

PROMEDICA BAY PARK HOSPITAL

2013 COMMUNITY HEALTH NEEDS ASSESSMENT



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COMMUNITY HEALTH NEEDS ASSESSMENT - 2013

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I. INTRODUCTION

ProMedica Bay Park Hospital (BPH), a member of ProMedica health system, is a committed healthcare resource in the northwest Ohio community, providing acute inpatient care to medical, surgical, adult intensive care, obstetric and newborn patients, and emergency services which includes an accredited Chest Pain Center, regardless of ability to pay. BPH's mission is to improve the health and well-being of the communities we serve.

ProMedica Bay Park Hospital conducted and adopted the current community health needs assessment (CHNA) in 2013. BPH was represented as a member of ProMedica in the 2011/2012 Lucas County Needs Assessment process, which is the first Lucas County CHNA that included child, adolescent and adult data. One area of weakness of the CHNA was the relative age of available secondary and public health data. Following the formal county assessment survey process, multiple community organizations collaborated to develop a strategic plan for Lucas County, with BPH represented on these community strategic planning groups, as a member of ProMedica. A resource assessment was compiled as part of this process.

Following the Lucas County strategic planning process, BPH convened a CHNA committee in 2012-13 to review Lucas, Ottawa and Wood county plans and available health data, select and prioritize key indicators for their defined community, identify resources and gaps in these areas, and develop implementation plans to address these health issues in the community over the next three years. Strategic plans were developed with feedback from key community stakeholders, to confirm these needs from a community perspective.

ProMedica Bay Park Hospital will specifically implement programs to address the following health needs, listed in order of priority:

- Obesity/Nutrition
- Heart Disease
- Cancer
- Tobacco Use
- Mental Health/Bullying

In addition, as part of ProMedica health system, some community health programs are developed and implemented at the system level, with tobacco use, obesity/hunger and mental health/bullying identified as the focal points for 2013. The hospital expanded the resource assessment developed at the county levels to evaluate any gaps in services to address key health issues. The full ProMedica Bay Park Hospital CHNA may be accessed at www.promedica.org/chna

II. PROMEDICA BAY PARK HOSPITAL COMMUNITY SERVICE AREA

The definition of the community served by ProMedica Bay Park Hospital for the community health assessment was those residents residing in Lucas, Ottawa and Wood County, Ohio. Data indicates 57.3% of our inpatients reside in Lucas County, 13.4% in Ottawa County and 24.4% in Wood County. The BPH health assessment plan addresses only these three counties identified as serving the majority of our patients. BPH is one of nine acute care hospitals serving the Toledo metro area and one of 11 acute care hospitals serving the three county service area (see Table 1 below) - sharing the individual community efforts within the three focus counties with hospitals located in each area. BPH provides acute emergency services, medical and surgical inpatient and outpatient services. For purposes of this plan, the health statistics and factors for Lucas, Ottawa and Wood Counties were reviewed and used in completing this community health assessment.

Demographic review of our three county community shows Lucas, Ottawa and Wood County, Ohio, is home to 608,731 residents. In Lucas County, 13.4% of residents are over the age of 65 and 23.7% are under 18. Ottawa County reports 19.5% are over the age of 65 and 20.3% are under 18. In Wood County, 12.5% are over the age of 65 and 21.3% are under 18 years of age. (Source: Census, 2010) The mean household three county combined income in Lucas, Ottawa and Wood Counties (in 2010 inflation-adjusted dollars) is \$46,417. Fourteen percent of all targeted residents and thirteen percent of our families had an income below the poverty level in 2010. (Source: Census, 2010) Thirteen percent of our three county focused communities are uninsured. The majority (76%) of the population in Lucas County were Caucasian. African American (19%), Hispanic (6%), Asian (2%) and two or more races (3%) comprise the rest of the population. The population in Ottawa County was 97% Caucasian; 1% African American; 4% Hispanic and 1% reporting two or more races. In Wood County, the population was 94% Caucasian; 3% African American; 5% Hispanic and 2% reporting two or more races. Demographics for other area counties may be found at <http://hcno.org/community/reports.html>,

Existing health care facilities and resources within the community that are available to respond to the health needs of the community are listed in Table 1 below. Due to the presence of other hospital entities in each of the three counties, BPH focuses most of its community health efforts within eastern Lucas, northern Wood and western Ottawa County areas.

Table 1: Hospitals Serving the Three County Service Area	
ProMedica Bay Park Hospital	Oregon , OH (Lucas)
ProMedica Toledo Hospital	Toledo, OH (Lucas)
ProMedica Toledo Children's Hospital	Toledo, OH (Lucas)
ProMedica Flower Hospital	Sylvania, OH (Lucas)
ProMedica St. Luke's Hospital	Maumee, OH (Lucas)
Mercy St. Charles Hospital	Oregon, OH (Lucas)
Mercy St. Vincent Medical Center	Toledo, OH (Lucas)
Mercy St. Anne's Hospital	Toledo, OH (Lucas)
University of Toledo Medical Center	Toledo, OH (Lucas)
Wood County Hospital	Bowling Green, OH (Wood)
Magruder Hospital	Port Clinton, OH (Ottawa)

ProMedica Bay Park also collaborates with other entities to address issues in our service area. Community organizations in Lucas County who participated in the health assessment and strategic planning process include, but are not limited to: American Cancer Society, Exchange Club, Family & Children First Council, local pediatricians, Lucas County Educational Service Center, Lucas County Help Me Grow, Lucas County Juvenile Court, Mental Health and Recovery Services Board of Lucas County, Mercy Health Partners, Parish Nurse Association, Toledo Community Foundation, Toledo-Lucas County Health Department, Toledo Public School Board (Member), Toledo Public School Nurses, United Way of Greater Toledo, University of Toledo/University of Toledo Medical Center, and YWCA (Childcare).

III. COMMUNITY HEALTH NEEDS ASSESSMENTS

The ProMedica Bay Park Hospital **process for identifying and prioritizing community health needs and services included:**

- Lucas, Ottawa and Wood County Health Needs Assessments
- Lucas County Strategic Planning processes, workgroups and final strategic plans – Ottawa and Wood County have not completed their strategic planning processes at the time of this document and are projected to complete them in the fall of 2013
- ProMedica Bay Park Hospital's CHNA process and targeted implementation plans

The health areas that were examined by the formal county needs assessment survey include, but are not limited to: health status, health care coverage, health care access, cardiovascular health, cancer, diabetes, asthma, arthritis, weight control, tobacco use, alcohol use, substance abuse, women's health, men's health, mental health, preventive screenings and immunizations, sexual behavior, perceived quality of life, youth safety, youth violence, youth perceptions, oral health, early childhood (0-5 years) issues, middle childhood (6-11 years) issues, family functioning, neighborhood and community characteristics, and parental health.

