

MEMORIAL HOSPITAL
2015 COMMUNITY HEALTH NEEDS ASSESSMENT



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COMMUNITY HEALTH NEEDS ASSESSMENT – 2015

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I. INTRODUCTION

Memorial Hospital, in Fremont, Ohio, opened its doors in 1918. Built by citizens of Fremont and Sandusky County to ensure the community has a high-quality local hospital, Memorial Hospital became a member of ProMedica in 2014. Memorial Hospital is a state-of-the-art medical center with over 200 physicians and nearly 400 employees. The hospital provides a comprehensive range of services, including the latest in surgical and diagnostic procedures, as well as a physical medicine facility which houses our occupational medicine program Healthlink and physical medicine services, and a new cancer treatment facility opening in 2016. As a not-for-profit hospital, all patients are treated regardless of their ability to pay. ProMedica's mission is to improve the health and well-being of the communities we serve.

Memorial Hospital conducted and adopted this community health needs assessment (CHNA) in 2015, and will implement the associated strategic plan in 2016. Memorial Hospital staff participated in the most recent Sandusky County community health assessment, which was cross-sectional in nature and included a written survey of adults, adolescents, and parents within Sandusky County. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment. Following the formal Sandusky County community health assessment processes, multiple community organizations collaborated to develop a strategic community health improvement plan (CHIP) for Sandusky County, with Memorial Hospital represented on these community strategic planning groups. A resource assessment and gap analysis were completed as part of this process.

Following the Sandusky County strategic planning process, Memorial Hospital convened a CHNA committee to review the county health improvement plan (CHIP) and available health data, select and prioritize key indicators for their defined community, review resources and gaps in these areas, and develop strategic plans to address these health issues in the community over the next year. Strategic plans were developed with feedback from key community stakeholders, including the health department, to confirm the priority needs from a public health perspective.

Building on the previous hospital CHNA, Memorial Hospital will specifically implement programs to address the following health needs, listed in order of priority:

- Cancer – access, education and screening
- Risky Behavior in Youth – teen pregnancy and sexually transmitted diseases
- Obesity
- Mental Health – depression screenings and suicide

In addition, as part of the ProMedica health system, some community health programs are developed and implemented at the corporate level, with diabetes, behavioral health and infant mortality identified as current focal points. The full Memorial Hospital CHNA may be accessed at <https://www.promedica.org/Pages/about-us/default.aspx>.

II. MEMORIAL HOSPITAL COMMUNITY SERVICE AREA

The definition of the primary community served by Memorial Hospital for this assessment is Sandusky County, Ohio, with a majority of Memorial Hospital's patients residing in Sandusky County. Memorial Hospital serves all types of populations, including children, women, men and seniors. Memorial Hospital's community includes all patients without regard to whether they or their insurers pay for the care received or whether they are eligible for assistance under Memorial Hospital's Financial Assistance Policy. Sandusky County is located in the northwestern region of Ohio, with a total population estimated at 60,179 (60,944 previously in 2010). Memorial Hospital is one of two hospitals serving Sandusky County; The Bellevue Hospital in Bellevue, Ohio, primarily serves the eastern portion of the county. For purposes of this plan, the health statistics and factors for the primary county of Sandusky County were reviewed and used in completing this community health assessment.

Demographic review of Sandusky County, Ohio, based on data from www.census.gov, shows that it is home to 60,179 residents. The median household income in Sandusky County was \$46,140 (\$47,277 in 2010) with 14.3% (13%) of Sandusky County residents with an income below the poverty level. 88.6% of residents are a high school graduate or higher. The percent of residents that were uninsured is 11.1% (2009-2013 American Community Survey 5 Year Profiles). From an age perspective, 16.9% of residents were 65 years and over, 53.9% of residents were adults 18-64 years of age, with 23.3% of youth ages 5-17 years, and 5.9% children under the age of 5 years. The majority of the population were Caucasian at 92% (previously 91% in 2010), with African Americans at 3.3% (2.8%), Hispanics at 8.8% (8.9%), Asian at .3% (.3%) and two or more races at 2.5% (2.6%) comprising the rest of the population. (Source: U.S. Census, 2011 – ACS 3-year estimates) Sixteen percent of Sandusky County residents are uninsured (2013/2014 Sandusky County Health Needs Assessment).

Existing health care facilities and resources within the community that are available to respond to the health needs of the community include The Bellevue Hospital, as well as many outpatient facilities, rehabilitation facilities and other programs. Due to the presence of The Bellevue Hospital in the county, as well as four other acute care hospitals within a 30 mile radius, Memorial Hospital focuses most if its community health efforts within the central Sandusky County/Fremont area.

Table 1 – Hospitals Serving Service Area	
ProMedica Memorial Hospital	Fremont, OH (Sandusky)
The Bellevue Hospital	Bellevue, OH (Sandusky)
Magruder Hospital	Port Clinton, OH (Ottawa)
Firelands Regional Medical Center	Sandusky, OH (Erie)
ProMedica Fostoria Hospital	Fostoria, OH (Seneca)
Tiffin Mercy Hospital	Tiffin, OH (Seneca)

Memorial Hospital also collaborates with other entities to address issues in our service area. Community organizations who participated in the health assessment and strategic planning process include, but are not limited to: American Cancer Society, Bishop Hoffman Catholic Schools, City of Fremont Economic Development, City of Woodville, Community Health Services, Easter Seals, Family & Children First Council, Firelands Counseling and Recovery Services, local physicians, local long-term care facilities, Sandusky County Educational Service Center, Sandusky County Help Me Grow, Sandusky County Board of DD, Sandusky County Juvenile Court, Sandusky County Park District, Sandusky County Emergency Medical Services, Mental Health and Recovery Services Board of Sandusky County, The Bellevue Hospital, Sandusky County Communities Foundation, Sandusky County Chamber of Commerce, Sandusky County Economic Development Corporation, Sandusky County Health Department, Fremont City Schools, Terra State Community College, Pathstone, United Way of Sandusky County, Vanguard Sentinel Adult Career Technology Center, Victory Christian Fellowship Church, WSOS, and YMCA of Sandusky County.

