

MONROE REGIONAL HOSPITAL

2019 COMMUNITY HEALTH NEEDS ASSESSMENT

PROMEDICA MONROE REGIONAL HOSPITAL

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I. INTRODUCTION

ProMedica Monroe Hospital, a member of ProMedica, is a committed healthcare resource in the southeast Michigan community, providing acute care and emergency services, as well as selected specialty medical and mental health services to patients. 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.

ProMedica Monroe Regional Hospital (PMRH) and the Monroe County Health Department joined to create the Building Healthy Communities Coalition of Monroe County. The hospital and health department were successful in jointly approaching the Monroe County Health Plan for funding to support a Monroe County 2018 health status assessment and complete the Mobilizing for Action through Planning and Partnerships (MAPP) process, which developed a community health improvement plan for the county.

ProMedica Monroe Regional Hospital conducted and adopted this community health needs assessment (CHNA) in 2019 and will implement the associated three-year, strategic plan beginning in 2020. ProMedica Monroe Regional Hospital participated in the Monroe County Health Assessment (CHA) conducted in 2018. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment. In order to maintain complete objectivity throughout the county CHA survey process, the network engaged the expert services of the Hospital Council of Northwest Ohio to administer the survey and compile the results. One area of weakness was the relative age of available secondary and public health data. Following the formal county health assessment survey, PMRH staff joined multiple community organizations through the Building Healthy Communities Coalition of Monroe County to collaborate, develop and implement a prioritized, strategic community health improvement plan (CHIP) for Monroe County. A gap analysis and resource assessment was conducted as part of this process.

In 2019, ProMedica Monroe Hospital convened a CHNA committee to review the work of the Building Healthy Communities Coalition of Monroe County and the county health assessment and plan that included gap and resource assessments. The committee then selected and prioritized key indicators for their defined community, identified resources and gaps in these areas, and developed implementation plans to address these priority health needs in the community over the next three years, taking into account the needs of minority and underserved populations. The hospital received feedback on the CHNA plan from the Monroe County Health Department, to confirm these needs from a public health expert perspective.

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

1. Chronic Disease Prevention

- 2. Social Determinants of Health Food Insecurity
- 3. Mental Health
- 4. Obesity Physical Activity
- 5. Tobacco/Vaping
- 6. Opioid Cessation

In addition, as part of ProMedica Health System, some community health programs are developed and implemented at the corporate level, with social determinants of health, healthy aging and infant mortality identified as system focal points. The full ProMedica Monroe Hospital CHNA may be accessed at https://www.promedica.org/pages/about-us/default.aspx.

II. PROMEDICA MONROE REGIONAL HOSPITAL COMMUNITY SERVICE AREA

The definition of the primary community served by ProMedica Monroe Regional Hospital for this assessment is Monroe County, Michigan, with 93.84% of the hospital's inpatients and 93.24% of Emergency Department patients residing in Monroe County. The total county population is estimated at 150,439 for the 2018, down from 152,021 in 2010. ProMedica Monroe Regional Hospital is the only hospital serving Monroe County with multiple hospitals serving in the contiguous counties service area (see Table 1 below). For the purpose of this plan, the health statistics and factors for Monroe County were reviewed and used in completing this community health needs assessment. (Note: For the remainder of this document, statistics in parentheses refer to data from previous health assessments, where available, to be used for comparison.)

Demographic review of Monroe County, Michigan, shows that it is home to 149,649 residents. Approximately one-fifth, 21.4% (23.2%), of residents were youth under 18 years of age, 5.3% were under 5 years of age, and 18.1% (14.6%) were age 65 or older. The majority 94.4% (94.4%) of the population is Caucasian, 2.6% (2.1%) are African American, 3.7% are Hispanic, 0.7% (0.6%) are Asian and 1.9% (1.8%) are two or more races. The median household income in Monroe County was \$59,479 (\$53,224), and 11.7% (12.3%) of all Monroe County persons had an income below the poverty level. In 2018, 4% (9%) of Monroe County residents were uninsured according to the 2018 Monroe County Health Assessment (Source: http://www.hcno.org/wp-content/uploads/2019/01/Revised-Final-Monroe-County-2018-Health-Assessment-1-10-19.pdf.)

Demographics for the secondary service area counties may be found at census.gov, the respective state department of health websites, and within county health assessments for the contiguous counties at: http://www.hcno.org/community-services/community-health-assessments/

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, as well as many outpatient facilities, rehabilitation facilities and other programs that are not listed. Due to the presence of other hospital entities in each of the contiguous five counties, PMRH focuses most of

their community health efforts within the greater Monroe County area - leaving the other county health improvement efforts to the hospitals located in each county.

Table 1 - Hospitals Serving the Service Area (Four County Secondary Service Area)		
ProMedica Bixby Hospital	Adrian, MI (Lenawee)	
ProMedica Herrick Hospital	Tecumseh, MI (Lenawee)	
Arrowhead Behavioral Hospital	Maumee, OH (Lucas)	
Mercy St. Anne's Hospital	Toledo, OH (Lucas)	
Mercy St. Charles Hospital	Oregon, OH (Lucas)	
Mercy St. Vincent/Mercy Children's Hospital	Toledo, OH (Lucas)	
ProMedica Flower Hospital	Sylvania, OH (Lucas)	
ProMedica Toledo Hospital	Toledo, OH (Lucas)	
ProMedica Toledo Children's Hospital	Toledo, OH (Lucas)	
ProMedica Wildwood Ortho & Spine Hospital	Toledo, OH (Lucas)	
St. Luke's Hospital	Maumee, OH (Lucas)	
University of Toledo Medical Center	Toledo, OH (Lucas)	
Beaumont Trenton	Trenton MI (Wayne)	
Henry Ford Wyandotte	Wyandotte MI (Washtenaw)	
University of Michigan	Ann Arbor MI (Washtenaw)	
St. Joseph Mercy Chelsea	Ann Arbor MI (Washtenaw)	
St Joseph Mercy Ann Arbor	Ann Arbor MI (Washtenaw)	

ProMedica Monroe Regional 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, including the hospital include, but are not limited to: City of Monroe, Monroe County Health Department, Monroe County Commission on Aging, Monroe County Substance Abuse Coalition, United Way of Monroe, Human Services Collaborative Network, Family Counseling & Shelter Services, American Cancer Society of SE Michigan, Great Start Collaborative, Monroe County Mental Health Authority, Monroe County Family YMCA, Monroe County Head Start/Early Head Start, Monroe County Community College, Child Advocacy Network (CAN) Council, Family Medical Center of Michigan, Monroe County Planning Commission, Monroe Center for Healthy Aging, Monroe County Board of Commissioners, Department of Human Services, Catholic Charities of Southeast Michigan, Community Foundation, Senator Zorn's Office, Monroe Public Schools, Bedford Public Schools, Jefferson Public Schools, Ida Public Schools, Dundee Public Schools, Mason Consolidated Public Schools, Summerfield Public Schools, Whiteford Public Schools, Airport Community Schools, Monroe County Intermediate School District (ISD), American Heart Association, Monroe County Commission on Aging, American Red Cross, Monroe County MSU Extension, Michigan State Police, Community Mental Health Partnership of SE MI, and Salvation Army.