LUCAS, OTTAWA AND WOOD COUNTY'S HEALTH NEEDS ASSESSMENT PROCESSES

ProMedica Bay Park Hospital utilized the data provided in the Community Health Needs Assessments from Lucas, Ottawa and Wood Counties as the basis for their community health needs assessment. To begin the formal county assessment process, the Hospital Council of Northwest Ohio Data Division, in conjunction with the University of Toledo Health and Human Services Department, conducted the formal county health assessments utilizing the following methodology (refer to pages 9-11 for a full listing of collaborating organizations).

Adult Survey

Adults ages 19 and over living in Lucas, Ottawa and Wood Counties 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 the three county areas to be 465,828 persons. The investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level with a corresponding confidence interval 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 380 adults from Lucas and Ottawa counties, and 383 from Wood County, was needed to ensure this level of confidence. The random sample of mailing addresses of adults from Lucas, Ottawa and Wood Counties was obtained from American Clearinghouse in Louisville, KY.

Prior to mailing the survey to adults, an advance letter was mailed to 2,400 adults in Lucas County: 800 to the general population, 800 to African Americans, and 800 to Hispanics. In both Ottawa and Wood County an advance letter was mailed to 1,000 adults chosen at random. This advance letter was personalized, printed on respective county health department stationery and were all signed by the respective County Health Department Health Commissioners. 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.

Two 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 respective county stationery describing the purpose of the study; a questionnaire printed on colored paper; a self-addressed stamped return envelope; and a \$2 incentive. Approximately two 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 two weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.

Response rates for the entire mailing, including all three groups were as follows: Lucas County: 48% (n=1,068); Wood County: 37% (n=360); and Ottawa County 51% (n=499). This return rate and sample size means that the responses in the health assessment should be representative of the entire three county areas.

Adolescent Survey

The Project Coordinator met with all school district superintendents and obtained approval for the survey. 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 for the 83 multiple choice response format question survey in Lucas County was 95% (n=2,310); Wood County 73 multiple choice response format questions was 97% (n=452); and Ottawa County 75 multiple choice response format questions was 51% (n=499).

Children 0-5 and 6-11 Survey

Children ages 0-11 residing in the three counties were used as the sampling frames for the surveys. Using U.S. Census Bureau data on the population of children ages 0-11, living in Lucas and Wood Counties, it was determined that 43,778 children age 0-5 and 43,561 children ages 6-11 reside in Lucas and Wood Counties. The investigators conducted a power analysis based on a post-hoc distribution of variation in responses (70/30 split) to determine what sample size was needed to ensure a 95% confidence level with corresponding confidence interval of 5% (i.e., we can be 95% sure that the “true” population responses are within a 5% margin of error). Because many of the items were identical between the 0-5 and 6-11 surveys, these items were combined to analyze data for children 0-11. The sample size required to generalize to children ages 0-11 was 381. The random sample of mailing addresses of parents of children 0-11 from Lucas and Wood County was obtained from American Clearinghouse in Louisville, KY. A pool of adults was selected based off a number of sources which included birth records, education records, direct response data, etc. This sampling data was not available for the Ottawa County population.

Prior to mailing the survey to parents of 0-11 year olds, an advance letter was mailed to 1,600 parents in both Lucas and Wood County. Data is not available as to whether this mailing occurred in Ottawa County. The advance letter was personalized, printed on respective County stationery and signed by the respective county Health Commissioner. 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.

Two 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 Healthy Lucas or Wood County stationery) describing the purpose of the study; a questionnaire printed on colored paper; a self-addressed stamped return envelope; and a \$2 incentive. Approximately two 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 two weeks after the second wave mailing. Surveys returned as undeliverable were not replaced with another potential respondent.

Because much of the output combined identical items from the 0-5 and the 6-11 surveys, the number of returned surveys needed for power of the combined samples (Lucas County, n=69,902) was 381. This was exceeded by having a combined 480 surveys. In Wood County (n=17,437) the number of returned surveys needed was 370 and this was exceeded by having a combined 515 surveys. As stated previously, this data was not available for Ottawa County.

Individual responses were anonymous and confidential. Only group data are available. All data were analyzed by health education researchers at the University of Toledo using SPSS17.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of the three counties, 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.

CONSULTING ORGANIZATIONS

The process for consulting with persons representing the community's interests and public health expertise began when local community agencies were invited to participate in the county wide health assessment process, including choosing questions for the surveys, providing local data, reviewing draft reports and planning the community event, release of the data and setting priorities. The needs of the population, especially those who are medically underserved, low-income, minority populations and populations with chronic disease needs were taken into account through the sample methodology that surveyed these populations and over-sampled minority populations.

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 Lucas, Ottawa and Wood Counties 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, as well as the 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 committees from Lucas, Ottawa and Wood Counties. In addition, ProMedica Bay Park Hospital leaders met with representatives from the Hospital's Foundation board to obtain local feedback.

During these meetings, banks of potential survey questions from the Behavioral Risk Factor Surveillance, Youth Risk Behavior Surveillance, and National Survey of Children's Health surveys were reviewed and discussed. Based on input from the county planning committee, the Project Coordinator composed drafts of surveys containing: for Lucas County - 109 items for the adult survey, 83 items for the adolescent survey, 76 items for the 0-5 survey, and 83 items for the 6-11 survey; for Ottawa County - 114 items for the adult survey and 75 items for the adolescent survey; and for Wood County - 112 items for the adult survey, 73 items for the adolescent survey, 71 items for the 0-5 survey, and 79 items for the 6-11 survey. The drafts were reviewed and approved by health researchers at the University of Toledo.

The needs of the population, especially those who are medically underserved, low-income, minority populations and populations with chronic disease needs were taken into account through the sample methodology that surveyed these populations and over-sampled minority

populations. In addition, the organizations that serve these populations participated in the health assessment and community planning process, such as Toledo-Lucas County CareNet, Toledo-Lucas County Commission on Minority Health, United Way of Greater Toledo, etc.

Consulting organizations from Lucas County included (a PH after the name indicates they work in the Public Health field):

Healthy Lucas County

Mercy Health Care (PH)

ProMedica (PH)

Toledo-Lucas County Health Department (PH)

Parish Nurse Association

University of Toledo (PH)

American Cancer Society (PH)

Hospital Council of NW Ohio (PH)

Bowling Green State University (PH)

Question Selection Committees:

Adult Survey

Mercy Health Care (PH)

ProMedica (PH)

Toledo-Lucas County Health Department (PH)

Parish Nurse Association

University of Toledo (PH)

American Cancer Society (PH)

Hospital Council of NW Ohio (PH)

Bowling Green State University (PH)

Youth Survey

Toledo-Lucas County Health Department (PH)

ProMedica (PH)

Bowling Green State University (PH)

Family & Children First Council (PH)

Mental Health & Recovery Services Board of Lucas County (PH)

Pediatrician (PH)

Lucas County Educational Service Center

Lucas County Juvenile Court

Toledo Public School Board Member

Toledo Public School Nurses (PH)