Memorial Hospital shared the hospital's CHNA strategic plan with a senior focus group (primarily senior volunteers at Memorial Hospital) to gain their feedback about the plan. And, finally, Stephanie Brown, Sandusky County Health Commissioner, and Cathy Glassford, Sandusky County Health Partners, provided feedback on the hospital's strategic priorities and plans, supporting these actions for the hospital community.

III. IMPACT OF PREVIOUS COMMUNITY HEALTH NEEDS ASSESSMENT

PLAN^[S1]

In 2013, Memorial Hospital implemented programs in Sandusky County to address the following health needs, listed in order of priority, with the following impact in 2014:

- **Obesity/hunger/wellness initiatives**
 - o Memorial Hospital expanded the Walk with a Doc program to include 400 participants in 2014.
 - o Replaced 50% of options in Memorial Hospital vending machines with healthy choices based on wellness criteria.
 - o Memorial Hospital provided eight biweekly Farmer's Markets to increase access to fresh fruits and vegetables.
 - o To increase healthy food access, Memorial Hospital offered healthy hot, entrée choice in the cafeteria daily and also developed "café cuisine" to promote healthy options, and offered daily salad bar along with 1-2 alternate healthy food choices.
 - o Memorial Hospital staff provided community nutrition education at local three grocery store tours.
 - o Memorial Hospital partnered with the Fremont City Schools to achieve their obesity/hunger goals through the Purple Pride collaboration that resulted in delivering

daily lunches and recreational exercise daily during the summer breaks - 2,573 lunches were provided during the week and 1,250 weekend meals were provided.

- o Memorial Hospital expanded summer camps focusing on nutrition, activities and self-esteem for youth of the community – the number of children who participated in summer youth camps was 56.
- o Memorial Hospital expanded health cooking nights and provided a diabetes cooking class to ten (10) participants.
- o Memorial Hospital continued participation in the community's garden project. A hospital garden plot was initiated and tended by 19 adult volunteers and eight (8) adolescents. Produce was harvested three (3) times and delivered to the community homeless shelter.

- **Cancer screenings – lung, breast, colorectal and prostate**

- o Memorial Hospital annually provided education and resource information on lung, breast, colorectal and prostate cancer. The number of activities that cancer education was provided to was 36, and the number of participants was 190.
- o Memorial Hospital staff participated in Relay to Life to raise funds for Sandusky County Relay for Life and provided a table with educational cancer materials at this event. Seventeen team members participated and raised over \$13,000.00 for the American Cancer Society.
- o Memorial Hospital Healthlink newsletter was sent to 50 companies and their employees, highlighting articles on each of the above cancers.
- o At local Senior Centers, Memorial Hospital staff provided educational talks and resources related to each above cancer, with 22 annual sessions and 222 participants.
- o Memorial Hospital's Family Fest provided a table with educational cancer materials. Approximately 1,500 attended the Family Fest and received educational materials.
- o Memorial Hospital used approved and funded resources from Susan G. Komen to provide breast exams and mammograms. The number of free mammograms provided to underserved women was 80.
- o Memorial Hospital maintained the WIGS program to fit 12 cancer patients with free wigs.
- o Memorial Hospital continued to offer cancer related support groups, offering 11 cancer support groups.
- o Memorial Hospital participated in Sandusky County's Cancer Coalition to improve cancer screening, treatment and education programs in the community.
- o Memorial Hospital supported local cancer related events such as the Cancer Care Fund Fundraiser and Kick Ball tournament benefiting cancer care, raising over \$500 for patient use.

- **Mental health – depression/anxiety/suicide and binge drinking**

- o Memorial Hospital increased hospital-wide participation in Red Ribbon Week with 45 youth and 30 adult pledges to remain drug and alcohol free.
- o Memorial Hospital staff participated in the NAMI walk to raise funds to support related community mental health programs, with 40 participants in the walk raising over \$1,000.00 for mental health services in the community.
- o Memorial Hospital participated in three depression screenings, with 305 participants in depression screenings, with most of these screenings held at a senior day event.

- o Memorial Hospital staff continued to participate in the Sandusky County Mental Health Coalition to increase awareness, education, and treatment in the community.
- o Memorial Hospital developed mental health resources based on input from community team, based on outcomes of focus groups and team meetings.
- o Memorial Hospital facilitated at least four parent informational sessions with a panel of professionals with 30 attendees at parent information sessions.
- o Memorial Hospital continued to increase access to the child and adolescent psychiatric practice in community. The number of child/adolescent psychiatry visits was approximately 2,239.
- **Risky behavior in youth – teen pregnancy and prescription drug misuse**
 - o Memorial Hospital collaborated with the health department to expand HIV screenings in the community; screenings were conducted at Community Health Services in Fremont.
 - o Memorial Hospital promoted free health department HIV screening in the Emergency Department.
 - o Partnered with the AIDS Resource Center to develop anonymous HIV screening.
 - o Expanded youth mentoring in Sandusky County. Memorial Hospital participated in a community meeting led by Judge Brad Smith, focusing on implementing a Big Brother program in Fremont.
 - o Memorial Hospital partnered with the Sandusky County Health Department to expand the Asset Development Program within the Sandusky County schools.
 - o Memorial Hospital partnered with the Sandusky County schools to achieve their strategic goals in relation to risky behavior in youth.
 - o Memorial Hospital challenged the community with a video competition regarding STI's, teen pregnancy, and misuse of prescription drugs, to increase awareness of these issues.
 - o Memorial Hospital expanded awareness of misuse of prescription drugs by hosting educational sessions focusing on prescription drug abuse.
 - o Memorial Hospital developed a policy and tracking process that ensures all physicians who practice at Memorial Hospital are registered in the Ohio Automated Rx Reporting System (OARRS), and continued to track narcotics used in the ED.
 - o Twenty one physicians were registered in OARRS to prevent prescription abuse.

