

2013 Community Health Needs Assessment

Catholic Health Partners' (CHP) long-standing commitment to the community covers more than 150 years. This commitment has expanded and evolved through considerable thought and care in considering our communities' most pressing health needs. One avenue for examining these needs is through a periodic, comprehensive Community Health Needs Assessment (CHNA) for each CHP hospital. The most recent assessments were completed by teams comprised of CHP and community leaders. They include quantitative and qualitative data that guide both our community benefit and strategic planning.

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

The following document is a detailed CHNA for St. Elizabeth Boardman Health Center. Humility of Mary Health Partners is an integrated health system located in the Youngstown/Warren area. It is a region of Catholic Health Partners (CHP) in Cincinnati, the largest health system in Ohio and one of the largest Catholic health systems in the United States. HMHP provides a full spectrum of health care services, including inpatient, outpatient, emergency, urgent care, home care and long-term care. Members are St. Elizabeth Health Center, St. Joseph Health Center, St. Elizabeth Boardman Health Center, HM Home Health Services, The Assumption Village, Humility House, and Hospice of the Valley. HMHP hospitals were recognized with the top hospitals in Northeast Ohio by U.S. News & World Report, with St. Elizabeth Health Center ranked nationally in gynecology.

CHP has responded to community health needs as part of a five-year strategic plan that concludes in 2013. Planning also has begun on a five-year plan that will guide CHP through 2018. Recently, CHP has built new hospitals in Cincinnati, Springfield and Willard, all in Ohio, and renovated and expanded facilities in Toledo, Youngstown, Lima and other communities served by CHP. CHP is investing more than \$300 million in an electronic health system as we build integrated networks of care designed to improve the health of communities. We operate health and fitness centers, hospice facilities, outpatient clinics and senior living facilities.

CHP contributes more than \$1 million per day in community benefit services as we carry out our long-standing mission of extending care to the poor and under-served.

St. Elizabeth Boardman Health Center strives to meet the health needs of its community. Please read the document's introduction below to better understand the health needs that have been identified.

Table of Contents

<i>Introduction</i>	1
Community Served by Hospital	1
Information and Data Considered in Identifying Potential Need	1
Process for Gathering and Analyzing Data/Information	1
<i>Executive Summary</i>	3
Community Input	3
Prioritization of Health Needs.....	3
SEBHC Priority Scores	4
<i>Prioritized Health Needs</i>	5
Diabetes.....	5
Prenatal	5
<i>Collaborating Partners</i>	6
<i>Appendices</i>	
A. HMHP Service Area Definitions	7
B. 2012 – 2017 Population Trends by Hospital Primary Service Area	8
C. Tri-County Needs Assessment and Planning Project Steering Committee Participants	9

Introduction

Community Served by Hospital

Geographic Identifiers: Mahoning and Columbiana Counties in Ohio

Community served by hospital was defined as the primary service area: Mahoning & Columbiana Counties. Patient data indicates that 80% of persons served at St. Elizabeth Boardman Health Center reside in the primary service area (refer to Appendix A & B).

Information and Data Considered in Identifying Potential Need

Information and Data Sources: Federal, State or Local Health or Other Departments or Agencies; Community Input

Information Sources used by HMHP

Behavioral Risk Factor Surveillance Program Centers for Disease Control and Prevention, 2010
<http://www.cdc.gov/brfss/>

County Health Rankings
University of Wisconsin, 2011
<http://www.countyhealthrankings.org/>

Healthy People 2020
U.S. Department of Health and Human Services, 2012
<http://www.healthypeople.gov>

Ohio Department of Health, 2010
<http://www.odh.ohio.gov/>

Data Considered

Suicide Prevention Resource Center, 2010
<http://www2.sprc.org/bpr/section-i-evidence-based-programs>

Centers for Disease Control and Prevention (CDC), 2009
Recommended Community Strategies and Measurements to Prevent Obesity in the United States. MMWR-Morbidity and Mortality Weekly Report 2009, 58; 1-26

Community Health Status Indicators
US Department of Health and Human Services, 2009
<http://www.communityhealth.hhs.gov/>

Food Environment Atlas, US Department of Agriculture, 2011 <http://www.ers.usda.gov/foodatlas/>