Toledo Community Foundation

University of Toledo (PH)

Child Survey

Toledo-Lucas County Health Department (PH)

ProMedica (PH)

Bowling Green State University (PH)

Lucas County Family & Children First Council (PH)
Mental Health & Recovery Services Board of Lucas County (PH)
Pediatrician (PH)
Lucas County Educational Service Center
Lucas County Juvenile Court
Lucas County Help Me Grow (PH)
Mercy (PH)
Exchange Club
Lucas County Job & Family Services (PH)
YWCA (Childcare) (PH)
Toledo Community Foundation
University of Toledo (PH)

Consulting organizations from Ottawa County included (a PH after the name indicates they work in the Public Health field):

Port Clinton City Schools
Ottawa County Probate Court
Magruder Hospital (PH)
United Way (PH)
Riverview Healthcare Campus – Senior Resources (PH)
Erie-Ottawa Mental Health and Recovery Board (PH)
Benton-Carroll-Salem Schools
Ottawa County Health Department (PH)
Ottawa County Dept. of Job & Family Services (PH)
Magruder Hospital (PH)
Ottawa County Health Department (PH)
Ottawa County Senior Resources (PH)
Ottawa County Health Department (PH)
Ottawa County Board of MR/DD (PH)

Consulting organizations from Wood County included (a PH after the name indicates they work in the Public Health field):

Wood County Health Department (PH)
Wood County Hospital
Behavioral Connections of Wood County
Bowling Green State University (PH)
Children's Resource Center
Congregational Nurse Project
National Association of Local Boards of Health (NALBOH) (PH)
Wood County Alcohol, Drug Addiction and Mental Health
Wood County Board of Developmental Disabilities
Wood County Board of Health (PH)
Wood County Committee on Aging
Wood County Dentist
Wood County District Advisory Council

Wood County Economic Development Commission
Wood County Educational Service Center
Wood County Family & Child Abuse Prevention
Wood County Job & Family Services
Wood County Juvenile Court
Wood County Park District
United Way of Wood County

ProMedica Bay Park Hospital conducted the Lucas County Needs Assessments with the following hospitals:

- Magruder Hospital
 - Mercy Children's Hospital
 - Mercy St. Anne Hospital
 - Mercy St. Charles Hospital
 - Mercy St. Vincent Medical Center
 - ProMedica St. Luke's Hospital
 - ProMedica Toledo Hospital
 - ProMedica Toledo Children's Hospital (operating as part of ProMedica Toledo Hospital)
 - University of Toledo Medical Center
 - Wood County Hospital
-
- There were over 100 key leaders from the community that represented public health, law enforcement, schools, churches, local officials, social service agencies and other various community members in attendance at the public release of the Lucas County community health needs assessment. At the Lucas County data release event, attendees participated in focus groups and priorities were chosen for Lucas County to focus on. Community participants were invited to join the Strategic Planning Process through the data surveillance work group, resource assessment work group or the gap analysis and strategic planning work group. A full list of Lucas County consulting persons and organizations are listed in the Lucas County Strategic Planning Process section below. (Note: Ottawa and Wood County have not completed their strategic planning processes at the time of this document and are projected to complete them in the fall of 2013.)

LUCAS COUNTY STRATEGIC PLANNING PROCESS

The Lucas County Strategic Planning Committee met six (6) times and the county strategic plan was approved by the Lucas County Strategic Planning Committee in July 2012. (Note: the strategic planning processes for Ottawa and Wood County were not complete at the time of this document.)

Following the community assessment data release in February, 2012, Healthy Lucas County began a strategic planning process which was conducted by three community workgroups; Data Surveillance, Resource Assessment and Gap Analysis, and Strategic Planning.

The Healthy Lucas County Data Surveillance Workgroup met in March and early April 2012 to review the results of the 2011 Lucas County Health Assessment Project for three specific population groups; adults (ages 19-75 years), youth (grades 6-12), and children (ages 0-5 and 6-11 years). The purpose of the Data Surveillance workgroup was to thoroughly review the 2011 health assessment project data and other sources of information to determine important priority health issues.

The Resource Assessment and Gap Analysis workgroup used an online survey tool to gather information about current Lucas County resources and services which address one or more of the priority health issues identified. They summarized and examined the data collected to determine gaps in current services by age, geographic location, and other criteria. In addition, the participants shared information about current gaps and emerging needs concerning the health of Lucas County residents and current and future programs and services to address these needs based on their personal and agency experiences.

The final work group, Strategic Planning met in May and June 2012 to outline a three-year strategic plan which addresses the priority areas, recommends research-based strategies and interventions, identifies outcome measurements to monitor progress over time, and identifies evaluation strategies to measure if the measures implemented are effective. The Lucas County Strategic Planning workgroup concluded this process by reviewing each of the health issues previously identified, to determine the priority challenges to work to address over the next three years based on: the number of persons affected, the resources needed to begin to have a positive impact on the problems, and the overall strategies necessary to work collaboratively.

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

University of Toledo
YMCA/Live Well Toledo (PH)
Toledo Public School Nurses (PH)
University of Toledo (PH)
Mercy Health Partners (PH)
ProMedica (PH)
Lucas County Educational Service Center
Toledo-Lucas County Health Dept. (PH)
Lucas County Family Council (PH)
Northwest Ohio Congregational Nurse Association (PH)
Family & Children First Council (PH)
Mental Health Recovery and Services Board of Lucas County (PH)
Tobacco Program Coordinator, Toledo-Lucas County Health Department (PH)
Toledo Community Foundation
Mercy Children's Hospital
American Cancer Society (PH)
YWCA

Ohio Department of Health
Community Consumer
Home Visiting & Training Coordinator, Lucas County (PH)
Mercy St. Vincent Medical Center (PH)
Grace Community Center
Juvenile Court Administrator, Lucas County
Job & Family Services, Lucas County
Pediatrician
Hospital Council of Northwest Ohio, Toledo-Lucas CareNet (PH)
ProMedica St. Luke's Hospital (PH)
United Way of Greater Toledo
Exchange Club
Toledo Public Schools
Bowling Green State University (PH)
*A (PH) after the organization's name indicates work in the public health field or public health education.

The Lucas County Strategic Plan for Health Improvement was written based on the conclusions and recommendations of a series of three work groups (Data Surveillance Workgroup, Resource Assessment and Gap Analysis Workgroup, & Strategic Planning Workgroup). The participants for the workgroups were as follows:

Data Surveillance Workgroup Participants

University of Toledo
Toledo-Lucas County Health Department
Mental Health Recovery and Services Board
ProMedica
Community Consumer
Help Me Grow, Lucas County Family Council
Grace Community Center
Lucas County Family Council
Hospital Council of Northwest Ohio, Toledo-Lucas CareNet
United Way of Greater Toledo
Bowling Green State University

Resource Assessment and Gap Analysis Workgroup Participants

Help Me Grow, Lucas County Family Council
American Cancer Society
Mercy St. Vincent Medical Center
ProMedica/St. Luke's Hospital

Strategic Planning Workgroup Participants

University of Toledo
YMCA/Live Well Toledo
Toledo-Lucas County Health Department

Lucas County Family Council
Mental Health Recovery and Services Board
Citizen Advocate
Mercy Children's Hospital
ProMedica
Ohio Department of Health
Grace Community Center
United Way of Greater Toledo

ProMedica Bay Park Hospital was represented in the development of the community-wide community benefit plan for Lucas County by ProMedica system staff. ProMedica Bay Park Hospital was not invited to participate in the Ottawa or Wood County Needs Assessment processes, but utilizes the county assessment data, available online, for planning purposes.