This information above reflects activities that were implemented to address hospital priority issues. A new Sandusky County assessment due in 2015-2016 will reflect any changes in statistics resulting from these activities.

IV. COMMUNITY HEALTH NEEDS ASSESSMENT

Memorial Hospital's process for identifying and prioritizing community health needs and services included:

- Review and discussion of the Sandusky County Health Needs Assessment and findings
- Review and discussion of the Sandusky County "Health Partners" Strategic community health improvement plan (CHIP)
- Prioritization of strategic focus areas through ranking methodology

The health areas that were identified as leading health issues in the formal county needs assessment survey include: health status, health care coverage, health care access, cardiovascular health, cancer, diabetes, asthma, arthritis, weight status, tobacco use, alcohol consumption, marijuana and other drug use, women's health, men's health, preventive health, sexual behavior and pregnancy, quality of life, social issues, mental health and suicide, oral health, parenting, youth safety, youth violence, youth perceptions, early childhood (0-5 years) issues, middle childhood (6-11 years) issues, family functioning, neighborhood and community characteristics, and parental health.

After reviewing both the Sandusky Health Partners strategic plan and the Sandusky County health needs assessment data, the Memorial Hospital CHNA committee concurred with the health needs identified above. Memorial Hospital will address the following needs: cancer, obesity, risky behaviors and mental health.

SANDUSKY COUNTY HEALTH NEEDS ASSESSMENT PROCESS

Memorial Hospital utilized the data provided in the 2013-2014 Sandusky County Health Needs Assessment and Sandusky County Youth Health Needs Assessment as the basis for its community health needs assessment and strategic plan. To begin the formal county assessment process, Memorial Hospital partnered with other local agencies: Sandusky County Health Department, The Bellevue Hospital, Community Health Services, Firelands Counseling & Recovery Services, Fremont City Schools, Mental Health and Recovery Services Board, Sandusky County Board of DD, Sandusky County Family and Children First Council and WSOS - this group of organizations is collectively known as Health Partners. Health Partners then collaborated with the Hospital Council of Northwest Ohio Data Division and the University of Toledo Health and Human Services Department to conduct the formal county health assessment utilizing the following methodology (refer to page 13 for a list of collaborating organizations).

The questions were modeled after the survey instruments used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System (BRFSS) and Youth Risk Behavior Surveillance System (YRBSS) and the National Survey of Children's Health (NSCH), developed by the Child and Adolescent Health Measurement Initiative. The Hospital Council of Northwest Ohio collected the data, guided the health assessment process and integrated sources of primary and secondary data into the final report.

Primary Data Collection Methods

DESIGN

This community health assessment was cross-sectional in nature and included a written survey of adults, adolescents, and parents within Sandusky County. From the beginning, community

leaders were actively engaged in the planning process and helped define the content, scope, and sequence of the study. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

INSTRUMENT DEVELOPMENT

Four survey instruments were designed and pilot tested for this study: one for adults, one for adolescents, one for parents of children ages 0-5, and one for parents of children ages 6-11. As a first step in the design process, health education researchers from the University of Toledo and staff members from the Hospital Council of NW Ohio met to discuss potential sources of valid and reliable survey items that would be appropriate for assessing the health status and health needs of adults and adolescents. The investigators decided to derive the majority of the adult survey items from the BRFSS. The majority of the survey items for the adolescent survey were derived from the YRBSS. The majority of the survey items for the parents of children 0-11 were derived from the NSCH. This decision was based on being able to compare local data with state and national data.

The Project Coordinator from the Hospital Council of NW Ohio conducted a series of meetings with the planning committee from Sandusky County. During these meetings, banks of potential survey questions from the BRFSS, YRBSS, and NSCH surveys were reviewed and discussed. Based on input from the Sandusky County planning committee, the Project Coordinator composed drafts of surveys containing 114 items for the adult survey, 80 items for the adolescent survey, 90 items for the 0-5 survey, and 90 items for the 6-11 survey. The drafts were reviewed and approved by health education researchers at the University of Toledo.

SAMPLING | Adult Survey

Adults ages 19 and over living in Sandusky County were used as the sampling frame for the adult survey. Since U.S. Census Bureau age categories do not correspond exactly to this age parameter, the investigators calculated the population of those 18 years and over living in Sandusky County. There were 46,076 persons ages 18 and over living in Sandusky County. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding margin of error of 5% (i.e., we can be 95% sure that the “true” population responses are within a 5% margin of error of the survey findings.) A sample size of at least 383 adults was needed to ensure this level of confidence. The random sample of mailing addresses of adults from Sandusky County was obtained from American Clearinghouse in Louisville, KY.

PROCEDURE | Adult Survey

Prior to mailing the survey to adults, an advance letter was mailed to 1,200 adults in Sandusky County. This advance letter was personalized, printed on Sandusky County Health Partners stationery and was signed by Dave Pollick, Health Commissioner, Sandusky County Health

Department. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

Three weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter (on Sandusky County Health Partners stationery) describing the purpose of the study; a questionnaire printed on colored paper; a self-addressed stamped return envelope; and a \$2 incentive. Approximately three weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging them to reply, another copy of the questionnaire on colored paper, and another reply envelope. A third wave postcard was sent three weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.

The response rate for the mailing was 43% (n=494: CI=4.39). This return rate and sample size means that the responses in the health assessment should be representative of the entire county.