III. IMPACT OF PREVIOUS COMMUNITY HEALTH NEEDS ASSESSMENT PLAN

The 2016 Community Health Needs Assessment identified several significant health needs. Beginning in 2017, ProMedica Monroe Regional Hospital implemented programs in Monroe County to address the following health needs, listed in order of priority with the following impact demonstrated in 2017 and 2018 (complete 2019 activities were not available at the time of this publication):

1. Cardiovascular Health

Strategies: Annually, educate the community about early stroke recognition and early action minimizing brain damage, using "BE FAST". Execute two formal community presentations on recognizing early stroke symptoms and stroke prevention strategies, including one presentation to school-aged youth. Educate the community about stroke recognition and early action minimizing brain damage by distributing handouts/flyers about BE FAST at six additional community events including Health Odyssey, United Way Health Checks, Monroe County Fair and the Concert in the Park health screenings. Distribute BE FAST stroke education materials to patients hospitalized with stroke/transient ischemic attack (TIA) risk or diagnosis. Educate the community about early stroke recognition and early action minimizing brain damage using fast (face arm speech time). Annually perform community outreach and awareness activities about cardiovascular disease risk factors and prevention strategies; a) execute three formal community wellness presentations annually on heart disease, cholesterol and blood pressure; b) continue to identify hospital inpatients that are smokers and provide smoking cessation counseling resource information; and c) continue to identify hospital inpatients that are at risk of diabetes and provide diabetes education resource information.

In 2017, actions taken included:

- Educated the community about early stroke recognition and early action minimizing brain damage, using "BE FAST" acronym at 19 community education sessions, with over 6,000 participants.
- Educated the community about stroke recognition and early action minimizing brain damage by distributing handouts/flyers about "BE FAST" at six additional community events including Health Odyssey, United Way Health Checks, and the Concert in the Park health screenings. No specific programs were implemented specifically for school-aged children for stroke education; however youth were present during the presentations at many of the community events.
- Distributed "BE FAST" stroke education materials to 160 patients hospitalized with stroke/transient ischemic attack (TIA) risk or diagnosis.

In 2018, actions taken included:

- Educated the community about early stroke recognition and early action minimizing brain damage, using "BE FAST" acronym at 20 community education sessions, with over 4,000 participants.
- Educated the community about stroke recognition and early action minimizing brain damage by distributing handouts/flyers about "BE FAST" at nine additional community events including Health Odyssey, United Way Health Checks, Monroe County Fair, Christmas in Ida, Rally on the River, Monroe Center for Healthy Aging, March of Dimes Walk, Relay for Life, and Strike Out for Stroke at Toledo Mud Hens. No specific programs were implemented for school-aged children for stroke education; however youth were present during the presentations at many of the community events.
- Distributed "BE FAST" stroke education materials to 200 patients hospitalized with stroke/transient ischemic attack (TIA) risk or diagnosis.
- In 2018, actions taken included In lieu of formal community wellness presentations, the hospital provided a free stand-alone blood pressure machine and print educational materials to provide continuous access to blood pressure (BP) screenings and related education at the local YMCA throughout the year. In 2018, there were 2,500 uses of the stationary BP machine and 190 educational brochures and literature distributed.
- All pulmonary function testing (PFT) and cardiopulmonary rehabilitation patients who smoke or have recently quit smoking receive information on smoking cessation and related services.
- 145 free diabetes education sessions were provided at community events. Over 470 individuals participated in these events. Approximately 515 patients received nutrition counseling, including diabetes education, as indicated.

2. Cancer Screenings – Lung, Breast and Colorectal

Strategies: Annually provide education and resource information on lung cancer and early screening at United Way Health Checks and other community events. Annually provide education and resource information to all populations about breast care and screenings, including the underserved and underinsured. Annually provide education and resource information to all populations about prostate cancer prevention - create and distribute prostate screening information at community events, including United Way Health Check program, the Monroe County Fair, men's walks and runs.

In 2017, actions taken included:

- Through collaboration and mentoring of students from the Monroe Community College, respiratory therapy program, free pulmonary function screening were offered in the community and related screening education was provided.
- Participated in Susan G. Komen of Northwest Ohio Race for the Cure to help raise funds for breast cancer screening, education and programming.

- The hospital foundation and Susan G. Komen partnered to raise additional funds in Monroe County to support awareness, services, and technology to the community. Funds raised will be used in 2018 to offer free support programs, patient massages, and a promotional video to show the impact Monroe Cancer Center has in the community in regards to breast cancer and the concerns with diagnosis and treatment. Funds also support a purchase of Magseed Marker Technology to provide a less invasive biopsy.
- Used approved and funded resources from Susan G. Komen to provide grant funded, breast exams and mammograms, at no cost to the patient, with a total 21 bilateral screening mammograms, 12 diagnostic mammograms, 12 breast ultrasound exams, and 1 breast biopsy completed (which resulted in a positive diagnosis of breast cancer).
- No prostate cancer prevention program offered in 2017 due to U.S. preventative services task force change in guidelines about prostate cancer screening. Colorectal cancer education is replacing this prostate cancer education initiative, due to new, national prostate cancer screening guidelines.
- An initiative was developed in 2017 to provide free screening kits in 2018 to screen for colorectal cancer.
- Developed education program to be provided by the ProMedica Cancer Institute at barber shops throughout ProMedica's footprint with expansion into Monroe slated for 2018.
 Information on men's health and colorectal cancer was provided at these education sessions.
- One colorectal cancer education session was held with approximately 50 participants.

In 2018, actions taken included:

- COPD Awareness table in the lobby during the first week of November- Provided information for the community on COPD, Alpha-1 Antitrypsin Disease and Smoking Cessation. Students from Monroe Community College provided free Spirometry and Carbon Monoxide testing.
- Participated in Susan G. Komen of Northwest Ohio Race for the Cure to help raise funds for breast cancer screening, education and programming. ProMedica Race for the Cure team had 600 participants that included hospital staff.
- The hospital foundation and Susan G. Komen partnered to raise additional funds in Monroe County to support awareness, services, and technology to the community. Funds from 2018 were used for monthly breast cancer support groups and the purchase of the Magseed Marker Technology to provide a less invasive biopsy. Funds raised will be used in 2019 to offer free support programs.
- Used approved and funded resources from Susan G. Komen to provide grant funded, breast exams and mammograms, at no cost to the patient, with a total of 23 patients receiving diagnostic and screening mammograms, breast ultrasounds and breast biopsies.

- No prostate cancer prevention program offered in 2018 due to U.S. preventative services task force change in guidelines about prostate cancer screening. Colorectal cancer education replaced this prostate cancer education initiative.
- Collaboration between PMRH and the Monroe County Health Department where colorectal cancer detection kits (FIT kits) provided to health department with onsite education to health department nurses. The nurses supplied colorectal cancer education to people coming to the department for flu and Hepatitis A vaccines. Eligible participants received FIT kits. 12 people returned kits, with all test results negative.
- Developed education program to be provided by the ProMedica Cancer Institute at barber shops throughout ProMedica's footprint with expansion into Monroe in 2018. 50 education packets for clients, on men's health and colorectal cancer, provided to one barbershop in Monroe.
- One colorectal cancer education session was provided with approximately 50 participants at the Monroe County Health Department.