2008 Healthy Ohio Community Profiles, 2008
<http://healthyohioprogram.org/resources/commprof.aspx> (Ohio.gov)

Ohio Census QuickFacts
US Census, 2011
<http://quickfacts.census.gov/qfd/states/39000.html>

Ohio Department of Health Information Warehouse, 2009
<http://dwhouse.odh.ohio.gov/> (Ohio.gov)

The Community Guide, 2009
<http://www.thecommunityguide.org/obesity/index.html> (USA.gov)

World Health Organization (WHO)
Social Determinants of Health, 2011
http://www.who.int/social_determinants/en/

Process for Gathering and Analyzing Data/Information

The Tri-County Community Health Assessment and Planning (CHA/P) initiative provided a guide to implement strategies over the next three years aimed at improving the health status of residents of the Mahoning Valley and reducing health disparities between population groups. CHA/P is a collaboration between community leaders from public health, health care, business, education, non-profit, philanthropy and governmental organizations. The initiative was led by a Steering Committee that included 27 community and health leaders from Mahoning, Trumbull, and Columbiana counties. Humility of Mary Health Partners participated in this assessment of community health needs, which served as the foundation for the hospital's assessment. The CHA/P's final report was completed in June 2011. It was modeled after the 2008 Community Health Status Assessment completed by the city of Milwaukee's Health Department. The CHA/P assessment identified five priorities and goals (listed below).

- ☞ Reduce violence in the community.
 Goal: Reduce suicide rates.
- ☞ Ensure access to physical and behavioral health care.
 Goal: Expand access to and increase awareness of medical, dental and behavioral health services available through regional care providers.
- ☞ Educate residents about healthy lifestyles and promote healthy behaviors.
 Goal: Increase the number of participants who adopt healthier lifestyles as a result of intervention programs in schools and workplaces.
- ☞ Ensure access to healthy foods and venues for physical activity.
 Goal: Increase access to healthy foods and physical activity.
- ☞ Promote the environment and ensure a greener community.
 Goals: Divert pharmaceutical wastes from wastewater and landfills. Eliminate lead poisoning in children.

A focus group for Boardman community was facilitated by Keynote Media Group in June 2012. The discussion took place among 15 individuals representing agencies and organizations either providing direct services to or having direct contact with the underserved populations within Mahoning & Columbiana Counties. The focus group had three (3) objectives:

1. To determine the top five health concerns affecting the underserved population in the city
2. To determine factors directly impacting the health status of the people in our community and
3. To determine the major barriers to individuals in obtaining and maintaining good overall health.

Participants were asked what they considered to be primary health issues in terms of chronic disease that affected members of the community, what they considered to be the primary factors contributing negatively to the health of the people of the community and asked to provide input on what were considered to be barriers to individuals to maintain their health.

The Boardman community focus group identified the following areas of community need: obesity, mental health, dental health, substance abuse, and prenatal issues.

Process to analyze data/information and the time period over which this occurred:

The HMHP Community Benefits Committee was charged to facilitate the prioritization process for the three HMHP hospitals. Using the report developed by the Tri-County CHA/P Steering Committee, the committee identified HMHP services and programs that currently address the priorities and goals identified in the assessment.

The HMHP Community Benefits Committee held multiple meetings in the fall of 2012 to analyze the data from both the Tri-County Assessment and the Youngstown community focus group and compiled a list of prioritized health needs.

Information gaps learned through the process (which impact the hospital's ability to assess needs):

Statistical information available for the Boardman community is retrospective and is not indicative of the current state of the population. Other information gaps are the lack of detailed knowledge of population health and strategic priorities of local organizations.

Executive Summary

Community Input

The Tri-County Community Health Needs Assessment involved a number of community members and leaders that came together to develop a plan for improving the health of Mahoning Valley residents. It was completed through collaboration between members of the Tri-County Community Health Assessment and Planning Steering Committee and Kent State University's College of Public Health. Two subcommittees, comprised of members from the Steering Committee and other community representatives, plus key community leaders also participated (refer to Appendix C).

Boardman Focus Group Participants

Groups represented are shown in parenthesis.

