place for infant to sleep
• Number of safe-sleep educational activities provided through the Resource Mothers program and maternity departments at St. Joseph Warren Hospital and St. Elizabeth Boardman Hospital
• Number of newborns referred and treated for NAS at Akron Children’s Hospital
• Participation in M/Y Baby’s 1st task force and the Infant Mortality Priority Group

**Community collaborations and resources available**
Existing community collaborations, healthcare facilities and other resources available to meet the prioritized need include:
• Mercy Health maternity services
• Trumbull County Combined Health District
• Mahoning County District Board of Health
• Warren City Health District
• Akron Children’s Hospital Mahoning Valley
• March of Dimes
• Trumbull County WIC
• Mahoning County WIC
• UnitedHealthcare
• CareSource
• Ohio Department of Health’s Help Me Grow program
• Planned Parenthood’s Healthy Moms, Healthy Babies program
• Mahoning County District Board of Health’s Pathways HUB
• Trumbull Metropolitan Housing Authority
• Youngstown Metropolitan Housing Authority
• Youngstown Office of Minority Health
• ONE Health Ohio
• Ohio Department of Health
• Youngstown City Health District
• Mahoning County Educational Service Center
• ValleyCare Health System of Ohio (Trumbull Memorial Hospital)
• Safe Kids Mahoning Valley
• Help Hotline Crisis Center, Inc.
• Family and Children’s First Councils of Trumbull and Mahoning Counties
• Beatitude House
• Catholic Charities Diocese of Youngstown