PROCEDURE | Adolescent Survey

The survey was approved by all superintendents. Schools and grades were randomly selected. Each student in that grade had to have an equal chance of being in the class that was selected, such as a general English or health class. Classrooms were chosen by the school principal. Passive permission slips were mailed home to parents of any student whose class was selected to participate. The response rate was 91% (n=471). The survey contained 80 questions and had a multiple choice response format.

PROCEDURE | Children 0-5 and 6-11

Prior to mailing the survey to parents of 0-11 year olds, an advance letter was mailed to 2,400 parents in Sandusky County. This advance letter was personalized, printed on Sandusky County Health Partners stationery and was signed by Dave Pollick, Health Commissioner, Sandusky County Health Department. The letter introduced the county health assessment project and informed the readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected.

Three weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized hand signed cover letter (on Sandusky County Health Partners stationery) describing the purpose of the study; a questionnaire printed on colored paper; a self-addressed stamped return envelope; and a \$2 incentive. Approximately three weeks after the first mailing, a second wave mailing included another personalized cover letter encouraging them to reply, another copy of the questionnaire on

colored paper, and another reply envelope. A third wave postcard was sent three weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.

Because much of the output combines identical items from the 0-5 and the 6-11 surveys, the number of returned surveys needed for power of the combined population (9,690 children) was 370 and this was exceeded by having a combined 516 surveys (CI=4.20).

DATA ANALYSIS

Individual responses were anonymous and confidential. Only group data are available. All data was analyzed by health education researchers at the University of Toledo using SPSS 17.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Sandusky County, the adult data collected was weighted by age, gender, race, and income using 2010 census data. Multiple weightings were created based on this information to account for different types of analyses. For more information on how the weightings were created and applied, see Appendix iii of the Sandusky County CHNA.

LIMITATIONS

As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Sandusky County adult assessment had a high response rate. However, if any important differences existed between the respondents and the non-respondents regarding the questions asked, this would represent a threat to the external validity of the results (the generalizability of the results to the population of Sandusky County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation.

Second, it is important to note that, although several questions were asked using the same wording as the CDC questionnaires and the NSCH questionnaire, the adult and parent data collection method differed. CDC adult data and NSCH child data were collected using a set of questions from the total question bank and adults were asked the questions over the telephone rather than as a mail survey. The youth CDC survey was administered in schools in a similar fashion as this county health assessment.

Finally, this survey asked parents questions regarding their young children. Should enough parents feel compelled to respond in a socially desirable manner which is not consistent with reality, this would represent a threat to the internal validity of the results.

CONSULTING PERSONS AND ORGANIZATIONS

The process for consulting with persons representing the community's interests and public health expertise began when local community agencies, known collectively as Health Partners, were invited to participate in the county wide health assessment process, including selecting questions for the surveys, providing local data, reviewing draft reports and planning the

community data release event, and setting priorities through the CHIP process. The needs of the population, especially medically underserved and low-income populations with chronic disease needs, were taken into account – with a relatively low percentage of minorities present in the Sandusky County population, focus was set on low income, underinsured and uninsured populations. [s12] This community health assessment was cross-sectional in nature and included a written survey of adults, adolescents, and parents within Sandusky County. From the beginning, community leaders were actively engaged in the planning process and helped define the content, scope, and sequence of the study. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment.

As evidenced by the list of participating organizations below, **the hospital facility took into account input from persons who represent the community** by participating with other organizations in Sandusky County who contracted with the Hospital Council of Northwest Ohio, a non-profit hospital association, located in Toledo, Ohio, to coordinate and manage the county health assessment and county strategic planning process. The Hospital Council has been completing comprehensive health assessments since 1999. The Project Coordinator from the Hospital Council of NW Ohio holds a Master's degree in Public Health and conducted a series of meetings with the planning committee from Sandusky County to develop the county plan, and also assisted in the review of data and selection of priorities for the hospital with the hospital CHNA committee.

The needs of the population, especially those who are medically underserved, low-income, and populations with chronic disease needs were taken into account through the sample methodology that surveyed these populations. In addition, organizations that serve these populations participated in the health assessment and community planning process, such as Sandusky Health Department, WSOS, etc.

Memorial Hospital conducted the Sandusky County health needs assessment with the following hospitals:

- Bellevue Hospital

Over 100 members from the community who represented public health, law enforcement, schools, churches, local officials, social service agencies and other various community members were invited to the public release of the community health needs assessment. Community participants were then invited to join the Sandusky County CHIP process, with six meetings scheduled for this initial initiative.

SANDUSKY COUNTY STRATEGIC PLANNING PROCESS

Following the county assessment data release event in 2013, community members were asked to participate in a community health improvement planning (CHIP) process and participants met six

(6) times between April 11, 2013 and June 13, 2013 to: 1) review the community assessment, 2) identify priority health issues, 3) define objectives and performance measures – specific work teams were developed that used Logic models, 4) choose strategies, 5) plan action steps - considering best practices, and 6) “tie it all together”. As part of this process, resource assessments were completed and any gaps in services and/or resources were identified. Following the release of the Sandusky County CHNA in April 2013, participants were brought together, using a three-part cross sector approach, and were asked to complete a short survey on health issues. Sandusky County Health Partners convened a planning session to discuss those health issues that were supported by data and shown to be a significant problem and those which had opportunity for collective impact.

The Sandusky County Strategic Planning process and groups included input from persons who represent the community. Collaborating organizations included:

- Bellevue Hospital (PH)
- Community Health Services (PH)
- Firelands Counseling & Recovery Services (PH)
- Fremont City School District
- Memorial Hospital (PH)
- Mental Health and Recovery Services Board of Seneca, Sandusky, Wyandot Counties (PH)
- Sandusky County Board of Developmental Disabilities (PH)
- Sandusky County Family & Children First Council (PH)
- Sandusky County Health Department (PH)
- United Way of Sandusky County (PH)
- WSOS Sandusky County

A (PH) indicates the representative individual or organization works in the public health field. Memorial Hospital was represented in the development of the community health improvement plan for Sandusky County.