IV. LUCAS, OTTAWA AND WOOD COUNTY COMMUNITY HEALTH NEEDS & PRIORITIES

Many identified health needs are addressed by physicians at the time of related patient visits. Key findings that were identified in the Lucas, Ottawa and Wood County Health Needs Assessments include (*indicates ProMedica has, or participates in, community outreach programs addressing these issues):

- Health Care Access*
 - Adults were without health care coverage – 13% Lucas, 12% Ottawa, 15% Wood
- Cardiovascular Health*
 - Heart disease was one of the five leading causes of death in the 3 counties.
 - Adults diagnosed with high blood pressure – 34% Lucas, 40% Ottawa, 30% Wood
 - Adults diagnosed with high blood cholesterol – 27% Lucas, 38% Ottawa, 31% Wood
 - Adults having stroke in their lifetime – 2% Lucas, 1% Ottawa, n/a Wood
- Cancer*
 - Cancer was one of the five leading causes of death in the 3 counties.
- Diabetes*
 - Adults diagnosed with diabetes – 13% Lucas, 11% Ottawa, 8% Wood
- Arthritis*
 - Adults diagnoses with arthritis – 19% Lucas, 32% Ottawa, 27% Wood
- Asthma*
 - Adults diagnosed with asthma – 13% Lucas, 8% Ottawa, 13% Wood
- Obesity*
 - Adults who were obese based on BMI – 35% Lucas, 34% Ottawa, 30% Wood
- Tobacco Use*
 - Adults who were current smokers – 24% Lucas, 21% Ottawa, 11% Wood
- Alcohol and Drug Use*
 - Adults who were binge drinkers – 23% Lucas, 24% Ottawa, 24% Wood
- Women's Health*

- Women >40 reported having a mammogram in the past 2 years – 74% Lucas, 73% Ottawa, 82% Wood
- Women having a pap smear in the past 3 years – 72% Lucas, 68% Ottawa, 79% Wood
- Men's Health*
 - Men who had a PSA test in past 12 months – 26% Lucas, 27% Ottawa, 54% Wood
- Preventive Medicine*
 - Adults had a flu shot during the past 12 months – 37% Lucas, 42% Ottawa, 34% Wood
 - Adults 65+ who have had a pneumonia vaccine – 61% Lucas, 61% Ottawa, 64% Wood
- Adult Sexual Behavior
 - 70% of Lucas County adults had sexual intercourse; 6% of adults had more than one partner. Even though young people aged 15-24 represent only 25% of the sexually experienced population, they acquire nearly half of all STDs.
 - 69% of Ottawa County adults had sexual intercourse; 6% of adults had more than one partner. Even though young people aged 15-24 represent only 25% of the sexually experienced population, they acquire nearly half of all STDs.
 - 69% of Wood County adults had sexual intercourse; 5% of adults had more than one partner. Even though young people aged 15-24 represent only 25% of the sexually experienced population, they acquire nearly half of all STDs.
- Quality of Life
 - Adult limited in some way because of physical, mental or emotional problem – 38% Ottawa, 37% Wood (Lucas County did not ask this question)
- Social Issues*
 - 7% of Lucas County adults reported being abused in the past year; 13% sought assistance for food in the past year.
 - 4% of Ottawa County adults reported being threatened to be abused and 3% being abused in the past year; 8% sought assistance for food in the past year.
 - 3% of Wood County adults reported being threatened or abused in the past year; 2% sought assistance for food.
- Mental Health*
 - Adult felt sad/hopeless for 2+ weeks in a row – 19% Lucas, 22% Ottawa, 29% Wood
- Oral Health*
 - Adults who visited a dentist in the past year - 68% Lucas, 63% Ottawa, 74% Wood
- Minority Health* (Lucas County only)
 - 25% of African Americans did not have health care coverage. 17% of African Americans were diagnosed with diabetes; 44% with high blood pressure; 75% were either overweight or obese.
 - 45% Hispanic/Latino deaths from 2006-2008 were from cardiovascular diseases and cancer. 17% of Lucas County Hispanic adults were diagnosed with diabetes. 79% of Hispanic adults were obese or overweight.
- Youth Obesity* (Youth is defined as individuals in grades 7-12)
 - Youth who were obese, according to BMI – 14% Lucas, 16% Ottawa, 13% Wood
 - Youth who described themselves as overweight* - 24% Lucas, 26% Ottawa, 27% Wood
- Youth Tobacco Use*
 - Youth who were current smokers (past 30 days) – 13% Lucas, 15% Ottawa, 11% Wood
 - Youth who had used smokeless tobacco (past 30 days) – 8% Lucas, 7% Ottawa

- Youth Alcohol and Drug Use*
 - Youth who at least had one drink in the past 30 days – 29% Lucas, 30% Ottawa, 23% Wood
 - Youth reporting at least one episode of binge drinking in past 30 days – 16% Lucas, 14% Ottawa, 12% Wood
 - Youth who drove a car when drinking alcohol in the past 30 days – 6% Lucas, 1% Ottawa, 3% Wood
 - Youth had used marijuana at least once in the past 30 days – 19% Lucas, 9% Ottawa, 12% Wood
 - Youth who had ever used prescription drugs that were not prescribed for them – 11% Lucas, 14% Ottawa, 11% Wood
- Youth Sexual Behavior*
 - Youth who have had sexual intercourse - 41% Lucas, 32% Ottawa, 32% Wood
 - Youth who were sexually active who have had 4+ sexual partners - 27% Lucas, 8% Ottawa, 6% Wood
- Youth Mental Health*
 - Youth who felt sad or helpless almost every day for 2 or more weeks in a row – 22% Lucas, 24% Ottawa, 20% Wood
 - Youth who were bullied in past 12 months – 46% Lucas, 50% Ottawa, 42% Wood
 - Youth who seriously contemplated suicide in the past year – 14% Lucas, 10% Ottawa, 9% Wood
- Youth Safety and Violence*
 - Youth self-reported that they always wore a seatbelt – 44% Lucas, 41% Ottawa, 49% Wood
 - Youth rarely or never wore a seatbelt – 10% Lucas, 10% Ottawa, 11% Wood
 - Youth did not go to school because they felt unsafe at school or on their way home from school on at least one day in past 30 days – 6% Lucas, 6% Ottawa
 - Youth had carried a weapon in the past 30 days – 12% Lucas, 14% Ottawa, 10% Wood (only 1% in Ottawa County carried a weapon to school)

*Note - Ottawa County childhood data was not available for childhood health below.