3. Pulmonary Disease

Strategies: Educate the community about risk factors and prevention strategies of chronic respiratory diseases; a) execute at least one formal community presentation per year on risk factors and prevention of chronic pulmonary disease; b) distribute chronic respiratory disease prevention information at community events including Health Odyssey, United Way Health Checks, Monroe County Fair, and the Concert in the Park health screenings, and c) offer vouchers for free pulmonary function (PFT) screening at United Way Health Checks four times per year. Educate the community and at risk patients of the importance of pneumonia vaccinations – a) offer pneumonia vaccinations to all pulmonary rehabilitation patients to prevent complications due to pneumonia in these at-risk patients; b) partner with the United Way of Monroe County and Monroe County Health Department to provide the pneumonia vaccination at four United Way Health Check programs; and c) offer pneumonia vaccines to at-risk individuals who receive services at Mercy's Angels program.

In 2017, actions taken included:

- Provided two formal community presentations on risk factors and prevention of chronic pulmonary disease.
- A smoking cessation information booth was set up for one full week in November in the
 hospital allowing visitors access to information even when clinical staff were not available.
 In addition, students were utilized in respiratory care and pulmonary rehab with staff
 providing mentoring and education.
- In partnership with the United Way, United Way printed vouchers and sends the vouchers to their agencies for free pulmonary function (PFT) screening at United Way Health Checks four times per year. The free screening is provided by PMRH.

- Five hundred-seventy inpatients and three (3) outpatients received formal education about the importance of pneumonia vaccinations.
- All PFT and cardiopulmonary rehab patients received outpatient resource information about where to obtain pneumonia vaccinations. Approximately 996 patients received this information in 2017.
- Pneumonia vaccines were offered at four United Way Health Checks with two participants receiving the vaccine there.
- The Mercy's Angels program provided 60 flu vaccinations at no cost.

In 2018, actions taken included:

- Provided six formal community presentations on risk factors and prevention of chronic pulmonary disease.
- A smoking cessation information booth was set up for one full week in November in the hospital allowing visitors access to information even when clinical staff were not available. In addition, students were utilized in respiratory care and pulmonary rehab with staff providing mentoring and education.
- In partnership with the United Way, United Way printed vouchers and sends the vouchers to their agencies for free pulmonary function (PFT) screening at united way health checks four times per year. The free screening is provided by PMRH.
- Inpatients and outpatients received formal education about the importance of pneumonia vaccinations.
- All PFT and cardiopulmonary rehab patients received outpatient resource information about where to obtain pneumonia vaccinations.

As stated above, PMRH in collaboration with the Monroe County Health Department and the Building Healthy Communities Coalition engaged in the remaining initiatives.

4. Adult & Youth Weight Status

Strategies: Improve the knowledge, attitudes and beliefs of residents of Monroe County related to nutrition and physical activity; a) through hospital childbirth education classes and mothers delivering at the hospital, promote and provide information about breastfeeding to pregnant and postpartum women; b) provide breastfeeding mothers with access to lactation management support, especially during the first days and weeks postpartum; c) develop hospital policies regarding formula distribution that promote and support breastfeeding with infant formula as an option only if the mother cannot successfully breastfeed; and d) adopt and enforce mother-friendly worksite policies to promote breastfeeding among employees and achieve the Baby-Friendly Hospital designation. Increase community education on nutrition and physical activity; a) provide free education to all populations about nutrition and physical activity; b) participate in the Building Healthy Communities Coalition's "Healthy Schools Initiative", and c) provide free blood pressure screenings and body mass index measures

accompanied by nutrition education at health fairs, trade fairs, and community meal settings in Monroe County.

Actions taken in 2017, included:

- Through hospital childbirth education classes and mothers delivering at the hospital, promoted and provided information about breastfeeding to 38 pregnant and postpartum women.
- Implemented baby-friendly hospital policies by encouraging mothers who are breastfeeding, through follow-up calls one week after discharge. Continuous lactation support offered as they transition during maternity leave and return to work as requested.
- Developed hospital policies regarding formula distribution that promoted and supported breastfeeding with infant formula as an option only if the mother cannot successfully breastfeed. All breastfeeding policies remain enforced and pacifiers have been removed from standard issue throughout ProMedica hospitals to further promote latching during establishment of breastfeeding.
- Enforced policy #824-corporate clinical policies-breastfeeding initiative for healthy newborns.
- Ensured mother-friendly worksite policies are in place at the hospital to support breastfeeding in the workplace. Designated a specific room set up for employees to breastfeed at the hospital. New employees receive information on this service and access during new employee orientation. Breastfeeding room for working mothers has been updated to have the latest pumping equipment and support material available on campus at PMRH.
- As a member of the Building Healthy Communities Coalition, 23 schools submitted "Healthy Schools" application out of 28 schools who signed the pledge. An award ceremony took place at the earth day fair. Monroe County Health Department delivered (MCHD) health education presentations reaching 6892 students.
- As a member of the Building Healthy Communities Coalition, and specifically with community partners, such as Monroe County Opportunity Program (MCOP) and the YMCA, provided nutritious foods to families in need. Fruits and vegetables are made available in areas throughout the county (schools and libraries) and free summer lunch programs are offered to youth in Monroe County. Many more programs are provided throughout the county to ensure families in need have meals available.
- PMRH has taken steps within the hospital to provide nutritious offerings to patients, their families, and friends when eating in the cafeteria. Through a progressive plan, which began in 2016 when sugar-sweetened beverages continue to be removed from the hospital.
- PMRH and MCOP began discussion regarding a food pharmacy and how we can assist the community to ensure meals are provided to patients in need and identified through the social determinants of health screenings.

 As a member of the Building Healthy Communities Coalition, our partners, The Center for Healthy Aging and the MCHD, have provided 177 pre and post health screenings to check body mass index, blood pressure, blood glucose, total and HDL (high density lipoprotein) cholesterol.

Actions taken in 2018 included:

- Through hospital childbirth education classes and mothers delivering at the hospital, promoted and provided information about breastfeeding to 625 pregnant and postpartum women.
- Implemented baby-friendly hospital policies by encouraging mothers who are breastfeeding, through follow-up calls one week after discharge. Continuous lactation support offered as they transition during maternity leave and return to work as requested.
- Enforced hospital policies regarding formula distribution that promoted and supported breastfeeding with infant formula as an option only if the mother cannot successfully breastfeed. All breastfeeding policies remain enforced and pacifiers have been removed from standard issue throughout ProMedica hospitals to further promote latching during establishment of breastfeeding.
- Enforced policy #824-corporate clinical policies-breastfeeding initiative for healthy newborns.
- Ensured mother-friendly worksite policies are in place at the hospital to support breastfeeding in the workplace. PMRH has a specific room set up for employees to breastfeed at the hospital. New employees receive information on this service and access during new employee orientation. Breastfeeding room for working mothers has been updated to have the latest pumping equipment and support material available on campus at PMRH.
- Through collaboration with the Building Healthy Communities Coalition, and specifically with community partners such as MCOP and the YMCA, provided nutritious foods to families in need. Fruits and vegetables are made available in areas throughout the county (schools and libraries) and free summer lunch programs are offered to youth in Monroe County. Many more programs are provided throughout the county to ensure families in need have meals available.
- PMRH has taken steps within the hospital to provide nutritious offerings to patients, their families, and friends when eating in the cafeteria. Through a progressive plan, which began in 2016 when sugar-sweetened beverages were removed from the hospital. In 2018, the hospital increased the vegetarian options in the cafeteria and added healthier snack selections in the cafeteria, vending machines and the micro market.
- PMRH and MCOP began discussion in 2018 regarding a food pharmacy and how we can assist the community to ensure meals are provided to patients in need and identified through the social determinants of health screenings.

5. Adult & Youth Mental Health

Strategies: Educate the community about mental health/depression and mental health resources available in Monroe County through handouts/flyers, community events, ProMedica Facebook and ProMedica physician offices.