Juleen Keefer, Davis YMCA,
Jobs & Family Services for 20+ years
(Low-income, Youth)

Michelle Edison, Davis YMCA (Low-income, Youth)

Heather Kollar, Davis YMCA (Low-income, Youth)

Ronald Shadd, Mahoning County One Stop
(Low-income, Education)

Diana Coliaanni, Mahoning County District
Board of Health
(Expertise in public health, Medically underserved,
Low-income, Minority populations, Populations with
chronic disease needs)

Daljeet Dhillon, WIC (Low-income, Youth)

Maria LeBron, WIC (Low-income, Youth)

Mary Thompson, WIC (Low-income, Youth)

Michelle Rovnak, MYCAP (Low-income, Youth)

Carla Parker, MYCAP, Dietician (Low-income, Youth)

Rose Fragoso, MYCAP (Low-income, Youth)

Pat Sciarretta, Rescue Mission on the Mahoning Valley
(Low-income)

Tila Miller, Community Action Agency
of Columbiana County
(Low-income, Minority populations)

Beth Weir, Community Action Agency
of Columbiana County
(Low-income, Minority populations)

James Ford, Community Legal Aid
(Low-income, Minority populations)

Community members from the above groups, organizations and sectors made up the Boardman community focus group. This group is a representative cross section of leaders and frontline professionals from local agencies with expertise or special knowledge in public health, as well as agencies providing social services to the medically underserved population and individuals with chronic disease needs.

Prioritization of Health Needs

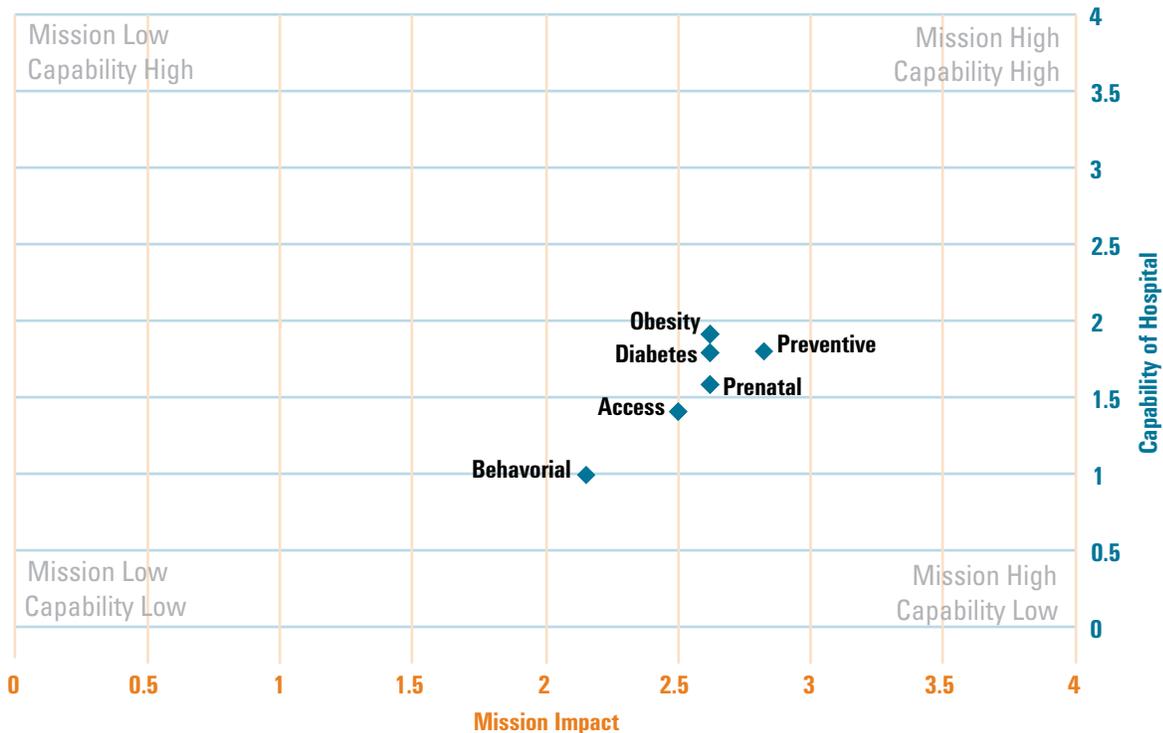
The HMHP Community Benefits Committee, a committee of 12 leaders with responsibility and interest in ensuring the health and social needs of the communities served are addresses and appropriately documented by the health system. This committee is a long standing committee that willfully accepted the accountability to lead and coordinate the Community Health Needs Assessment report and implementation plan. The HMHP Community Benefits Committee reviewed the Tri-County Community Health Assessment & Planning Initiative and the focus group results and facilitates the prioritization methodology. The top 6 health needs identified from the committee (diabetes, behavioral health, obesity, prenatal issues, respiratory disease and access & preventive care) were discussed using a two-step process.