- Early (Ages 0-5) Childhood Health*
 - Parents who had taken their child to the dentist in the past year – 68% Lucas (88% ages 6-11), 81% Wood (94% ages 6-11). Ottawa County parents had taken their children to the dentist an average of 1.5 times in the past year.
 - Parents reported their child had been diagnosed with asthma – 11% Lucas (23% ages 6-11), 7% Wood (16% ages 6-11)
 - Parents reported their child had been diagnosed with ADD/ADHD – 1% Lucas (16% ages 6-11); 1% Wood (8% ages 6-11)
- Children's Health Access*
 - Parents reporting there was a time in the past year their 0-11 year old was not covered by health insurance – 8% Lucas, 3% Wood
 - Parents reporting they received benefits from the SNAP/food stamp program - 28% Lucas, 7% Wood
 - Parents reporting they received benefits from WIC - 19% Lucas, 5% Wood
 - Parents reported they had taken their child to the hospital emergency room in the past year - 31% Lucas, 18% Wood

- Parents had taken their child to the doctor for preventive care in the past year - 88% Lucas; 87% Wood (n/a Ottawa)
- Early (Ages 0-5) Childhood Health*
 - Mothers who received prenatal care within the first three months during their last pregnancy – 93% Lucas, 90% Wood
 - Mothers who smoked during their last pregnancy – 5% Lucas, 3% Wood
 - Mothers who never breastfed their child – 27% Lucas, 26% Wood
- Middle (Ages 6-11) Childhood Health*
 - 25% of Lucas County parents reported their child never wore a helmet when riding a bicycle (Wood n/a).
 - Parents reported their child was bullied at some time in the past year – 53% Lucas, 41% Wood
 - Parents reported their child participated in extracurricular activities – 81% Lucas, 87% Wood
 - Parents reported their child had a MySpace or Facebook account – 26% Lucas, 16% Wood
 - 90% of Lucas parents reported their child had exercised for 20 minutes on three+ days in the past week vs. 89% of Wood County parents had exercised for 60 minutes on three or more days in the past week.
- Family Functioning/Neighborhoods*
 - Parents reported their children slept average hours per night - 10.3 Lucas, 10.4 Wood
 - Parents reported they read to their child every day – 21% Lucas, 20% Wood
 - Parents reported their neighborhood was always or usually safe – 89% Lucas, 99% Wood; (n/a Ottawa)
 - 3% of Lucas County parents reported an unlocked firearm and 3% reported a loaded firearm in their home. 52% of Ottawa County adults reported an unlocked firearm and 4% reported a loaded firearm in their home.
- Parent Health*
 - Parents were uninsured – 11% Lucas, 11% Wood
 - In Lucas County 31% of parents were overweight and 31% were obese compared to Wood County where 33% were overweight and 25% were obese.
 - Parents missed work an average of 1.7 days in Lucas County and 1.4 days in Wood County per year due to their child being ill or injured. Comparative data was not available for Ottawa County.

The Lucas County Health Strategic Planning Committee, using the Lucas County Health Needs Assessment, prioritized the following health issues, as indicated in Table 2 below, determining that if these issues are addressed by multiple agencies and organizations over the next three years, they could promote healthier lifestyles and safer neighborhoods for all ages, reduce chronic health diseases, and improve several socioeconomic determinants of health for Lucas County residents. In some areas of identified need, ProMedica is already taking a system approach to addressing these community health needs, to most efficiently use resources and to prevent duplication of services, as reflected in Table 2 below.

Table 2 - Lucas County Strategic Plan Priorities	Coalition or Organization Addressing Issue* (if County Specific)
Overarching Priorities: Promote Healthy Living	
<ul style="list-style-type: none"> Decrease the rate of adults, youth, and children who are overweight or obese by Body Mass Index (BMI) 	<ul style="list-style-type: none"> ProMedica Healthy Conversation Maps ProMedica Wellness Live Well Toledo* Toledo Lucas County Health Department – Healthy Youth and Families Coalition*
<ul style="list-style-type: none"> Increase rates of regular participation in physical activities 	<ul style="list-style-type: none"> ProMedica Healthy Conversation Maps ProMedica Wellness Live Well Toledo* Toledo Lucas County Health Department – Healthy Youth and Families Coalition*
<ul style="list-style-type: none"> Increase the percentage of adults who eat five or more servings of fruits and vegetables daily 	<ul style="list-style-type: none"> ProMedica Conversation Maps ProMedica Wellness ProMedica Flower Market Healthy Corner Store Live Well Toledo* Toledo Lucas County Health Department – Healthy Youth and Families Coalition*
Priority Health Issues – Adults (Ages 19+)	
1. Partnering to Improve Persistent Health Issues and Disparities through Enhanced Economic Stability	
<ul style="list-style-type: none"> Increase key leadership awareness of the links between economic stability and health status 	<ul style="list-style-type: none"> ProMedica Come to the Table (hunger initiatives) ProMedica Advocacy Fund Toledo Lucas County Commission on Minority Health* Toledo Lucas County CareNet*
<ul style="list-style-type: none"> Address adult health disparities based on income, race, and ethnicity by improving access to care and collaborating with community partners to improve the economic and environmental conditions in the community. 	<ul style="list-style-type: none"> Toledo Lucas County Commission on Minority Health* Toledo Lucas County CareNet* Live Well Toledo* Summer Youth Employment Program*
2. Adult Substance Abuse	
<ul style="list-style-type: none"> Decrease the rates of adult tobacco use 	<ul style="list-style-type: none"> ProMedica Tobacco Treatment Centers Lucas County Tobacco Coalition*
Priority Health Issues - Youth (Ages 12-18)	
1. Youth Engaging in Multiple Risky Behaviors	
<ul style="list-style-type: none"> Decrease the rates of youth alcohol, tobacco, other drug use 	<ul style="list-style-type: none"> Substance Abuse Intervention League (SAIL)* Sylvania Community Action Team (SCAT)* Lucas County Tobacco Coalition*
<ul style="list-style-type: none"> Increase the age of onset of sexual intercourse 	<ul style="list-style-type: none"> Youth Advocacy Alliance*
<ul style="list-style-type: none"> Increase the rate of youth practicing safer sexual health practices 	<ul style="list-style-type: none"> Youth Advocacy Alliance*
2. Safe Neighborhoods and Schools	
<ul style="list-style-type: none"> Decrease the rates of bullying incidents reported by youth in grades 6-12 	<ul style="list-style-type: none"> Foundation for Healthier Communities* Toledo & Oregon Police Departments University of Toledo
<ul style="list-style-type: none"> Decrease the rates of youth dating violence 	<ul style="list-style-type: none"> ProMedica Teen PEP
<ul style="list-style-type: none"> Decrease the percentage of youth carrying weapons 	<ul style="list-style-type: none"> Toledo & Oregon Police Departments
<ul style="list-style-type: none"> Decrease the rates of group violence 	<ul style="list-style-type: none"> Toledo & Oregon Police Departments

