

# 2016 Community Health Needs Assessment

MERCY HEALTH — ST. JOSEPH WARREN HOSPITAL, WARREN, OHIO



Mercy Health, formerly Catholic Health Partners, has been committed to the communities it serves for more than 150 years. This long-standing commitment has evolved intentionally, based on our communities' most pressing health needs.

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

The following document is a detailed CHNA for Mercy Health — St. Joseph Warren Hospital. St. Joseph Warren Hospital is dedicated to continuing the healing ministry of Jesus Christ. As part of the Mercy Health system, St. Joseph Warren Hospital has been steadfast in its mission of caring for the poor, the elderly and the vulnerable members of the community, and to improving the health of the many communities it serves.

Mercy Health has responded to community health needs as part of a five-year strategic plan that

concludes in 2018. In recent years, Mercy Health has invested in building and renovating hospitals and ambulatory facilities to serve patients and communities in Ohio and Kentucky. Our ministry continues to invest in our CarePATH electronic health record to ensure seamless and integrated care, no matter the provider or the setting. We also operate health and fitness centers, hospice facilities, outpatient clinics and senior living facilities ... all to improve the health of our communities.

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

Mercy Health — St. Joseph Warren Hospital strives to meet the health needs of its community. Please read the document's introduction below to better understand the health needs that have been identified.

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

**Through our CHNA, Mercy Health has identified the greatest needs among each of our hospital's communities. This enables us to ensure our resources are directed appropriately toward outreach, prevention, education and wellness opportunities where the greatest impact can be realized.**

# Table of contents

<b>INTRODUCTION</b> .....	3
Community served by hospital .....	3
Information and data considered in identifying potential need .....	3
<b>PROCESS AND METHODS</b> .....	4
<b>Process for Gathering and Analyzing Data/Information</b> .....	4
1. External sources .....	5
2. Collaborating partners .....	5
<b>Community Input</b> .....	5
1. Use of community input .....	5
2. Organizations providing input .....	6
<b>EXECUTIVE SUMMARY</b> .....	8
<b>Significant health needs</b> .....	8
1. Cancer .....	8
2. Substance abuse .....	8
3. Diabetes .....	9
4. Infant mortality and premature births .....	9
<b>Prioritized health needs</b> .....	10
1. Cancer .....	10
2. Substance abuse .....	11
3. Diabetes .....	11
4. Infant mortality and premature births .....	11
<b>Resources available</b> .....	12
<b>PROGRESS ON 2013 CHNA</b> .....	13

# Introduction

## COMMUNITY SERVED BY HOSPITAL

T.R. §1.501(r)-3(b)(1)(i) and (3)

St. Joseph Warren Hospital (SJWH) is a community facility primarily serving residents of Trumbull County. Patient data from 2014 indicates that 81% of total volume at SJWH were people residing in Trumbull County, specifically in Zip codes 44483, 44485, 44446, 44484, 44410, 44481, 44444 and 44430.

SJWH aims to serve our patients and each other in ways that reflect its core values of Compassion, Excellence, Human Dignity, Justice, Sacredness of Life and Service. Our Mission is to extend the healing ministry of Jesus by

improving the health of our communities with emphasis on people who are poor and under-served.

Each year SJWH provides millions of dollars in community benefits. The real value of this contribution lies not in dollars, but in the commitment of the staff members, physicians, volunteers, board members and other community leaders who work on behalf of Mercy Health — St. Joseph Warren Hospital ... the people who bring the hospital to life.

## INFORMATION AND DATA CONSIDERED IN IDENTIFYING POTENTIAL NEED

T.R. §1.501(r)-3(b)(1)(ii) and (5)

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

Public health departments (T.R. §1.501(r)-3(b)(5)(i)(a))		Date of data/information
Trumbull County Combined Health District		2/12/16; 5/17/16
Warren City Health District		5/17/16
At-risk populations (T.R. §1.501(r)-3(b)(5)(i)(b))		Date of data/information
Beatitude House		2/23/16
Catholic Charities Diocese of Youngstown		2/23/16
Community Concerned Citizens, Inc.		2/11/16
Compass Family and Community Services		2/17/16
Cortland Senior Citizens Opportunity for Personal Endeavor (SCOPE)		2/23/16
Cortland Healthcare Center (Saber Healthcare Group)		2/19/16
Diabetes Partnership of the Mahoning Valley		2/22/16
Hubbard Exempted Village School District		2/22/16
Howland SCOPE		3/1/16
Howland Township		2/17/16
Lakeview Local Schools		2/25/16
Niles SCOPE		2/19/16
SCOPE, Inc. of Trumbull County		2/15/16
Someplace Safe and The Solace Center		2/17/16
Trumbull Community Action Program		2/10/16
Trumbull Neighborhood Partnership		2/11/16
Trumbull County Board of Developmental Disabilities		2/17/16
Strong Cities, Strong Communities initiative		2/17/16
Additional sources of input (T.R. §1.501(r)-3(b)(5)(ii))		Date of data/information
Kent State University College of Public Health		Not available