The first step in the process established priorities among identified CHNA health needs. The step incorporated the perspective of major stakeholders in the local community relevant to the hospital's defined service area. Committee members rated each health need based on the following four key criteria listed below. This scoring method created a rank order among the health needs identified by the committee. (Numbers below indicate weight assigned.)

- ▤ Size of population = 4
- ▤ Severity of health need = 3
- ▤ Ability to evaluate outcome data = 2
- ▤ Current community capacity to address the health need = 1

The second step in the process evaluated the hospital's capacity to address the need and the degree to which the health need affects the poor, underserved, women, and children, and addresses the common good or creates a more just health care environment. Each of the health needs under consideration was 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.

SEBHC Priority Scores



The prioritization process was developed by the Catholic Health Partners' (CHP) Community Health Needs Assessment Collaborative Committee. The committee's meetings to establish a prioritization process began in the fourth quarter of 2011 and continued until the process was endorsed at the July 2, 2012 meeting. Members of the CHP Community Health Needs Assessment Collaborative Committee included Catholic Health Partners employees with the following areas of expertise: mission, finance, corporate responsibility, legal, and strategic planning.

Prioritized Health Needs

Based on all of the above information and processes, the prioritized health needs of the community served by the St. Elizabeth Boardman Health Center are listed below.

Rank 1:

Diabetes

11.7% or 27,942 of population in Mahoning County are diagnosed with diabetes compared to 10.1% of Ohio population. (BRFSS, 2010) Diabetes is the 5th leading cause of death in America.

- 1 in every 5 healthcare dollars is spent caring for someone with diabetes.
- Diabetics have medical expenditures that are 2-3 times higher than other victims of chronic disease.
- Diabetics have more frequent and longer hospital stays, more doctor and Emergency visits, more nursing facility stays, more home health visits, and more prescription drug and medical supply use.
- 1 in 4 American adults has pre diabetes.
- Based on CPT codes for 2011: of the SEBHC and SEHC in- and outpatient diabetes volumes, 60.2% were from the Boardman Primary Service area.
- Looking at our own HM employees: the 2010 Health Risk Assessment identified 30 employees with undiagnosed diabetes and 565 with pre diabetes. In 2011, the Health Risk Assessment identified 50 employees with undiagnosed diabetes and 710 with pre diabetes (in 2010 there were 2866 participants; in 2011 there were 3247 participants).

Rank 2:

Prenatal

In Mahoning County, 247 or 10.2% of births are low weight, 1569 or 69.1% of births have prenatal care in the first trimester, and 411 or 17% of births are to mothers who smoke compared to Ohio rates of 8.6%, 73.0% and 17.8% respectively (ODH,2010) and Healthy People goals of 7.8% for low birth weight, 77.9% of births that have prenatal care in the first trimester and 14.6% of births to mothers who smoked.

Existing health care facilities and resources available to meet identified needs:

The following existing health care facilities and other resources within the community available to meet the prioritized needs are listed below for each need:

Prenatal Issues

Resources for addressing prenatal issues within the community include: Resource Mothers program, Healthy Moms, Healthy Babies (Planned Parenthood).

Diabetes

Resources for addressing diabetes within the community include: HMHP Diabetes Education Classes, Diabetes Wellness Connection at St. Joe's at the Mall, Wound Care Center, Hyperbaric Oxygen Therapy Department, Diabetes Exercise Program offered with Cardiac Rehab, American Diabetes Association, Community Diabetes Initiatives, The Diabetes Partnership of the Mahoning Valley, Akron Children's Hospital, HMHP Community Outreach programs including, Stepping Out Program, Neighborhood Health Watch, Hispanic, Latino and Immigrant Health Program.

Collaborating Partners

HMHP contracted with the following third parties to assist it in conducting the needs assessment:

Keynote Media Group, LLC

201 East Commerce Street, Suite 199
Youngstown, OH 44530

Expertise:

Key Note Media Group was engaged to facilitate our community focus groups. Expertise includes strategy development and implementation, media production and planning, social media, online customer loyalty programs, site marketing and customer experience evaluations.