Priority Health Issues - Child (0-11 Years)	
1. Safety	
<ul style="list-style-type: none"> Decrease the rates of bullying incidents and increase bullying prevention efforts for children ages 6-11 years 	<ul style="list-style-type: none"> Foundation for Healthier Communities* All schools
2. Early Childhood Development	<ul style="list-style-type: none"> Healthy Lucas County Early Childhood Task Force*
<ul style="list-style-type: none"> Increase the percentage of parents/guardians who read to their children every day 	<ul style="list-style-type: none"> Read for Literacy - Creating Young Readers* Partners in Education*
<ul style="list-style-type: none"> Increase the rate of parents using safe sleep practices for children 	<ul style="list-style-type: none"> ProMedica Safe Kids of Greater Toledo*
3. Health and Dental Care Utilization	
<ul style="list-style-type: none"> Increase the rate of children who have a primary care physician 	<ul style="list-style-type: none"> Toledo Lucas County Health Department* Paramount Health Care*
<ul style="list-style-type: none"> Increase the proportion of children going to the dentist 	<ul style="list-style-type: none"> Toledo Lucas County Health Department The Dental Center of Northwest Ohio
<ul style="list-style-type: none"> Decrease the rates of asthma for children 	<ul style="list-style-type: none"> ProMedica Toledo Children's Hospital
<ul style="list-style-type: none"> Improve the asthma management for children 	<ul style="list-style-type: none"> ProMedica Toledo Children's Hospital
<ul style="list-style-type: none"> Increase child immunization rate 	<ul style="list-style-type: none"> ProMedica Physician Group Toledo Lucas County Health Department*

An asterisk (*) above indicates ProMedica participation with organizations addressing these health issues, that may include financial support, although may not be specific to ProMedica Bay Park Hospital unless specified. (Note: Ottawa and Wood County have not completed their strategic planning processes at the time of this document and are projected to complete them in the fall of 2013.)

LUCAS, OTTAWA AND WOOD COUNTY - HEALTH ISSUES FOR UNINSURED, LOW INCOME AND MINORITY GROUPS

Lucas County

Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups include: lack of health care coverage, tobacco use, drug use, multiple sexual partners, binge drinking, lack of male and female health screenings, depression and lack of routine dental care were all prevalent issues among those Lucas County adults with incomes less than \$25,000. The chronic disease prevalence among Lucas County adults with incomes less than \$25,000 was: high blood pressure (34%), depression (34%), arthritis (25%), high blood cholesterol (21%), asthma (15%) and diabetes (14%). Asthma, arthritis and depression had a higher prevalence among those adults with incomes less than \$25,000.

Thirteen percent of Lucas County adults were uninsured at the time of the survey. Lucas County adults who were uninsured reported that the reason they were without health care coverage was that they could not afford to pay the out-of-pocket expenses or pay the insurance premiums. The majority (74%) of the population were Caucasian. African Americans (19%), Hispanics (6%),

Asian (2%) and two or more races (3%) comprise the rest of the population. (Source: Census, 2010)

The Lucas County Data Surveillance work group of the Strategic Planning Process concluded that key leadership in Lucas County should be made 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 Lucas County residents.

Table 3 – Minority Health Issue in Lucas County	African Americans	Hispanics	Low Income (<\$25,000)	Lucas County 2011
Rate health as fair/poor	26%	20%	31%	18%
Uninsured	25%	17%	17%	13%
Diagnosed with Depression	--	27%	34%	22%
Current Smoker	25%	25%	41%	24%
Used marijuana in the past 6 months	17%	10%	26%	11%
Overweight by BMI	28%	37%	34%	36%
Obese by BMI	47%	42%	29%	35%
Eating 5+ fruits & vegetables/day	5%	7%	7%	11%
Diagnosed with High Blood Pressure	44%	--	--	34%
Diagnosed with Diabetes	17%	17%	14%	13%
Neighborhood not at all safe	20%	15%	N/A	9%
Looking for Food/Rent Assistance	48%	--	--	25%
Concerned about having enough food for their family	22%	--	25%	13%
Have 2 or more sexual partners	20%	10%	17%	9%
Diagnosed with Asthma	14%	13%	15%	13%
Diagnosed with Cancer	7%	4%	20%	11%
Visited a dentist in the past year	60%	56%	44%	68%
Adults using a hospital emergency room as their usual place of health care	18%	5%	15%	6%

Lack of health care coverage, tobacco use, drug use, multiple sexual partners, binge drinking, lack of female health screenings, obesity and lack of routine dental care were all prevalent issues among those Lucas County African American adults. The chronic disease prevalence among Lucas County African American adults was: arthritis (22%), high blood pressure (44%), high blood cholesterol (21%), diabetes (17%), and asthma (14%). High blood pressure and diabetes were higher for African American adults than Caucasians in Lucas County.

Lack of health care coverage, tobacco use, binge drinking, lack of male and female health screenings, and lack of routine dental care were all prevalent issues among those Lucas County

Hispanic adults. The chronic disease prevalence among Lucas County Hispanic adults were: arthritis (15%), high blood pressure (33%), high blood cholesterol (35%), diabetes (17%), and asthma (13%). High blood cholesterol and diabetes were higher for the Hispanic adults than non-Hispanics in Lucas County. ProMedica has a representative on the steering committee for the Toledo Lucas County Minority Health Commission, and actively participates in programs to support the related health issues.

Wood County

Lack of health care coverage, drug use, multiple sexual partners, binge drinking, lack of male and female health screenings, and lack of routine dental care were all prevalent issues among those Wood County adults with incomes less than \$25,000. The chronic disease prevalence among Wood County adults with incomes less than \$25,000 were: high blood cholesterol (31%), asthma (28%), arthritis (21%), high blood pressure (19%), diabetes (17%), and depression (12%). Diabetes and asthma had a higher prevalence among those adults with incomes less than \$25,000.

Fifteen percent of Wood County adults were uninsured at the time of the survey. Wood County adults who were uninsured reported that the reason they were without health care coverage was that they could not afford to pay the out-of-pocket expenses or pay the insurance premiums.

The majority (93%) of the population were Caucasian. Hispanics (5%), African Americans (2%), Asian (2%) and two or more races (2%) comprise the rest of the population. (Source: Census, 2010)

Ottawa County

Lack of health care coverage, tobacco use, drug use, multiple sexual partners, binge drinking, lack of male and female health screenings, depression and lack of routine dental care were all prevalent issues among those Ottawa County adults with incomes less than \$25,000. The chronic disease prevalence among Ottawa County adults with incomes less than \$25,000 were: high blood pressure (43%), high blood cholesterol (38%), arthritis (36%), depression (24%), asthma (17%) and diabetes (14%). High blood pressure, diabetes, asthma, arthritis and depression had a higher prevalence among those adults with incomes less than \$25,000.