# Process and methods

## PROCESS FOR GATHERING AND ANALYZING DATA/INFORMATION

T.R. §1.501(r)-3(b)(6)(ii)

### Process and methods to conduct the community health needs assessment:

T.R. §1.501(r)-3(b)(6)(ii)

Mercy Health — Youngstown conducted its community health needs assessment between January and June 2016 by obtaining data in the following methods:

The Community Benefits Planning Committee (CBPC) distributed surveys to community leaders from public health, healthcare, business, education, non-profit, philanthropy and governmental organizations. The committee then identified health needs by reviewing the surveys as well as input from local city and county health commissioners. To verify the needs, goals and strategic alignment, this information was reviewed with hospital presidents, Mercy Health leaders, key stakeholders and service line leaders in behavioral health, diabetes education, cancer care and drug, alcohol and substance abuse.

The surveys were distributed and collected between February and March 2016. Individual surveys were distributed and collected through SurveyMonkey, community outreach groups, senior centers, primary care medical and physician practices, churches and community centers. Organizational surveys were distributed and collected through SurveyMonkey, hand delivery to community organizations and emails to community task forces, coalitions and various community service entities.

Individual and organizational surveys focused on four specific questions:

1. What are the top five health concerns in our community?
2. What do you think most impacts the health of the people in our community?

3. What are the major barriers that keep people in our community from being healthy?
4. Please share anything else you want us to know about the health needs of our community.

In order to confirm that the individual survey responses were representative of the race and ethnicity of the community, the percentage of survey respondents from each race/ethnicity was compared to the overall percentage of the Trumbull County population per U.S. Census data. The hospital felt comfortable that the responses received were representative of the entire community.

All results received from the individual and organizational surveys were input into an Access database. Results were then categorized according to Zip code. Results for each question were weighted by the number of responses received for each category. Written comments were thematically categorized and included in the analysis of results.

Mercy Health — Youngstown held a focus group in May 2016 to obtain input from local health commissioners from Trumbull County Combined Health District and Warren City Health District. The focus group reviewed local health districts' community health needs and strategies, the hospital's survey results and the state of Ohio's current community health priorities. They also sought input from local health commissioners on other pressing or current health needs in the community. 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 the current community health needs identified by county and state commissioners and health departments. This was done by carefully reviewing the community health assessment and community health improvement plan from the Trumbull County Combined Health District and Warren City Health District, as well as the State Health Improvement Plan from the Ohio Department of Health. These data sources also were used to confirm current community resources directed at these health needs.

Mercy Health — Youngstown also reviewed community health data provided by Kent State University (KSU) College of Public Health. KSU provided 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 data was accumulated 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

### Collaborating partners

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

- Kent State University College of Public Health

## Community input

T.R. §1.501(r)-3(b)(6)(iii)

No written comments were received on the previously completed CHNA.

The CHNA relied heavily on key health needs findings obtained through: the KSU College of Public Health; individual and organizational surveys; input from health commissioners; and health improvement priorities identified by the Trumbull County Combined Health District and Warren City Health District’s 2016 community health assessment (CHA) and Ohio Department of Health’s 2015-2016 State Health Improvement Plan.

Key findings from the KSU data and statistics support community health need priorities of: cancer (breast, colorectal and lung), drug 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 31 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 lack of physical activity, poverty and lack of access to healthy food, and the top three barriers were lack of insurance, out-of-pocket expense and can’t afford medications.

Based on input from health commissioners from the Trumbull County Combined Health District and the Warren City Health District, the impacts and barriers identified in the surveys were in alignment with community health needs among 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 Trumbull County Combined Health District and Warren City Health District's 2016 CHA were: injury and violence, integration of physical and behavioral health, infant mortality and chronic disease.

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 health care models; confirm Ohio's public health organizations have the resources and capacity they need 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.