In 2017, actions taken included:

- Educated the community about mental health/depression and mental health resources available in Monroe County through handouts/flyers, community events, ProMedica Facebook and ProMedica physician offices, at 26 community education sessions with approximately 467 participants.
- Designed, developed, and distributed 5,000 copies of the Monroe County Mental Health Guide to every school in Monroe County and to businesses and organizations throughout the county.
- Created and distributed 15,000 magnets that promoted the web link access to the Monroe County Mental Health Guide (online version) and the Suicide Prevention Hotline. Every high school and junior high school student received a magnet that were provided on their lockers at the beginning of the school year.
- Billboard advertisements were placed in two locations during September 2017 to promote the web link for the Monroe County Mental Health Guide and Suicide Prevention Hotline.

In 2018, actions taken included;

- Educated the community about mental health/depression and mental health resources available in Monroe County through handouts/flyers, community events, ProMedica Facebook and ProMedica physician offices, at 10 community education sessions and with approximately 740 participants.
- PMRH Foundation purchased the rights to the movie, "The Ripple Effect" that can be shared by any member of the Suicide Coalition of Monroe and PMRH. The movie was shown to the community to create awareness and help prevent suicide. The movie and cost of ticket printing was paid for through the PMRH Foundation (a cost of \$800).
- A healing garden was built in October 2018 to give Monroe cancer patients, long term nursing care residents and their families a place to reflect, relax and rejuvenate creating a venue to improve mental health. The garden was constructed using foundation funds and is free to the community.
- Billboard advertisements were placed in two locations during September 2018 to promote the web link for the Monroe County Mental Health Guide and Suicide Prevention Hotline.

6. Adult & Youth Substance Abuse

Strategies: Educate the community about the harmful effects of prescription drug abuse Continue hospital participation in the Monroe County Substance Abuse Coalition and the Monroe County Prescription Drug and Heroin Call to Action. Increase efforts to prevent prescription drug diversion, promote and encourage utilization of safe medication disposal programs including Red Med Box.

In 2017, actions taken included:

- Continued hospital participation in the Monroe County Substance Abuse Coalition and the Monroe County Prescription Drug and Heroin Call to Action, with 15 community collaborative events with hospital representation, four (4) community educational sessions and approximately 450 participants in community educational sessions.
- Project Assert representative brought into the hospital to work directly with patients who accept help when offered by our clinical staff for rehabilitation. Sent a staff nurse to Screening Brief Intervention and Referral to Treatment (SBIRT) Training (i.e. Trauma and Overdose) in anticipation of implementing the SBIRT program.
- PMRH Foundation, in 2017, raised funds for community mental health support and is
 partnered with the Drug and Substance Abuse Coalition, mental health agencies', the
 MCHD, and Monroe County Community College to deliver the inaugural youth summit in
 2018 students from every high school in the community were invited to an education on
 mental health and substance abuse issues.
- Promoted and encouraged utilization of safe medication disposal programs including Red-Med Box, with four (4) community sessions with approximately 450 participants at these sessions.
- Educated prescribers on greater utilization of Michigan Automated Prescription System (MAPS) with three (3) healthcare staff education sessions.

In 2018, actions taken included:

- The PMRH Foundation, in 2017, raised funds for community mental health support and partnered with the Drug and Substance Abuse Coalition, mental health agencies, the health department, and Monroe County Community College. Delivered the inaugural youth summit in 2018. Approximately 525 participants attended the summit.
- PMRH Foundation donated \$8000 to the Substance Abuse Coalition (SAC) of the United Way to provide a youth summit educating students from all Monroe County schools about substance abuse and mental health. Over 500 students and advisors attended the event. In addition, we provided two staff from ProMedica to serve on the committee that administered the event. (\$7000 donation to SAC and \$1000 spent on writing tablets and pens for each guest at the summit to take notes)
- In 2018, promoted and encouraged utilization of safe medication disposal programs including Red-Med Box, with four (4) community education sessions and approximately 360 participants at these sessions.
- Educated prescribers on greater utilization of Michigan Automated Prescription System (MAPS) with one (1) healthcare staff education session with 20 medical residents in attendance.

7. **Health Need Identified: Adult and Youth Safe Driving** (PMRH collaborated through the Building Healthy Communities Coalition; however the hospital did not implement the programs or provide direct services for this initiative.)

The information above reflects activities that were implemented to address 2016 CHNA hospital priority issues in 2017 and 2018 – 2019 statistics were not available at the time of this document. Additional measure of impact should be reflected in future Monroe County Health Assessments. The 2016 Community Health Needs Assessment for ProMedica Monroe Regional Hospital was posted online inviting feedback from the community, with no responses over the past three years.

IV. COMMUNITY HEALTH NEEDS ASSESSMENT

The ProMedica Monroe Regional Hospital process for identifying and prioritizing community health needs and services included:

- Review and discussion of Monroe County Health Assessment (CHA) and Community Health Strategic Plan;
- Discuss, select and prioritization of health needs to address over the next three years, using ranking methodology to prioritize the needs;
- Review of resources and gaps for related health needs;
- Identify evidence-based programs to improve health needs, when available; and
- Develop final hospital CHNA and three-year implementation plan to present to the hospital board(s) for approval prior to posting online.

The health areas that were examined by the formal county needs assessment survey include, but are not limited to: health care coverage, health care access and utilization, preventive medicine, women's health, men's health, oral health, health status perceptions, adult weight status, adult tobacco use, adult alcohol consumption, adult drug use, adult sexual behavior, adult mental health, cardiovascular health, cancer, asthma, arthritis, diabetes, quality of life, social determinants of health, environmental health, parenting, youth weight, nutrition and physical activity, youth tobacco use, youth alcohol use, youth drug use, youth sexual behavior, youth mental health, youth safety, bullying danger and violence, community domain, family domain, individual and peer domain, and school domain.

MONROE COUNTY HEALTH NEEDS ASSESSMENT PROCESS

ProMedica Monroe Regional Hospital utilized the data provided in the Monroe County Health Status Assessment, as the basis for their community health needs assessment and plan. 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 assessment utilizing the following methodology. (Refer to page 20 for a list of collaborating organizations).

PRIMARY DATA COLLECTION METHODS

DESIGN

This community health assessment was cross-sectional in nature and included a written survey of adults within Monroe 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

One survey instrument was designed and pilot tested for adults in this study. As a first step in the design process, health education researchers from the University of Toledo and staff members from HCNO 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. The investigators decided to derive the majority of the survey items from the BRFSS. This decision was based on being able to compare local data with state and national data. The project coordinator from HCNO conducted a series of meetings with the planning committee from Monroe County. During these meetings, HCNO and the planning committee reviewed and discussed banks of potential survey questions from the BRFSS survey. Based on input from the Monroe County planning committee, the project coordinator composed a draft of the survey containing 113 items for the survey. Health education researchers from the University of Toledo reviewed and approved the drafts.

SAMPLING | Adult Survey

The sampling frame for the adult survey consisted of adults ages 19 and older living in Monroe County. There were 113,125 persons ages 19 and older living in Monroe 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 Monroe County was obtained from Melissa Global Intelligence in Rancho Santa Margarita, California. 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 white 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 30% (n=332: CI=± 5.37). This return rate and sample size means that the responses in the health assessment should be representative of the entire county. Prior to surveys being sent, a power analysis was conducted which concluded that 383 surveys would need to be returned to have a \pm 5% confidence interval which is standard. However, there were only 332 surveys returned, thus reducing the level of power and broadening the confidence level to \pm 5.37%.