V. **SANDUSKY COUNTY COMMUNITY HEALTH NEEDS & PRIORITIES**^[S13]

Many identified health needs are addressed by Memorial Hospital physicians and providers at the time of related patient visits. Percentages in parentheses below indicate the percentage from the previous Sandusky County Community Health Needs Assessment. Key findings that were identified in the 2013-2014 Sandusky County Health Needs Assessment include (*indicates Memorial Hospital has, or participates in, programs addressing these issues; Ohio and U.S. comparison data are from 2011 and 2012^[S14] unless indicated):

- Health Care Coverage*
 - o 50% (49% - previous survey data) of adults rated their health status as excellent or very good
 - o 16% (14%) of adults were without health care coverage
- Arthritis*
 - o 38% (34%) of adults were diagnosed with arthritis vs. 30% in Ohio and 26% in the U.S.
- Diabetes*
 - o 14% (10%) of adults report having been diagnosed with diabetes (*not a top five leading cause of death in the county) vs. 13% in Ohio and 11% in U.S.
- Cardiovascular Health*
 - o 5% (4%) of adults reported having a heart attack – the 1st leading cause of death in the county – vs. 5% in Ohio and 5% in U.S.
 - o 3% (4%) of adults reported having a stroke – the 3rd leading cause of death in the county – vs. 3% in Ohio and 3% in the U.S.
 - o 31% (34%) of adults reported having been diagnosed with high blood pressure
 - o 3% (4%) of adults reported having been diagnosed with high cholesterol
- Alcohol and Drug Use*
 - o 22% (21%) of adults were binge drinkers vs. 18% in Ohio and 17% in the U.S.
 - o 7% (5%) of adults misused prescription drugs in the past 6 months
- Tobacco Use*
 - o 19% (19%) of adults were current smokers
- Cancer*
 - o 18% of adults had been diagnosed with cancer at some time in their life - cancer was the 2nd leading cause of death in the county; lung cancer was the leading cause of cancer deaths for males and females (2003-2008)
- Women's Health/Pregnancy*
 - o 68% (68%) of women over the age of 40 reported having a mammogram in the past two years vs. 74% in Ohio and 74% in the U.S.
 - o 66% (68%) of women ages 40 and over have had a clinical breast exam in the past two years vs. 75% in Ohio and 77% in the U.S.
 - o 67% (66%) of women have had a Pap smear in the past three years vs. 78% in Ohio and 78% in the U.S.
- Men's Health*
 - o 20% of Sandusky County men had been taught by a healthcare professional how to do a self-testicular exam, increasing to 50% of those under the age of 30.
 - o 26% of men had done a self-testicular exam in the past year, increasing to 41% of those over the age of 65.
- Preventive Medicine*
 - o 76% of adults ages 65 and older had a flu vaccine in the past year
 - o 52% (66%) of adults ages 65 and over had a pneumonia vaccination at some time in their life
- Obesity*
 - o 35% (35%) of adults were obese based on BMI vs. 30% in Ohio and 28% in the U.S.

- Mental Health*
 - o 6% (2%) of adults considered attempting suicide in the past year
- Oral Health
 - o 62% (62%) of adults had visited a dentist in the past year vs. 68% in Ohio and 67% of U.S.
- Youth Weight *
 - o 13% (14%) of 9th-12th grade youth were obese, according to BMI vs. 15% in Ohio and 13% in the U.S.
 - o 79% (84%) of 9th-12th grade youth ate 1 to 4 servings of fruits and vegetables per day vs. 85%* in Ohio and 78%* in the U.S.
 - o 43% (38%) of 9th-12th grade youth were physically active at least 60 minutes a day on less than 5 days in the past week vs., 55% in Ohio and 51% in the U.S.
 - o 27% (41%) of 9th-12th grade youth watched TV for 3 or more hours per day vs. 31% in Ohio and 32% in the U.S.
- Youth Mental Health*
 - o 49% (51%) of 9th-12th grade youth stated they were bullied in the past year
 - o 13% (11%) of 9th-12th grade youth had made a plan to attempt suicide in the past year
 - o 8% (6%) attempted suicide in the past year vs. 9% in Ohio and 8% in the U.S.
- Youth Tobacco Use
 - o 16% (20%) of 9th-12th grade youth were current smokers
- Youth Alcohol and Drug Use*
 - o 27% (38%) of 9th-12th grade youth used alcohol in the past month vs. 38% in Ohio and 27% in the U.S.
 - o 19% (24%) of 9th-12th grade youth binge drank alcohol in the past month vs. 24% in Ohio and 22% in the U.S.
 - o 11% (23%) of 9th-12th grade youth used marijuana in the past month vs. 24% in Ohio and 23% in the U.S.
 - o 11% (19%) 9th-12th grade youth used prescription drugs in order to get high or feel good in their lifetime
- Youth Sexual Behavior*
 - o 36% (47%) of 9th-12th grade youth have had sexual intercourse vs. 45%* in Ohio and 47% in the U.S.
 - o 23% (15%) had four or more sexual partners vs. 18% in Ohio and 23% in the U.S.
- o Child Health (ages 0-11)
 - o 3% of parents reported their 0-11 year old did not have health insurance
 - o 12% of parents reported they received benefits from the SNAP/food stamps program
 - o 3% of parents reported their child went to bed hungry at least one day per week because they did not have enough food and 1% reported that their child went to bed hungry every night
 - o 23% of parents reported they had taken their child to the hospital emergency room in the past year increasing to 36% of parents with incomes less than \$25,000