Bricker & Eckler LLP

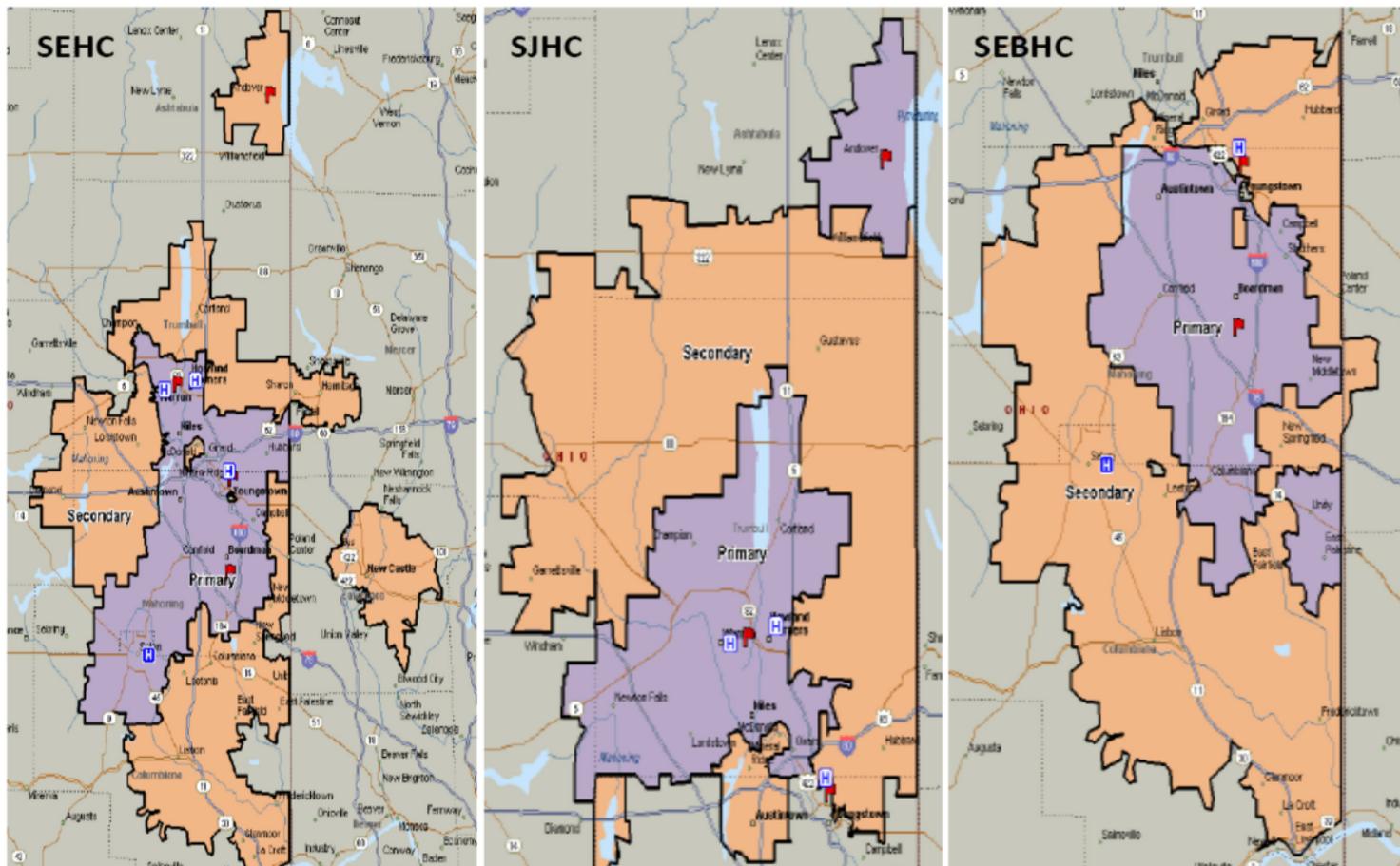
and the Quality Management Consulting Group
100 South Third Street, Columbus, OH 43215

Expertise:

Bricker & Eckler LLP and their affiliate, The Quality Management Consulting Group were engaged to review the community health needs assessment report for compliance with IRS guidance to date.