Twelve percent of Ottawa County adults were uninsured at the time of the survey. Ottawa County adults who were uninsured reported that the reason they were without health care coverage was that they could not afford to pay the out-of-pocket expenses or pay the insurance premiums.

The majority (97%) of the population were Caucasian. Hispanics (4%), African Americans (1%), Asian (<1%) and two or more races (1%) comprise the rest of the population. (Source: Census, 2010)

Summary

The county health needs assessments for Ottawa and Wood Counties did not specifically identify the needs of minorities due to the low percentage of minorities in those counties, and plans are inclusive of all populations in these counties. The data is reflected in four categories: Under 30; 65 & Over; Low Income < \$25,000 and All Residents surveyed by county. The survey identified that 14% of Lucas County adults; 12% of Ottawa County adults and 15% of Wood County adults were without health care coverage. The uninsured adults reported the reason they were without health care coverage was that they could not afford to pay the out-of-pocket expenses or pay the insurance premiums. (Source: Census, 2010)

Lack of health care coverage; tobacco use; drug use; multiple sexual partners; binge drinking; lack of male and female health screenings; depression and lack of routine dental care were all prevalent issues among those Lucas, Ottawa and Wood County adults with incomes less than \$25,000. The chronic disease prevalence among this targeted group of adults with incomes less than \$25,000 were high blood pressure, depression, arthritis, high blood cholesterol, asthma and diabetes.

The Lucas County Data Surveillance work group of the Strategic Planning Process concluded that key leadership in Lucas County should be made aware of the links between economic stability and health status. The group felt progress toward decreasing the rates of the leading chronic health conditions and persistent health disparities can be made by addressing the economic status of residents.

LUCAS, OTTAWA AND WOOD COUNTY – INFORMATION GAPS

The Lucas County Resource Assessment and Gap Analysis workgroup used the findings from the Data Surveillance workgroup to closely examine current resources available to Lucas County residents which address one or more of the adult, youth, and/or child priority health issues. Using an online survey tool, over sixty agencies and organizations reported the program types and services offered, the populations served, and how they are evaluated to measure effectiveness. The information was examined by the workgroup to determine possible gaps by specific population groups and/or geographic locations. The Resource Assessment workgroup determined that information from several Lucas County service providers was not captured by the online survey tool. The responses received indicate that youth substance abuse prevention programs are not offered countywide. There are several coalitions which are currently independently addressing tobacco use, healthy living, bullying and safety issues. The formal Ottawa and Wood County strategic plan processes and gap analyses had not been completed at the time of this document.

Although the formal county assessments provided sufficient primary data, some secondary and public health data is outdated (2008-10) and therefore leaves gaps in measurement about key indicators during that time. Although zip code level data was available, it was limited, and an

analysis of zip code data for Lucas County in 2011 revealed that the zip code data was not statistically significantly different than county data therefore county level data was used for this assessment. In addition, community response to the resource inventory was not optimal, with only 60 organizations responding to the Lucas County resource survey – additional resources were added by ProMedica Bay Park Hospital for use in this review, but some resources in the listing may still be limited. Ottawa and Wood County Community Health Needs Assessment groups had not conducted formal resource assessments at the time of this document.

V. PROMEDICA BAY PARK HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

Following the release of the Lucas, Ottawa and Wood County Assessments in 2012, and Lucas County strategic planning process in 2012, ProMedica Bay Park Hospital leadership convened a CHNA committee to thoroughly review the three counties' assessment data, prioritize key health indicators specific to their demographic, identify 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 by the ProMedica Bay Park Hospital CHNA committee that included: vice president of nursing/chief nursing officer, vice president of operations, associate vice president, stroke program coordinator, directors of radiology services, director of dietary/environmental services, director of LDRP, director of EC/ICU, director of acute care services, manager of respiratory care, manager of human resources and communication specialist. The ProMedica Bay Park Hospital CHNA committee developed the Community Health Needs Assessment, following the Lucas County Strategic Planning process through the following steps:

- Review of existing primary and second data sources available in the three county area;
- Discussion and consensus of priority health issues for ProMedica Bay Park Hospital;
- Identification of current community resources which address the priority health issues;
- Identification of gaps in county level services and programming;
- Research of effecting programs, policies and strategies to recommend for future implementations; and
- Identification of specific implementation action steps for each of next three years

Key secondary health data considered for the hospital CHNA came from the Ohio Department of Health top leading causes of death in Lucas, Ottawa and Wood Counties, based on population:

:

County	HEART DISEASE		CANCER		CHR. LOWER RESP DIS.		STROKE		UNINTENTIONAL INJURY (ACCIDENT)		ALZHEIMER'S DIS	
	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE	NUMBER	RATE
LUCAS	1,141	228.0	988	201.9	233	48.8	218	42.9	181	40.2	164	32.9
OTTAWA	104	170.5	109	182.9	30	48.5	25	41.0	24	51.9	22	35.5
WOOD	283	214.3	249	190.0	55	44.6	58	43.3	49	41.5	33	26.1

Although some areas of the Lucas County Strategic Plan were not identified as part of the ProMedica Bay Park Hospital plan, ProMedica participates in many areas of the Lucas County plan, as indicated in Table 2, through various community health coalitions and initiatives, and ProMedica Bay Park Hospital focused on additional areas of need, as discussed below.

VI. PROMEDICA BAY PARK HOSPITAL COMMUNITY HEALTH NEEDS & PRIORITIES

As indicated in Table 2, ProMedica is actively involved in many priority health areas identified through the community process, including ProMedica Bay Park Hospital's participation in Toledo Lucas County CareNet to provide free health care to Lucas County adults that are not eligible for public or private healthcare coverage. ProMedica has also contributed funding for a new CareNet emergency dental fund for adults residing in Lucas County.

In addition, ProMedica Bay Park Hospital is represented by ProMedica system staff on the Toledo Lucas County Minority Health Commission in an effort to address these issues from a coalition perspective. ProMedica will also continue to submit grant applications to obtain additional funding for evidenced based programs to address identified minority health issues.

Following a review and discussion of health data and the community priorities, as well as organizational and community programs to address these community priority areas, ProMedica Bay Park Hospital priorities were identified through the review and discussion of health data. They are listed according to priority:

1. Obesity/Nutrition

- 35% of Lucas County adults; 34% of Ottawa County adults; and 30% of Wood County adults were obese based on BMI. The 2010 BRFSS indicated that 30% of Ohio and 28% of US adults were obese by BMI.