- o 15% of those parents who reported taking their child to the emergency room reported it was because of an accident, injury or poisoning
- o 28% of children had been injured and required medical attention in the past year
- o 6% of children received mental health care or counseling
- o 79% of parents had taken their child to the doctor for preventive care in the past year vs. 94% of 0-5 year old and 86% of 6-11 year old Ohio children
- o 15% of parents reported that they read to their child every day
- o 97% of parents reported their neighborhood was always or usually safe
- o 24% of parents reported someone smoked in their home
- o 1% of parents reported there was an unlocked and loaded firearm in their home.
- o 76% of children had been to the dentist in the past year, increasing to 91% of 6-11 year olds
- o 10% of parents did not know if their child had been tested for lead
- o 14% of parents reported their child had an asthma attack in the past year. Children who lived with a smoker were equally as like to be diagnosed with asthma as those children who did not live with a smoker (14%).
- o 22% of children were classified as obese by Body Mass Index (BMI) calculations. 12% of children were classified as overweight, 58% were normal weight, and 8% were underweight
- o 84% of parents reported their child was physically active for at least 20 minutes that caused them to sweat or breathe hard on 3 or more days in the past week. 54% had done so 5 or more days
- o Sandusky County children spent an average of 2.3 hours watching TV, 0.8 hours on the computer, 0.7 hours playing video games, and 0.3 hours on a cell phone on an average day of the week

Each of the health needs identified in the Sandusky County strategic community health improvement plan listed below in Table 2 is important, with most issues being addressed by the community as a whole, and with Memorial Hospital being a key player, as indicated. Key health issues identified in the Sandusky County Health Plan, and the organizations providing programming to improve these health issues include:

Table 2 - 2014 Sandusky County CHIP Strategic Plan Priorities	Coalition or Organizations Addressing Issue
Priority 1- Obesity/Wellness	
• Increase the number of schools that provide the My Plate education	• Sandusky County Health Department • Sandusky County Schools • Memorial Hospital
• Increase community members' involvement in community gardens	• Sandusky County Commissioners • OSU Extension • Memorial Hospital
• Create a coordinated Sandusky	• City of Fremont

County Weight Loss Challenge.	- Sandusky County YMCA - The Bellevue Hospital
Increase participation at local farmers markets and produce stands.	- City of Fremont - Downtown Business Association
Create a county-wide incentive program for families and children to participate in county wellness activities	- City of Fremont - Sandusky County YMCA
Priority 2 – Reduce Risky Behaviors among Youth, Targeting Prescription Drug Abuse and Misuse	
Train and register Sandusky County Physicians and Pharmacists on the importance of using OARRS.	- Memorial Hospital - Prevention Partnership Coalition
Conduct Asset Development programs to increase protective factors in youth	Prevention Partnership Coalition
Support evidence based substance abuse prevention programs.	- Fremont City Schools - Fremont Police Department
Priority 3 – Mental Health & Wellness	
Assure community leaders recognize mental health issues as a significant priority worthy of effective response.	Mental Health and Recovery Services Board
Acquire additional data.	- Sandusky County Health Department - Sandusky Health Partners
Research funding to support mental health.	Mental Health and Recovery Services Board
Priority 4 – Maternal & Infant Health	
Increase 1st trimester and pre-conception care through a holistic approach	- Sandusky County Health Department - Sandusky Health Partners
Reduce infant mortality in Sandusky County	- Sandusky County Health Department - Sandusky Health Partners - Memorial Hospital - Bellevue Hospital
Implement formalized breastfeeding policies for employers	- Mental Health and Recovery Services Board - Memorial Hospital (through ProMedica corporate wellness programs)

Memorial Hospital's participation with organizations addressing these county health priority issues, that may include financial support, is noted above. Note: other hospitals or organizations within the county may also have programs to specifically address some of these health issues that may not be specifically included in these collaborative priority actions.

SANDUSKY COUNTY – HEALTH ISSUES FOR UNINSURED, LOW INCOME AND MINORITY POPULATIONS

The 2013-2014 county health assessment data has identified that 16% of Sandusky County adults were without health care coverage. Those most likely to be uninsured were adults under age 30 and those with an income level under \$25,000. In Sandusky County, 14.3% of residents live below the poverty level (Source U.S. Census, 2009-2013). Although the number of minority individuals included in the survey does not allow for valid statistical analysis (n=38), in almost every category of the Sandusky County community health needs assessment, individuals with an income less than \$25,000 had poorer access than other income levels. In 2013, 84% Sandusky County adults had health care coverage, leaving 16% who were uninsured. The 2012 BRFSS reports uninsured prevalence rates for Ohio (15%) and the U.S. (17%). In the most recent assessment, 16% of adults were uninsured, increasing to 33% of those under the age of 30 and 37% of those with incomes less than \$25,000.

The below table shows health comparisons for low income persons, compared to the county statistics, as a whole.

Table 3 Health Issue	Low Income (<\$25,000)	Sandusky County 2013
Rate health as fair/poor	33%	16%
Overweight by BMI	13%	29%
Obese by BMI	40%	35%
Binge Drank in Past Month	41%	43%
Uninsured	37%	16%
Two or more weeks in a row when felt depressed	29%	15%
Current Smoker	27%	19%
Used marijuana in the past 6 months	8%	7%
Diagnosed with High Blood Pressure	30%	31%
Diagnosed with High Blood Cholesterol	24%	35%
Diagnosed with Diabetes	9%	10%

More than one sexual partner	36%	59%
Diagnosed with Cancer	N/A	18%
Visited a dentist in the past year	45%	62%
Adult medication misuse	12%	7%
Adults limited in some way	63%	45%

Due to the relatively small percentage of non-white population in Sandusky County (African American - 3.3% (2.8% - in previous county survey), Hispanic – 8.8% (8.9%), Asian – .3% (.3%) and two or more races – 2.5% (2.6%), and the small number of minorities responding to the surveys (n=38) - 2.7% African American and 4.1% Hispanic respondents - this did not allow for specific generalizations for minority populations. Continued focus will be placed on low income, uninsured and underinsured populations for planning purposes, to include the highest at risk populations.