## Organizations providing input

Organization providing input	Nature and extent of input	Medically underserved, low-income or minority populations represented by organization
Beatitude House	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Low-income and homeless
Catholic Charities Diocese of Youngstown	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Low-income and under-served
Community Concerned Citizens, Inc.	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	African American, low-income and under-served
Community Legal Aid Services, Inc.	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Low-income, minority and immigrant population
Compass Family and Community Services	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Behavioral health patients
Cortland Healthcare Center (Saber Healthcare Group)	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Elderly
Cortland SCOPE	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Elderly
Diabetes Partnership for the Mahoning Valley	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Medically under-served

## Organizations providing input ...continued

Organization providing input	Nature and extent of input	Medically underserved, low-income or minority populations represented by organization
Howland Township	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Community at-large
Ohio Senate	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Community at-large
Trumbull Community Action Program	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Low-income
Trumbull County Board of Developmental Disabilities	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Persons with disabilities
Trumbull Neighborhood Partnership	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Low-income
Strong Cities, Strong Communities initiative	Participated in organization survey to identify and prioritize health needs, impacts of health and barriers	Low-income

# Executive summary

## Significant health needs

T.R. §1.501(r)-3(b)(4)

### CANCER

#### Capacity and adequacy of service levels

- 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. Trumbull has a higher than average incidence of lung cancer (82.9 per 100,000 individuals) than the nation (58.7) and state (71.7).
- The leading types of cancer and cancer mortality in Trumbull County in 2008-2012 were lung and bronchus, representing 17.8% of all cancers and 70.6% of cancer deaths.
- 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. The incidence of colorectal cancer is 48 in Trumbull County, compared to 43.1 in Ohio and 42.4 in the U.S.
- 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. The incidence of breast cancer in Trumbull County is 120 per 100,000 individuals.
- Tobacco use remains the single most preventable cause of death in the United States.
- Barriers exist for breast, colon and lung cancer screening, especially in minority and under-served populations.

#### Current service providers

Mercy Health's Regional Tobacco Treatment Center serves people from all counties regardless of ability to pay. In addition, all Mercy Health hospitals offer cancer services. Other service providers include the Joanie Abdu Mobile Mammography Van, Surgical Hospital at Southwoods, Southwoods Imaging Center, ValleyCare

Health System of Ohio (Trumbull Memorial Hospital), American Cancer Society, Trumbull County Combined Health District and Warren City Health District. Community organizations as well as primary care, oncology, pulmonology, urology, surgery, radiology and gastroenterology physicians and specialists also offer education, screening and cancer-related services.

### SUBSTANCE ABUSE

#### Capacity and adequacy of service levels

- In 2007-2012, Trumbull County had the sixth highest per-capita death rate for accidental overdoses in Ohio. Trumbull County had 278 accidental deaths, at 22.1 deaths per 100,000 people.
- 2011 state statistics 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.
- Adults excessively using alcohol are reported at 19% for Trumbull County. The number of adults abusing prescription drugs is 4%.
- In the past, only one inpatient detox facility, Neil Kennedy Recovery Center in Youngstown, was available to treat alcohol dependency. Although the Mercy Health Behavioral Health Institute expanded, there is still a critical need to provide adequate services to patients needing behavioral health services, specifically substance abuse patients requiring medical detoxification.
- There is also a need for practitioners and counselors in the specialties of behavioral/mental health and drug and alcohol treatment.

#### Current service providers

St. Joseph Warren Hospital offers the New Start Treatment Center. In addition, Mercy Health's department of psychiatry and behavioral health provides inpatient services at St. Elizabeth Youngstown Hospital. Other service providers include Alta Behavioral Healthcare (formerly Turning Point Counseling Center), Belmont Pines Hospital, Trumbull County Mental Health and Recovery Board, First Step Recovery, Braking Point Recovery Center, Compass Family and Community Services and Project DAWN (Deaths Avoided With Naloxone). Medication-assisted treatment (MAT) is available at Meridian HealthCare, Neil Kennedy Recovery

Centers and multiple private physicians in the community, adequately meeting this need in healthcare.

## DIABETES

### Capacity and adequacy of service levels

- Diabetes mellitus 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.
- 10.7% of adults in Trumbull County have diabetes.
- Diagnosis and treatment services are available at primary care offices/medical homes.
- Affordability of insulin is named as a barrier to adherence.
- There is continued need for diabetes education classes in various locations.

### Current service providers

Mercy Health physicians and diabetes education department offer education and classes. Mercy Health also offers a prescription assistance program and a gestational program. Other service providers include YWCA, Trumbull County Combined Health District, Warren City Health District, the Ohio State University Extension Trumbull County office, Akron Children's Hospital Mahoning Valley and Diabetes Partnership of the Mahoning Valley. Various primary care and endocrinologist practices and community organizations also offer diabetes management and education.