PROCEDURE | Adolescent Survey

The Michigan Profile for Healthy Youth (MiPHY) is an online student health survey offered by the Michigan Departments of Education and Health and Human Services. Youth in grades 7, 9, and 11 in Michigan School districts were used as the sampling frame for the youth survey. The results of the survey reflect student responses from the middle schools and high schools that voluntarily participated in Monroe County and may not be representative of all middle schools or high schools in Monroe County.

DATA ANALYSIS

Individual responses were anonymous. Only group data was available. All data was analyzed by health education researchers at the University of Toledo using SPSS 23.0. Crosstabs were used to calculate descriptive statistics for the data presented in this report. To be representative of Monroe County, the adult data collected was weighted by age, gender, race, and income using 2016 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 in the full report found at http://www.hcno.org/wp-content/uploads/2019/01/Revised-Final-Monroe-County-2018-Health-Assessment-1-10-19.pdf

LIMITATIONS

As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Monroe 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 Monroe County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation. It is important to note that although several questions were asked using the same wording as the Centers for Disease Control and Prevention (CDC) questionnaires, the data collection method differed. The CDC adult data was collected using a set of questions from the total question bank, and participants were asked the questions over the telephone rather than through a mailed survey. Lastly, caution should be used when interpreting subgroup results as the margin of error for any subgroup is higher than that of the overall survey. Secondary Data Collection Methods HCNO collected secondary data from multiple websites, including county-level data, whenever possible. HCNO utilized sites such as the Behavioral Risk Factor Surveillance System (BRFSS), Youth Risk Behavior Surveillance System (YRBSS), numerous CDC sites, U.S. Census data, and Healthy People 2020, among other national and local sources. All data is included as a citation in the section of the report with which it corresponds, and the URLs are available in the references at the end of this report. All primary data collected in this report is from the 2018 Monroe County Community Health Assessment (CHA). All other data is cited accordingly.

CONSULTING PERSONS AND ORGANIZATIONS

The process for consulting with persons representing the community's interests and public health expertise began when local community agencies were invited by the Building Healthy Communities Coalition 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. This community health assessment was cross-sectional in nature and included a written survey of adults and adolescents within Monroe 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 through the Building Healthy Communities Coalition of Monroe who contracted with the Hospital Council of Northwest Ohio, a non-profit hospital association located in Toledo, Ohio, was engaged to coordinate and manage the county health assessment and 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 Monroe County to conduct the county CHA and CHIP plan.

During these meetings, banks of potential questions from the Behavioral Risk Factor Surveillance and Youth Risk Behavior Surveillance surveys were reviewed and discussed. The drafts were reviewed and approved by health education researchers at the University of Toledo. In addition, the Monroe County Health Department provided feedback on this CHNA and implementation plan, to confirm these needs from a public health expert perspective.

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. In addition, the organizations that serve these populations and are experts in their field participated in the health assessment and community planning process including the United Way of Monroe County, Family Counseling & Shelter Services of Monroe County, the federally qualified Family Medical Center of Michigan, the Community Foundation of Monroe County, Salvation Army Harbor Light, the Monroe County Opportunity Program, and Catholic Charities of Southeast Michigan, to name a few.

ProMedica Monroe Regional Hospital, as the sole acute care facility in Monroe County was the only hospital participating in the Monroe County Community Health Status Assessment and planning process.

The results of the Monroe County Health Assessment were presented at a county data release event. There were key leaders from the community that represented public health, law enforcement, education, the elderly, social service agencies and other organizations in attendance at the public release of the community health needs assessment. At the event, those attending participated in focus groups for initially selecting Monroe County health priorities. Community participants were invited to join future workgroup sessions designed to select and rank priorities, inventory the availability and gaps in resources to address them, and create a community implementation plan for the next three years.

MONROE COUNTY STRATEGIC PLANNING PROCESS

Following the community assessment data release, the Building Healthy Communities Coalition of Monroe County, including key community leaders, participate in an organized process of community health improvement planning (CHIP) to create a 3-year plan to improve the health of residents of the county. The National Association of City County Health Officer's (NACCHO) strategic planning tool, Mobilizing for Action through Planning and Partnerships (MAPP), was used throughout this process.

The MAPP Framework includes six phases which are listed below

- Organizing for success and partnership development
- Visioning
- Conducting the MAPP assessments
- Identifying strategic issues
- Formulating goals and strategies
- Taking action: planning, implementing, and evaluation

The MAPP process includes four assessments, Community Themes & Strengths, Forces of Change, the Local Public Health System Assessment and the Community Health Status Assessment. These four assessments were used by the Monroe County CHIP Committee to prioritize specific health issues and population groups which are the foundation of this plan.

2018 Building Healthy Communities Coalition CHIP Priority Health Issues for Monroe County include:

- Chronic Disease Prevention
- Substance Use
- Mental Health
- Social Conditions

The Building Healthy Communities Coalition of Monroe County CHIP process included input from organizations and persons who represent the community. Collaborating organizations included:

Monroe County Health Department ProMedica Monroe Regional Hospital

Monroe Center for Healthy Aging Delaney Counseling Services

Great Start Collaborative Family Counseling and Shelter Services
City of Monroe Monroe County Mental Health Authority

Monroe County Commission on Aging

Lake Erie Transit

Monroe County Opportunity Program

Community Foundation of Monroe County

Monroe County Substance Abuse Coalition

Monroe County Intermediate School District

United Way of Monroe County. Catholic Charities of SE Michigan

American Cancer Society

Family Medical Center

Michigan State Police

Monroe Family YMCA

RSVP CASA

Senator Gary Peters Mental Health Partnership of Southeast MI

Monroe County Community College Michigan State University Extension

American Cancer Society Monroe County ISD

Monroe County Community Planning CAN Council

Many of the above organizations have staff with expertise in public health. The county strategic planning process was facilitated by staff employed by the Hospital Council of Northwest Ohio, who hold a Master's Degrees in Public Health. ProMedica Monroe Regional Hospital staff participated in the development of the community health assessment survey and CHIP plan for Monroe County. The Monroe County CHIP was written based on the conclusions and recommendations of all participating organizations.

V. MONROE COUNTY COMMUNITY HEALTH NEEDS & PRIORITIES

Key findings that were identified in the Monroe County Health Needs Assessment include (Note: statistics in parentheses below are the available percentages from previous Monroe County Health Assessments and may be used for comparison to current data):

- Health Care Access
 - ➤ 4% (9%) of adults were without health care coverage, vs. 8% in Michigan and 10% in the U.S.
- Cardiovascular Health
 - ➤ 1% (3%) of adults had a stroke, vs. 4% in Michigan and 3% in the U.S.
 - ➤ 32% (32%) of adults had been diagnosed with high blood pressure, vs. 33% in Michigan and 31% in the U.S.

➤ 31% (35%) of adults had been diagnosed with high blood cholesterol, vs. 38% in Michigan and 36% in the U.S.

Cancer

- ➤ 16% (12%) of adults had been diagnosed with cancer at some point in their lives, increasing to 37% of those over the age of 65
- ➤ In 2018, Fifty-four percent (54%) of Monroe County adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years. The CDC statistics indicate that colon cancer deaths accounted for 6% of all male and female cancer deaths from 2014-2016 in Monroe County (CDC Wonder, 2014-2016).