The Sandusky County CHIP committee concluded that key leadership in Sandusky County are aware of the links between economic stability and health status and that progress toward decreasing the rates of the leading chronic health conditions and persistent health disparities can be made by addressing the economic status of Sandusky County residents.

SANDUSKY COUNTY – INFORMATION GAPS

Through the Sandusky County Community Health Improvement Planning (CHIP) Committee resources were collectively compiled to provide a complete listing of resources in the county for each area of the county plan. Each Sandusky County CHIP subcommittee discussed potential gaps in information and service while creating an action plan to address the health issues identified, focusing on evidence based programming, when possible.

It should be noted that one gap includes statistical generalizations for minority populations due, in part, to the relatively low number of minorities in the county and the low number of minority responses to the survey (n=38). Each action plan will consider the impact on low income and underserved populations.

Although the formal county assessment provided sufficient primary data, some secondary and public health data is outdated (2010-2011) and therefore leaves gaps in measurement about the recent impact of community activities on key health indicators since that time.

VI. MEMORIAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT

PROCESS

Following the Sandusky County strategic planning process in 2013, Memorial Hospital leadership convened a CHNA committee to thoroughly review the county assessment data, review the Sandusky Health Partners County Health Plan, prioritize key health indicators specific to their demographic, review available resources and gaps in resources, and develop implementation plans to address the specific needs of the population.

Prioritization of health needs in its community was accomplished through ranking methodology by the Memorial Hospital CHNA committee that included: Memorial Hospital's Vice President of Operations, Clinical Dietitian, Director of the Center for Mental Health and Well-being, and Director of Volunteer Services.

The Memorial Hospital CHNA committee developed the hospital CHNA, in conjunction with the Sandusky County Strategic Planning process, through the following steps.

- Review of existing Sandusky County primary and secondary data sources;
- Review of Sandusky County Health Partners Plan;
- Discussion and ranking of priority health issues for Memorial Hospital;
- Identification of current community resources which address the priority health issues;
- Definition of gaps in county-level services and programming;
- Research of effective programs, policies, and strategies to recommend for future implementations; and
- Identification of specific implementation actions steps for the next year (2016).

Along with state and U.S. data comparisons, key secondary health data considered for the hospital CHNA came from the Ohio Department of Health top leading causes of death:

COUNTY	HEART DISEASE		CANCER		CHRONIC LOWER RESPIRATORY DISEASE		STROKE		UNINTENTIONAL INJURY (ACCIDENT)		ALZHEIMER'S DISEASE	
	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE
OHIO	26,072	191.7	25,030	187.3	6,705	50.4	5,735	42.4	5,030	41.6	4,105	29.7
SANDUSKY	144	182.7	151	198.2	40	50.4	25	31.6	34	52.3	23	29.5

Although some specific areas of the Sandusky County CHIP strategic plan were not included as part of the Memorial Hospital CHNA strategic plan, Memorial Hospital participates in many areas of the county plan as indicated in Table 2, through various community health coalitions and initiatives, and Memorial Hospital focused on other areas of need, as discussed below.

VII. MEMORIAL HOSPITAL COMMUNITY HEALTH NEEDS & PRIORITIES

As indicated in Table 2, Memorial Hospital is actively involved in many priority health areas identified in the Sandusky County strategic plan. However, following a review and discussion of health data and the county priorities, as well as organizational and community programs to address these county priority areas, Memorial Hospital CHNA committee decided to continue addressing the priorities addressed in the previous CHNA. This plan and priorities were reviewed with community members who are also hospital volunteers, as they often hear feedback from the patients they interact with. In addition, the final priorities were shared with Bethany Brown, current Health Commissioner of Sandusky County Health Department, and Cathy Glassford, Director of Sandusky County Family and Children First Council and Coordinator of Health Partners, who concurred with the priorities and order proposed. The following health priorities are ranked in a revised order of importance from the previous CHNA, and prioritized through ranking methodology by CHNA committee members:

1. Cancer – access, education and screening

Improve access to cancer treatment and provide early detection education by increasing community awareness regarding the importance of specific cancer screenings.

- 18% of adults were diagnosed with cancer at some point of their lives
- 19% (previous survey - 19%) of adults were current smokers – 17% of adult males and 20% of adult females
- 68% (68%) of women over the age of 40 reported having a mammogram in the past two years
- 66% (68%) of women ages 40 and over have had a clinical breast exam in the past two years
- 67% (66%) of women have had a Pap smear in the past three years
- 20% of Sandusky County men had been taught by a healthcare professional how to do a self-testicular exam, increasing to 50% of those under the age of 30.
- 26% of men had done a self-testicular exam in the past year, increasing to 41% of those over the age of 65.
- 51% (44%) of adults have been screened for colorectal cancer in the past five years
- Many Sandusky County members diagnosed with cancer leave the county to seek treatment

2. Risky Behavior in Youth – teen pregnancy and sexually transmitted diseases

Provide education regarding teen pregnancy and sexually transmitted diseases.

- 36% (47%) of 9th-12th grade youth have had sexual intercourse
- 23% (15%) of 9th-12th grade youth have had four or more sexual partners

3. Obesity

Provide healthy food options and exercise benefits to community members.

- 35% (35%) of adults were obese based on BMI vs. 30% in Ohio and 28% in the U.S.
- 13% (14%) of 9th-12th grade youth were obese, according to BMI.
- 79% (84%) of 9th-12th grade youth ate 1 to 4 servings of fruits and vegetables per day
- 43% (38%) of 9th-12th grade youth were physically active for at least 60 minutes a day on less than 5 days in the past week
- 27% (41%) of 9th-12th grade youth watched TV for 3 or more hours per day

4. Mental Health – depression screenings and suicide

Increase screening and detection of depression and suicidal ideation in Sandusky County.