## INFANT MORTALITY AND PREMATURE BIRTHS

### Capacity and adequacy of service levels

- Ohio's infant mortality rate is one of the worst in the nation.
- Trumbull County's rate of infant mortality rate is 8.9 per 100,000 individuals, compared to the state infant mortality rate of 7.7.
- African-American babies are 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 report titled "A 15-Year Look at Trumbull County Child Deaths" from the Trumbull County Combined Health District indicated that minority children are more than twice as likely to die as white children. The infant mortality rate of black children in 2015 was 11.2 (11 deaths) and the rate for white children was 2.4 (5 deaths). Sleep-related deaths accounted for 16% of all child deaths, and prematurity accounted for 31% of all deaths in the category identified as natural causes.
- Currently we have capacity in the community, but health disparities exist with infant mortality in African-American infants at a much higher rate than Caucasian infants. The Health Status Profile report, updated in March 2015, indicates a need for continued focus on improving infant mortality and reducing incidences of low birth weight and preterm births.

### Current service providers

St. Elizabeth Youngstown Hospital has several resources for addressing infant mortality and premature births, including the Women's Care Center, Women's Services program, Resource Mothers program, and CenteringPregnancy program. Maternal fetal medicine interventions also are provided through Level II maternity services at St. Joseph Warren Hospital and Level III maternity services at Mercy Health — St. Elizabeth Boardman Hospital. Other service providers include Akron Children's Hospital Mahoning Valley, Trumbull County Combined Health District, Warren City Health District, ValleyCare Health System of Ohio (Trumbull Memorial Hospital), Help Me Grow, Planned Parenthood's Healthy Moms, Healthy Babies program, Safe Kids/Safe Sleep Committee, Help Hotline Crisis Center, Inc., Family and Children First Council of Trumbull County, Beatitude House, Trumbull Metropolitan Housing Authority and Catholic Charities Diocese of Youngstown. Various ob/gyn physician practices and pediatricians offer services to address this need. Trumbull County's task force, Infant Mortality Priority Group, also is focused on this need.

## Prioritization of health needs

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 information was reviewed with Mercy Health — Youngstown hospital presidents and the Strategy Development Committee, and reviewed with key stakeholders within the hospital, including the Behavioral Health Institute, diabetes education, Cancer Center, New Start Treatment Center, Mercy Health physician president and the director of quality.

The top six health needs identified from the CBPC and key stakeholders (cancer, diabetes, drug/alcohol and substance abuse, infant mortality, obesity and mental health) were discussed using a two-step process:

The first step in the process established priorities among identified CHNA health needs. Committee members rated each health need based on four key criteria: the size of the population (4); the severity of the health need (3); the ability to evaluate outcomes (2); and the current community capacity to address the health need (1). This scoring method created a rank order among the health needs identified by the committee.

The second step in the process evaluated the hospital's capacity to address the need, the degree to which the health need affects the poor, under-served, women and children, and whether the need addresses the common good or creates a more just health care environment (referred to as "Mission impact"). Each of the health needs under consideration were rated high, medium or low on critical variables. This involved plotting each health need against two variables that are critical to setting the priorities for the organization. This exercise yielded what is commonly referred to as a "4-square analysis" and produced the ability to tier the identified health needs and show the importance of the health needs relative to each other. The results are as follows:

Health need	Mission impact	Capability of hospital to address the need
Infant mortality	3	3
Drug and alcohol abuse	3	2
Cancer	2	2
Diabetes	2	2
Mental health	3	1
Obesity	2	1

After full data review with key stakeholders and identification of the priorities listed above, 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 in which the hospital serves.

## Prioritized health needs

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

### CANCER

Lung cancer is the leading cancer killer in men and women in every ethnic group, and is the second most common cancer in both men and women. Overall the chances 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. 69% of Mercy Health — Youngstown lung cancer cases were diagnosed at stage 3 or 4 (data from 2012-2015 Mercy Health — Youngstown Cancer Registry). An estimated 20,738 patients within the tri-county area are eligible for screening, while less than 1% actually get screened.

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. Around 1 in 3 adults between the ages of 50 and 75 are not getting screened as recommended. When adults get screened, colorectal cancer can be detected in the early stages when treatment is more likely to be successful and in some cases prevented through the detection and removal of precancerous polyps. Groups less likely to get tested are men, those aged 50-64, Hispanics, people living in rural areas and individuals with lower education and income.

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 communities include females over the age of 40, non-white females and uninsured females ages 18-64. 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.

## **SUBSTANCE ABUSE**

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 overdoses 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 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.

## **DIABETES**

Diabetes mellitus 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 Americans are at risk for developing it. 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 percent 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 improves both diabetes control and quality of life.