Diabetes

➤ 8% (13%) of adults had been diagnosed with diabetes, vs. 11% in Michigan and 11% in the U.S.

• Arthritis

➤ 36% (38%) of adults had been diagnosed with arthritis, vs. 32% in Michigan and 26% in the U.S.

• Asthma

➤ 20% (17%) of adults had been diagnosed with asthma, vs. 16% in Michigan and 14% in the U.S.

• Obesity

> 35% (31%) of adults were obese based on BMI, vs. 35% in Michigan and 35% in the U.S.

Alcohol Use

➤ 25% (21%) of adults were binge drinkers, vs. 19% in Michigan and 17% in the U.S.

Tobacco Use

➤ 16% (14%) of adults were current smokers, vs. 205 in Michigan and 17% in the U.S.

• Marijuana and Other Drug Use

- ▶ 65 (11%) of adults had misused prescription drugs in the past 6 months
- ➤ 11% (7%) of adults had used marijuana during the past 6 months

• Women's Health

- ➤ 60% (72%) of women over the age of 40 reported having a mammogram in the past two years, vs. 74% in Michigan and 72% in the U.S.
- > 52% (76%) of women age 40 and over have had a clinical breast exam
- ➤ 69% (84%) of women have had a Pap smear to detect cancer of the cervix in the past three years, vs. 81% in Michigan and 80% in the U.S.

• Men's Health

➤ In 2018, Eighty-two percent (82%) of Monroe County males were overweight or obese. Males were more likely to have been diagnosed with diabetes than females (11% compared to 6%).

• Preventive Medicine

> 76% (76%) of adults 65 and over had a flu vaccine in the past year, vs. 56% in Michigan and 58% in the U.S.

➤ 68% (55%) of adults ages 65 and over had a pneumonia vaccination, vs. 72% in Michigan and 73% in the U.S.

Adult Sexual Behavior

➤ In 2018, 73% of Monroe County adults had sexual intercourse. Six percent (6%) percent of adults had more than one partner in the past year. Seven percent (7%) of adults had been forced or coerced into some type of sexual activity when they did not want to.

• Quality of Life

➤ In 2018, 46% of Monroe County adults reported they were limited by an impairment or health problem. The most limiting health problems were back or neck problems (47%); arthritis/rheumatism (37%); stress, depression, anxiety or emotional problems (32%); and chronic pain (27%)

• Social Determinants of Health

➤ In 2018, 9% of Monroe County adults were threatened or abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Fifteen percent (15%) of Monroe County adults had four or more Adverse Childhood Experiences (ACEs) in their lifetime. About one-in-eight (13%) of adults had experienced at least one issue related to hunger/food insecurity in the past year.

Mental Health

- > 5% (3%) of adults considered attempting suicide in the past year
- ➤ 1% (1%) 9% of adults attempted suicide in the past year

• Oral Health

> 72% (80%) of adults had visited a dentist in the past year. vs. 70% in Michigan and 66% in the U.S. Cost (28%) was the number one reason they did not visit a dentist.

Parenting

➤ In 2018, 55% of Monroe County parents talked to their 6-to-17 year old about bullying and social media issues. One-in-four (25%) parents reported their daughter(s) had been vaccinated against the human papillomavirus (HPV), and 17% of parents reported their son(s) had been vaccinated against HPV

Youth (Youth for this report refers to grades 7, 9 and 11, and Michigan and U.S. stats are for grades 9-12 – statistics in parentheses are from the 2015 Monroe County report are for grades 6-12)

• Youth Weight

- ➤ 18% (17%) of youth were obese according to BMI, vs. 17% in Michigan and 15% in the U.S.
- ➤ 17% (12%) of youth were overweight according to BMI, vs. 16% in Michigan and 16% in the U.S.

Youth Tobacco Use

- ➤ 4% (7%) of youth in grades 9 and 11 were current smokers, vs. 1% in Michigan and 9% in the U.S.
- Youth Alcohol Consumption

- ➤ 18% (21%) of youth had at least one drink of alcohol in the past 30 days, vs. 30% in Michigan and 30% in the U.S.
- ➤ 12% (12%) of youth, who drank, took their first drink (other than a few sips) before the age of 13, vs. 16% in Michigan and 16% in the U.S.
- ➤ 10% (11%) of youth binge drank within a couple of hours in the past 30 days, vs. 13% in Michigan and 14% in the U.S.
- Youth Marijuana and Drug Use
 - ➤ 15% (12%) of youth had used marijuana at least one or more times in the past 30 days, vs. 24% in Michigan and 20% in the U.S.
- Youth Sexual Behavior*
 - ≥ 29% (26%) of youth have had sexual intercourse, vs. 38% in Michigan and 40% in the U.S.
 - ➤ 2% (3%) of youth had sexual intercourse for the first time before the age of 13, vs. 3% in Michigan and 3% in the U.S.
 - ➤ 4% (8%) of youth have had four or more sexual persons in their life, vs. 9% in Michigan and 10% in the U.S.
- Youth Mental Health*
 - ➤ 23% (11%) of youth had seriously considered attempting suicide in the past year, vs. 21% in Michigan and 17% in the U.S.
 - ➤ 10% (6%) of youth attempted suicide in the past year, vs. 9% in Michigan and 7% in the U.S.
- Youth Safety and Violence*
 - ➤ 13% (19%) of youth had ridden in a car or other vehicle driven by someone who had been drinking alcohol in the past month, vs. 15% in Michigan and 17% in the U.S.
 - ➤ 25% (28%) of youth had been bullied on school property in the past 12 months, vs. 23% in Michigan and 19% in the U.S.

Note: Many identified health needs are addressed by physicians at the time of related patient visits.

The Building Healthy Communities Coalition of Monroe County Community Health Improvement Workgroup, using the Monroe County Health Status Assessment, prioritized the county health issues, 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 Monroe County residents. In some areas of identified need, ProMedica is taking a system approach to address these community health needs, to most efficiently use resources and to prevent duplication of services.

Table 2 - Monroe County Community Health Improvement Plan (CHIP) Priorities and Strategies	Lead Agencies
Priority 1: Chronic Disease Prevention	
Wellness outreach campaign.	 ProMedica Monroe Regional Hospital Monroe County Planner

	City of Monroe	
	Monroe County for Health Aging	
	• Great Start	
2. Nutrition prescriptions	American Cancer SocietyProMedica Monroe Regional Hospital	
3. Prescriptions for physical activity	ProMedica Monroe Regional Hospital	
3. Trescriptions for physical activity	Prowedica Monroe Regional Hospital	
4. Healthy food initiatives	Monroe County Opportunity Program	
5. Nutrition education programs and physical activity interventions	Monroe County Health Department	
interventions	Monroe Family YMCA Michigan State University Entension	
6. Promote breastfeeding	 Michigan State University Extension Monroe County Health Department	
o. Tromote breastreeding	ProMedica Monroe Regional Hospital	
7. Physically active classrooms	Monroe County Health Department	
This search was to this stooms	Monroe County Intermediate School District (ISD)	
8. Health school recognition program	Monroe County Health Department	
Priority 2: Substance Abuse	· · ·	
Community awareness and education of risky behaviors and substance use issues and trends	Monroe County Substance Abuse Coalition (MCSAC)	
Smoke and vape free policies	Monroe County Substance Abuse Coalition	
2. Smoke take vape free policies	(MCSAC)	
	American Cancer Society	
3. Links to tobacco cessation	American Cancer Society	
4. School-based alcohol/other drug prevention programs	· ·	
	Catholic Charities of Southeast Michigan	
Priority 3: Mental Health		
Priority 3: Mental Health 1. Mental Health First Aid		
<u> </u>	Monroe Community Mental Health Authority ISD Mental Health Coordinators	
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PMRH participation with organizations addressing these county health priority issues may also include financial support. Along with PMRH, many social agencies, schools, faith based organizations and law enforcement may also be addressing some of these issues that may not be specifically included in these collaborative priority actions.