- 6% (2%) of adults considered attempting suicide in the past year
- 15% (9%) of Sandusky County adults had a period of two or more weeks when they felt so sad or hopeless nearly every day that they stopped doing usual activities
- 13% (11%) of youth made a plan how they would commit suicide in the past year
- 8% (6%) of youth attempted suicide in the past year

Through these priorities Memorial Hospital is directly addressing one of the top five leading causes of death in Sandusky County, cancer, and indirectly addressing two more leading causes of death, heart disease and stroke, through the obesity priority. With health improvements achieved in some areas of the previous community health needs assessment survey, as shown in the statistics above, priority focus will shift slightly to address access to cancer services and education through the opening of a new community based cancer center, continued focus on youth sexual behavior, a continued focus on obesity because of its far reaching effects, and a focus on suicide within mental health.

Please note that all four of the hospital priority areas are a continuation of the previous Memorial Hospital CHNA conducted in 2013, with a change in the order of prioritization of the issues, and a slightly different focus within each priority.

Two of the top five leading causes of death in the Sandusky County that are not being addressed specifically by Memorial Hospital in its CHNA strategic plan include Chronic Lower Respiratory Disease and Alzheimer's Disease. To address lung disease, Memorial Hospital screens all patients for smoking and refers all patients who smoke to local smoking cessation programs. Memorial Hospital is inadvertently addressing the issue of Alzheimer's Disease through promoting health eating habits, as the Alzheimer's Association reports that there is emerging evidence that suggests that consuming a diet that benefits the heart, such as one that is low in saturated fats and rich in vegetables and vegetable-based oils, may be associated with reduced Alzheimer's and dementia risk. In addition, the Memorial Hospital's Center for Mental Health and Well-being also addressing the outpatient needs of families and patients who are dealing with memory problems. The Alzheimer's Association hosts monthly support groups and various caregiver education series at Memorial Hospital. Local physicians are also addressing Alzheimer's disease issues on a daily basis and long-term care facilities are available for additional care for patients.

Memorial Hospital is represented and is participating in the execution of the community-wide community benefit plan by working with Sandusky Health Partners, organizations and coalitions in our community who are addressing prioritized issues.

VIII. MEMORIAL HOSPITAL – NEEDS, GAPS, AND RESOURCE ASSESSMENT

Memorial Hospital did not **address all of the needs identified in the most recently conducted Sandusky County Health Needs Assessment** as these areas either go beyond the scope of the hospital or are being addressed by, or with, other organizations in the community. To some extent, resource restrictions do not allow the hospital to address all of the needs identified through the health assessment, but most importantly, to prevent duplication of efforts and

inefficient use of resources, as many of these issues are addressed by other community organizations and coalitions in collaboration.

Table 2 indicates the community wide organizations and coalitions addressing the prioritized Sandusky County Health Partners strategic plan, and Memorial Hospital participates with many of these organizations and coalitions through representation and/or funding, also indicated in Table 2. The following areas of the CHNA do not have specific programs identified to address some issues, but these health issues are often addressed at physician visits, or by schools, law enforcement and other agencies in the community: health status perceptions, health care coverage, cardiovascular health, diabetes, arthritis, asthma, tobacco use, alcohol consumption, marijuana and other drug use, women's health, men's health, preventive medicine, adult sexual behavior and pregnancy, quality of life, social issues, oral health, youth safety and violence, early childhood health, middle childhood health, family functioning/neighborhoods or parent health.

IX. MEMORIAL HOSPITAL - IMPLEMENTATION STRATEGY SUMMARY

Following the finalization of the Sandusky County Health Partners strategic community health improvement plan (CHIP), Memorial Hospital commenced with its CHNA strategic planning process, whereby it analyzed and discussed available data, selected and prioritized focus areas for the hospital CHNA plan, reviewed resources and gaps in resources, and developed hospital-based strategic action plans, taking into consideration the Sandusky County CHIP, as well as areas not addressed by the CHIP or by other community groups. No feedback was received on the previous CHNA posted on the ProMedica website. Following this process, Memorial Hospital identified the following health priorities (in order of importance, prioritized through ranking methodology):

1. Cancer – access, education and screening
2. Risky Behavior in Youth – teen pregnancy and sexually transmitted diseases
3. Obesity

4. Mental Health – depression screenings and suicide

Feedback to these priorities was provided by Cathy Glassford, Sandusky Health Partners, Bethany Brown, Sandusky Health Department health commissioner, and a focus group of hospital volunteers. The Board of Directors of Memorial Hospital approved the CHNA plan and implementation strategy on December 1, 2015. The execution of the Memorial Hospital implementation plans will be initiated in 2016 with, at least, annual updates of these plans provided to Memorial Hospital leadership, as well as the Memorial Hospital board of trustees.

Community benefits are taken into consideration in the hospital budgeting process - and the budget inherently includes funding for community programs included in the CHNA strategic implementation plan – which is approved by the hospital Board of Trustees, and monitored and reported quarterly to hospital leadership.

As part of the annual strategic planning and budgeting process, the adoption of a budget for provision of services that address the needs identified in the needs assessment is inherent in the hospital budget and approved by the Memorial Hospital Board of Trustees.

X. ACCESS TO MEMORIAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT AND OTHER RESOURCES

Memorial Hospital community health needs assessment is widely available in printable (pdf) form to the public on the hospital website at: <https://www.promedica.org/Pages/about-us/default.aspx>. Additional regional county health needs assessments may be found on the following website of the Hospital Council of Northwest Ohio: <http://www.hcno.org/community/reports.html>. To provide feedback or for any questions related to the Memorial Hospital community health needs assessment and strategic plan, or to request a hard copy of the assessment, please email cometothetable@promedica.org or call 419-291-3353.