## **INFANT MORTALITY AND PREMATURE BIRTHS**

Ohio's infant mortality rate is one of the worst in the nation. Ohio's black infant mortality rate also 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. Some 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). Trumbull County also has a task force, the Infant Mortality Priority Group, targeting this need.

## 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:

### CANCER

Resources available to address the cancer needs of the community include Mercy Health's Regional Tobacco Treatment Center, Mercy Health Cancer Centers, the Joanie Abdu Mobile Mammography Van, Surgical Hospital at Southwoods, Southwoods Imaging Center, ValleyCare Health System of Ohio (Trumbull Memorial Hospital), American Cancer Society, Trumbull County Combined Health District and Warren City Health District.

### SUBSTANCE ABUSE

Resources available to address the substance abuse needs of the community include St. Joseph Warren Hospital's New Start Treatment Center, inpatient services at St. Elizabeth Youngstown Hospital, Alta Behavioral Healthcare (formerly Turning Point Counseling Center), Belmont Pines Hospital, Trumbull County Mental Health and Recovery Board, First Step Recovery, Braking Point Recovery Center, Compass Family and Community Services and Project DAWN (Deaths Avoided With Naloxone). Meridian HealthCare and Neil Kennedy Recovery Centers also offer MAT programs.

### DIABETES

Resources available to address the diabetic needs of the community include Mercy Health hospitals and physicians, YWCA, Trumbull County Combined Health District, Warren City Health District, the Ohio State University Extension Trumbull County office, Akron Children's Hospital Mahoning Valley and Diabetes Partnership of the Mahoning Valley.

## INFANT MORTALITY AND PREMATURE BIRTHS

Resources available to address the infant mortality and premature births need include Level II maternity services at St. Joseph Warren Hospital and Level III maternity services at Mercy Health — St. Elizabeth Boardman Hospital, St. Elizabeth Youngstown Hospital's Women's Care Center, Women's Services program, Resource Mothers program and CenteringPregnancy program, Akron Children's Hospital Mahoning Valley, Trumbull County Combined Health District, Warren City Health District, ValleyCare Health System of Ohio (Trumbull Memorial Hospital), Help Me Grow, Planned Parenthood's Healthy Moms, Healthy Babies program, Safe Kids/Safe Sleep Committee (Nationwide Children's Hospital's Safe Sleep Committee), Help Hotline Crisis Center, Inc., Family and Children First Council of Trumbull County, Beatitude House, Trumbull Metropolitan Housing Authority, and Catholic Charities Diocese of Youngstown. Trumbull County's task force, Infant Mortality Priority Group, is also focused on this need.

# Progress on Health Priorities Identified in the 2013 Health Needs Assessment

## DIABETES

Initiatives	Evaluation of Impact
Mercy Health – Youngstown diabetes education	The diabetes education department served over 1,500 patients in 2015, an increase of 27% over 2014. Participants had the following results: <ul style="list-style-type: none"> <li>• 90% of class participants achieved a decrease in HgbA1C post-class, exceeding the goal of 70%</li> <li>• The class completion rate of 91% exceeded the goal of 85%</li> </ul>
Community outreach and education	With a rate of 89.8%, primary care practices have exceeded their 80% goal for medical attention for nephropathy.

## RESPIRATORY DISEASE

Initiatives	Evaluation of Impact
Increase completion of pulmonary rehabilitation programs	The hospital exceeded its goal to increase the number of patients completing pulmonary rehab (completing 36 treatments); 32 patients completed in 2014 and 75 completed in 2015.
Reduce readmission rate for respiratory diseases	St. Joseph Warren Hospital reduced its rate to 7.9% in 2015, exceeding its goal to reduce the readmission rate to below the 20% national average.

## BEHAVIORAL HEALTH

Mercy Health –Youngstown determined its hospitals did not have the capacity to address the behavioral health need across the continuum of care. Although the hospital did not address this need in its 2013 implementation plan, it continues to take foundational steps to adequately address this need in the future.

## OBESITY

The hospital determined other community agencies were specifically designed and better prepared to address this health need. Additionally, St. Joseph Warren Hospital determined the strategies and activities aimed at reducing diabetes would also impact obesity. Obesity continued to be a community health focus.

## ACCESS & PREVENTIVE CARE

The hospital determined other community agencies were specifically designed and better prepared to address this health need.

## PRENATAL ISSUES

The hospital determined other community agencies were specifically designed and better prepared to address this health need. St. Joseph Warren Hospital continued to work to develop partnerships in Trumbull County to address this need, and to help connect women with healthcare and needed social services within the community.