MONROE COUNTY - HEALTH ISSUES FOR UNINSURED, LOW INCOME AND MINORITY GROUPS

Due to the relatively small percentage of non-white population in Monroe County (2.6% are African American, 3.7% are Hispanic, 0.7% are Asian and 1.9% are two or more races), and due to the small number of minorities responding to the surveys 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 2018 Monroe County Health Assessment data identified that 4% of Monroe County adults were without health care coverage.

In Monroe County, 28.7% of residents live below the poverty level (Source U.S. Census, V2018). Although the percent of minority individuals included in the survey (8.5% non-White) does not allow for valid statistical analysis for these populations, in almost every category of the Monroe County community health needs assessment, individuals with an income less than \$25,000 had poorer access than other income levels.

Primary and chronic disease needs and other health issues were more problematic for uninsured, those under age 30 and low-income (income < \$25,000) adults in most areas surveyed. Four percent of Monroe County adults surveyed were uninsured in 2018, increasing to 12% of those with incomes less than \$25,000. Those most likely to be uninsured were adults with an income level under \$25,000 (12%). Monroe County adults who were uninsured reported that the reasons they were without health care coverage were that they lost their job or changed employers (38%).

Health issues of low-income (<\$25,000 income) adults include: lack of health care coverage (12%), some women's screenings – breast exam and Pap smears, dental visit in past year (52%), poor health perceptions (41%), current smoker (31%), and feeling sad or hopeless for two or more weeks in a row (29%).

Table 3 below shows health comparisons for low income persons with an annual income less than \$25,000 compared to persons with an annual income greater than \$25,000.

Table 3 – Health Issue	Income < \$25,000	Income > \$25,000
Rate health as fair/poor	41%	9%
Uninsured	12%	2%
Overweight/Obese by BMI	75%	69%
Current Smoker	31%	13%
3 or More Days Drinking in Past Month	36%	57%

Medication Misuse	7%	6%
Marijuana Use in Past 6 Months	18%	11%
Diagnosed with High Blood Pressure	44%	31%
Diagnosed with High Cholesterol	32%	32%
Diagnosed with Diabetes	18%	5%
Feeling Sad or Hopeless for 2+ Weeks	29%	11%
Could Not See a Doctor because of Cost	31%	8%
Visited a Dentist in Past Year	52%	76%

The Building Health Communities Coalition of Monroe County concluded that key leadership in Monroe County should be made aware of these 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 Monroe County residents.

MONROE COUNTY - INFORMATION GAPS

Although the formal county assessment provided sufficient primary data, some secondary and public health data is relatively outdated (2013-2015) and therefore leaves gaps in measurement about key indicators during the time period. Through the formal MAPP process, gaps were identified in each CHIP initiative, and a resource assessment was developed.

The community needs assessment, historical referral data, and statewide databases provide a rich amount of information to determine the general state of the community. However, the data has limitations, including the age of public health data. Data is not available for all areas of health to evaluate the health needs of some minority and non-English speaking residents.

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=21). Each action plan will consider the impact on low income and underserved populations. While local experts and experience supplement statistical data, underlying health beliefs that are at the core of individual health outcomes are thinly identified.

The Building Healthy Communities Coalition of Monroe County Community Health Improvement Workgroup is in the process of using the findings to closely examine current resources available to Monroe County residents which address one or more of the adult and youth priority health issues. Identification of potential gaps by specific population groups and/or geographic locations will be included.

Quantitative measures (secondary data) of both health outcomes and health factors are useful in assessing community needs, but monitoring community residents' thoughts (primary data) about their health status and opportunities for improvement can reveal other areas of concern. Data gathered through surveys and interviews describes what is important to those who provide the

information and is useful in prioritizing which health needs should be addressed. It also is more contemporary than quantitative public health data due to delays, sometimes in excess of several years, in reporting.

It was possible to identify disparities in mortality and morbidity, including health behaviors, by income level but not by race. With a relatively low percentage of respondents for each race there was insufficient statistically significant data to demonstrate differences in health outcomes or factors among races. Also, data is not available on all areas of health to evaluate the health needs of some minority and non-English speaking residents. While local experts and experience supplement statistical data, underlying health beliefs that are at the core of individual health outcomes are thinly identified.

VI. PROMEDICA MONROE REGIONAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

ProMedica Monroe Regional Hospital leadership convened a CHNA committee to thoroughly review the county assessment data, select and prioritize key health indicators specific to their demographic, review available resources and gaps in resources, and development of implementation plans to address the specific needs of the population.

Prioritization of health needs in its community was accomplished by the ProMedica Monroe Hospital CHNA committee that included staff from administration and various areas related to patient care. The ProMedica Monroe Hospital CHNA committee developed the hospital CHNA and implementation plan, following the Healthy Communities Coalition of Monroe County CHIP planning process, through the following steps:

- Review of existing Monroe County primary and secondary data sources;
- Review of Monroe County CHIP;
- Discussion, selection and ranking of priority health issues for the hospital;
- Identification of current community resources which address the priority health issues;
- Discussion of gaps in county-level services and programming;
- Discussion of effective programs, policies, and strategies to recommend for implementation; and
- Identification of specific implementation action steps for each of the next three years (2020-2022);
- Board of Trustee review and approval of the CHNA and three year plan

Along with state and U.S. data comparisons, key secondary health data considered for the hospital CHNA include the leading causes of death:

Table 4 Monroe County Leading Causes of Death 2014-2016	
1. Heart Disease	25% of all deaths

2. Cancer	24%	
3. Accidents, Unintentional Injuries	7%	
4. Chronic Lower Respiratory Disease	6%	
5. Stroke	5%	
(Source: CDC Wonder, 2014-2016)		

Although some areas of the Monroe County Strategic Plan were not identified as part ProMedica Monroe Regional Hospital CHNA plan, the hospital participates in many areas of the county plan through various community health coalitions and initiatives, and ProMedica Monroe Regional Hospital focused on other areas of need, as discussed below.

VII. PROMEDICA MONROE REGIONAL HOSPITAL COMMUNITY HEALTH NEEDS & PRIORITIES

As indicated in Table 2, Monroe Regional Hospital is actively involved in many priority health areas identified through the county CHIP process. Following a review and discussion of health data and the county health priorities, as well as organizational and community programs to address these health priorities, ProMedica Monroe Regional Hospital identified the following priority health needs, listed in order of priority, and prioritized through ranking methodology:

1. Chronic Disease Prevention – Education and Screening

- ➤ One percent (1%) of Monroe County adults reported they had survived a stroke, increasing to 3% of those over the age of 65 vs. 4% of Michigan and 3% of U.S. adults reported having had a stroke in 2016 (Source: 2016 BRFSS).
- ➤ Nearly one-third (32%) of adults had been diagnosed with high blood pressure. The 2015 BRFSS reports hypertension prevalence rates of 33% for Michigan and 31% for the U.S.
- ➤ The Monroe County age-adjusted stroke mortality rate from 2014 to 2016 was lower than the state rate and higher than the Healthy People 2020 target objective.16% (12%) of adults had been diagnosed with cancer at some point in their lives, increasing to 37% of those over the age of 65
- ➤ In 2018, Fifty-four percent (54%) of Monroe County adults ages 50 and over had a colonoscopy or sigmoidoscopy in the past 5 years. The CDC statistics indicate that colon cancer deaths accounted for 6% of all male and female cancer deaths from 2014-2016 in Monroe County (CDC Wonder, 2014-2016).