2. Heart Disease

- Heart disease was one of the five leading causes of death in the 3 counties.
- Adults diagnosed with high blood pressure – 34% Lucas, 40% Ottawa, 30% Wood
- Adults diagnosed with high blood cholesterol – 27% Lucas, 38% Ottawa, 31% Wood
- Adults having stroke in their lifetime – 2% Lucas, 1% Ottawa, n/a Wood

3. Cancer

- Leading cancers in the three county area were:
 - ✓ Lung and bronchus (15% in Lucas; 2% in Ottawa ; and 14% in Wood)
 - ✓ Prostate (14% in Lucas; 16% in Wood and not reported in Ottawa)
 - ✓ Breast (12% in Lucas; 8% in Ottawa ; and 16% in Wood)
 - ✓ Colon and Rectum (10% in Lucas; 10% in Ottawa; and 12% in Wood)
 - ✓ Bladder (5% in Lucas; 3% in Wood and not reported in Ottawa)

4. Tobacco Use

- Adults who were current smokers – 24% Lucas, 21% Ottawa, 11% Wood

5. Mental Health/Bullying

- Youth who were bullied in past 12 months – 46% Lucas, 50% Ottawa, 42% Wood

Two of the five priorities (heart disease and cancer) are leading causes of death in these counties, two are the leading actual causes (tobacco use and poor diet/physical inactivity) of death in the United States (Source: Mokdad AH, Marks JS, Stroup DF, & Gerberding JL. Actual causes of death in the United States, 2000. Journal of the American Medical Association 2004; 291:1238-1245). The ProMedica Bay Park Hospital CHNA committee identified the need to further address these health issues. Mental health and obesity/hunger were identified as key priorities, as well, due to the far reaching health impact and the relative need in the community. Mental health was also prioritized due to the incidence of mental health in the assessment, and the relative shortage of mental health services in the community.

Other leading causes of death are addressed by other hospitals and organizations. Heart disease is well addressed in the Lucas County community with the ProMedica Heart and Vascular Institute focuses on programming for heart disease in the wider community. Chronic lower respiratory diseases are addressed by hospital based respiratory programs throughout the community, as well as ProMedica's tobacco treatment programs located at ProMedica Toledo Hospital and ProMedica St. Luke's Hospital. ProMedica Toledo Hospital and ProMedica Toledo Children's Hospital have Level I Trauma Centers and are home to the Safe Kids Coalition, as well as other safety initiatives to help reduce unintentional injuries.

As part of the hospital-specific planning process, to further obtain input from community members, ProMedica Bay Park Hospital leadership, ProMedica Community Advocacy staff, ProMedica Wellness staff, ProMedica Bay Park Hospital Foundation Board members (prior to full board approval) were engaged specifically to discuss the needs of community. Finally, this information was then shared with ProMedica Bay Park's board of trustees who are representative of the community, and feedback was obtained from them, as well.

As a ProMedica member hospital, ProMedica Bay Park Hospital is represented and is participating in the execution of the community-wide community benefit plans by working with organizations and coalitions in our community who are addressing these issues. To best coordinate efforts and resources, ProMedica Bay Park Hospital, as well as other ProMedica staff, work with the following coalitions, including, but not limited to: Healthy Lucas County (Lucas County Strategic Plan Workgroups), American Cancer Society, American Alzheimer's Association, American Heart Association, Lucas County Colorectal Cancer Coalition, Susan G. Komen Breast Cancer Foundation, Toledo Lucas County CareNet (health care in Lucas County for those not qualifying for insurance), and Toledo Lucas County Minority Health Commission.

VII. PROMEDICA BAY PARK HOSPITAL – NEEDS, GAPS AND RESOURCE ASSESSMENT

ProMedica Bay Park Hospital did not **address all of the needs identified in the most recently conducted Lucas, Ottawa and Wood County Health Needs Assessments** 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.

Table 2 indicates the community wide organizations and coalitions addressing the prioritized Lucas County strategic plan issues. ProMedica participates with many of these organizations and coalitions through representation and/or funding, as indicated by an asterisk.

Through the Lucas County Resource Assessment Workgroup, the following areas were identified as not having specific programs identified in the community: work assistance for the unemployed, underage drinking, binge drinking, prescription drug use and misuse, youth carrying weapons, youth involved in physical fights, youth who purposefully hurt themselves, youth violence at school, youth violence in neighborhoods, youth marijuana use, delaying first sexual intercourse, prevention/intervention for violence in neighborhoods. Note: although this survey was sent to multiple community members, responses may not represent all related programs in the community, and some programs may have limited reach.

VIII. PROMEDICA BAY PARK HOSPITAL - IMPLEMENTATION STRATEGY SUMMARY

Following the finalization of the Lucas County strategic plan, ProMedica Bay Park Hospital commenced with its CHNA strategic planning process, whereby it analyzed and discussed data from Lucas, Ottawa and Wood Counties, as well as state and national data, developed hospital-based implementation and action plans, including annual goals - taking into consideration the county strategic plan, as well as areas not addressed by the community plan or other community groups.

ProMedica Bay Park Hospital identified the following health priorities (in order of importance, ranked by consensus):

1. Obesity/Nutrition
2. Heart Disease
3. Cancer
4. Tobacco Use
5. Mental Health/Bullying

The implementation plans for these priorities include specific programs and measurements that will occur annually and progress will be reported quarterly to leadership and the Board of Trustees. ProMedica Bay Park Hospital will not address all of the needs identified in the most recently conducted Lucas, Ottawa and Wood County Health Needs Assessments as these areas either go beyond the scope of the hospital or may be addressed by, or with, other organizations in the community. To some extent limited resources do not allow hospitals 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 with, or by, other community agencies and coalitions across Lucas, Ottawa and Wood Counties, with Lucas County initiatives listed in Table 2. Many health issues are also addressed by physicians at a related patient visit.

Following approval of the ProMedica Bay Park Hospital implementation strategy and plan by the ProMedica Bay Park Hospital Board of Trustees, the execution of the ProMedica Bay Park Hospital implementation action plans will be initiated, with quarterly updates of these plans provided to ProMedica Bay Park Hospital leadership, as well as the ProMedica Bay Park Hospital Board of Trustees.

Annual inclusion of a community benefit section in operational plans is reflected in the Community Benefit chapter of the ProMedica strategic plan – this is one of five chapters that all ProMedica hospitals address in their strategic plans for implementation, and they are approved by the 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 included in the hospital budget and approved by the ProMedica Bay Park Hospital Board of Trustees.

IX. ACCESS TO PROMEDICA BAY PARK HOSPITAL CHNA AND OTHER RESOURCES

ProMedica Bay Park Hospital community health needs assessment is widely available in printable (pdf) form to the public on the hospital website at: www.promedica.org/chna

The Lucas, Ottawa and Wood County assessments are available on the following website: <http://www.hcno.org/community/reports.html>

For any questions related to the ProMedica Bay Park Hospital community assessment process and strategic plan, or to request a hard copy of the assessment, please email cometothetable@promedica.org or call ProMedica Bay Park Hospital Administration at 419-690-7700.