Appendix A

HMHP Service Area Definitions



- | | | | | |
|-------------------------------|----------------------------|------------------|---------------------------|-----------|
| HMHP - St. Elizabeth | HMHP - St. Joseph Hospital | Salem Hospital | ValleyCare – Northside | Primary |
| HMHP - St. Elizabeth Boardman | HMHP -St. Joseph, Andover | ValleyCare – TMH | ValleyCare-Hillside Rehab | Secondary |

Appendix B

2012 – 2017 Population Trends by Hospital Primary Service Area

SEHC Primary Service Area

Zip Code	2012 Population	Growth 2012 – 2017
44405	7,989	-486
44406	22,126	544
44420	15,056	-484
44425	14,633	-435
44440	4,520	37
44446	21,022	-636
44452	2,582	110
44460	26,597	-241
44471	10,935	-387
44483	25,310	-917
44484	22,927	-358
44502	10,167	-638
44504	4,710	-321
44505	19,460	-960
44506	2,540	-247
44507	5,581	-536
44509	11,845	-628
44510	2,296	-116
44511	19,435	-995
44512	33,853	-948
44514	22,890	-24
44515	27,390	-554
Total	333,864	(9,220)

SJHC Primary Service Area

Zip Code	2012 Population	Growth 2012 – 2017
44403	3,905	-167
44410	16,877	-53
44420	15,056	-484
44430	5,118	-135
44444	10,156	-260
44481	10,858	-250
44483	25,310	-917
44484	22,927	-358
44585	16,230	-1,093
Total	126,437	(-3,717)

SJHC Primary Service Area

Zip Code	2012 Population	Growth 2012 – 2017
44405	7,989	-486
44406	22,126	544
44408	11,084	143
44413	7,173	-17
44442	4,138	144
44452	2,582	110
44471	10,935	-387
44502	10,167	-638
44509	11,845	-628
44511	19,435	-995
44512	33,853	-948
44514	22,890	-24
44515	27,390	-554
Total	191,607	(-3,736)

Source: Truven Market Planner Plus – Data extraction 12/13/12

Appendix C

Tri-County Needs Assessment and Planning Project Steering Committee Participants

Neil Altman, Health Commissioner,
Youngstown City Health District

Erin Bishop, Administrator,
Youngstown City Health District

Michae Cicchillo, Sr. Vice President of External Affairs,
Forum Health

Brian Corbin, Catholic Charities Services & Health Affairs,
Diocese of Youngstown

Jelayne Dray, Health Commissioner,
East Liverpool City Health District

Jamie Elenz, Epidemiologist,
Columbiana County Health Department

Mary Harvey, Director of Program Development,
Humility of Mary Health Partners

John Hazy, Criminal Justice and Forensic Sciences,
Youngstown State University

Sharon Hrina, Vice President, Mahoning Valley Enterprises,
Akron Children's Hospital, Mahoning Valley

Selene Layton, Director of Nursing, Trumbull County
Board of Health

Caitlin Merrin, Youngstown State University Intern

Jeanine Mincher, Assistant Professor, Human Ecology,
Youngstown State University

Debbie Mokosh, Director of Nursing,
Trumbull County Board of Health

Nancy Mosca, Professor, Nursing,
Youngstown State University

Paul Olivier, Sr. Vice President of Business Development,
Humility of Mary Health Partners

Ginny Pasha, Director of Community Investment,
United Way of Youngstown and the Mahoning Valley

Debbie Pietrzak, Assistant Vice President,
Marketing/Planning, Salem Community Hospital

Bob Pinti, Warren City Health Department

Keisha Robinson, Assistant Professor, Health Professions,
Youngstown State University

Sr. Marie Ruegg, Humility of Mary Health Partners

Rick Setty, Health Commissioner,
Salem City Health Department

Matt Stefanak, Health Commissioner,
Mahoning County District Board of Health

Tracy Styka, Community Health Education Specialist,
Mahoning County District Board of Health

Wesley Vins, Health Commissioner,
Columbiana County Health Department

Nancy Wagner, Associate Professor of Nursing,
Youngstown State University

Joe Warino, City of Canfield

Michael Wellendorf, Government Relations Liaison,
Akron Children's Hospital