2. Social Determinants of Health – Food Insecurity

Nearly one-in-eight (13%) adults had experienced at least one issue related to hunger/food insecurity in the past year. They experienced the following: had to choose between paying bills and buying food (10%), worried food might run out (6%), did not eat because they did not have enough money for food (5%), went hungry/ate less to provide more food for their family (5%), loss of income led to food insecurity issues (4%) and their food assistance was cut (3%).

Nine percent (9%) of adults experienced more than one issue related to hunger/food insecurity in the past year.

3. Mental Health – Education, Screening and Access

- ➤ In the past year, 13% of Monroe 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, increasing to 29% of those with incomes less than \$25,000.
- Five percent (5%) of Monroe County adults considered attempting suicide in the past year.
- ➤ One percent (1%) of adults reported attempting suicide in the past year.
- ➤ One-quarter (25%) of Monroe County youth felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
- > Twenty percent (20%) of youth reported they had seriously considered attempting suicide at some time in their life.
- About one-in-ten (9%) youth made a plan about how they would attempt suicide in their lifetime.
- Five percent (5%) of youth reported they had ever tried to kill themselves.

4. Obesity - Physical Activity

- ➤ In 2018, sixty-nine percent (69%) of Monroe County adults were either overweight (34%) or obese (35%) by Body Mass Index (BMI). This puts them at elevated risk for developing a variety of diseases.
- ➤ In Monroe County, 57% of adults engaged in some type of physical activity or exercise for at least 30 minutes three or more days per week. Nearly one-third (32%) of adults exercised five or more days per week. About one-fifth (21%) of adults did not participate in any physical activity in the past week, including 4% who were unable to exercise.
- ➤ The CDC recommends that adults participate in moderate exercise for at least two hours and 30 minutes every week or vigorous exercise for at least one hour and 15 minutes every week. Whether participating in moderate or vigorous exercise, the CDC also recommends muscle-strengthening activities that work all major muscle groups on two or more days per week (Source: CDC, Physical Activity Basics 2015).
- About one-in-eight (13%) middle school youth and 18% of high school youth were considered obese.
- ➤ Over half (56%) of youth participated in at least 60 minutes of physical activity on 5 or more days in the past week.
- ➤ Eighteen percent (18%) of youth watched 3 or more hours per day of TV on an average school day.
- Forty-six percent (46%) of youth played video or computer games or used a computer for something that is not school work for 3 or more hours per day on an average school day.

5. Tobacco/Vaping Cessation

- ➤ In 2018, 16% of Monroe County adults were current smokers, and 24% were considered former smokers.
- > Six percent (6%) of adults used e-cigarettes or vape pens in the past year.
- ➤ Thirty-nine percent (39%) of adults did not know if e-cigarette vapor was harmful
- Seven percent (7%) of middle school youth had used an electronic vapor product in the past month, and 27% of high school youth had used an electronic vapor product in the past month.
- ➤ Seven percent (7%) of youth had tried cigarette smoking, even one or two puffs, before the age of 13. The average age of onset for smoking was 13.0 years old.

6. Substance Abuse - Opioid Addiction

- Monroe County adults thought the following drugs were most commonly used in Monroe County: marijuana (67%); alcohol (61%); heroin (58%); prescription medications that are used to get high (44%); cocaine (26%); methamphetamines (20%); LSD, mescaline, peyote, psilocybin, DMT or mushrooms (6%); Ecstasy, E, or GHB (5%); and inhalants such as glue, toluene, gasoline, or paint (4%).
- ➤ Three percent (3%) of Monroe County adults have used a program or service to help with an alcohol or drug problem for either themselves or a loved one. Reasons for not using such a program included the following: had not thought of it (2%), stigma of seeking alcohol and drug services (1%), did not know how to find a program (1%), wait time (1%), their insurance did not cover it (1%), they were wait-listed (1%), could not afford to go (1%), fear (1%), transportation

The above priorities not only address some leading causes of death in the county, but also align with initiatives prioritized in Healthy People 2020. The Monroe County Health Department provided feedback about the hospital's CHNA and implementation plans, to confirm these needs from a public health expert perspective.

ProMedica Monroe Regional Hospital is participating in the community wide benefit plan by working with the Building Healthy Communities Coalition of Monroe County, and organizations and coalitions in the community who are addressing prioritized health issues, as well implementing hospital plans to support these initiatives.

VIII. COMMUNITY UNMET NEEDS, GAPS AND RESOURCE ASSESSMENT

ProMedica Monroe Regional Hospital did not address all of the needs identified in the most recently conducted Monroe 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 in collaboration with other community organizations and coalitions.

The Monroe County CHIP process included a resource assessment and gap analysis of the priority health needs. Table 2 indicates the community wide organizations and coalitions addressing the prioritized Monroe County CHIP Strategic Plan health priorities. Monroe Regional Hospital participates with many of these organizations and coalitions through representation and/or funding.

Although community organizations, schools and faith based organizations may have internal programs that are not known widely, 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. Due to the size of the community, it is difficult to inventory all resources and gaps, even with the input of multiple organization and individuals.

With that being said, ProMedica Monroe Regional Hospital maintains awareness of the primary health issues identified for the county, and demonstrate a willingness to partner as needed on these endeavors. While many of these issues are best handled by organizations specifically targeted to the problem area, the hospital participates with many of these coalitions through representation, funding, or a combination of both. Table 2 lists the community wide organizations and coalitions addressing the prioritized Monroe County strategic plan health needs.

IX. PROMEDICA MONROE REGIONAL HOSPITAL - IMPLEMENTATION STRATEGY SUMMARY

Using the Monroe County CHIP strategic plan, Monroe Regional Hospital commenced with their CHNA strategic planning process, whereby they analyzed and discussed data, selected and prioritized community health needs for the hospital-based CHNA implementation plan, reviewed resources and gaps in resources, and developed hospital-based strategic action plans. They took into consideration the Monroe County CHIP strategic plan, as well as Healthy People 2020. No community feedback was received on the previous CHNA posted on the ProMedica website. During this process, ProMedica Monroe Regional Hospital identified the following health priorities, listed in order of priority:

- 7. Chronic Disease Prevention
- 8. Social Determinants of Health Food Insecurity
- 9. Mental Health
- 10. Obesity Physical Activity
- 11. Tobacco/Vaping
- 12. Opioid Cessation

Feedback to these hospital specific priorities was provided by the Director of the Monroe County Health Department. In addition to the above hospital specific strategies, ProMedica Monroe Regional Hospital will continue to collaborate with the Monroe County Building Healthy Communities Coalition to support its strategic initiatives surrounding those needs.

As part of the related three-year plan, specific actions and measures will be implemented to maximize impact of these plans. To achieve maximum impact, ProMedica Monroe Regional Hospital will continue to collaborate with community organizations that share commitments to a healthier region. Collaborations include participation, gifts, in kind support, and coordinated interventions. The hospitals provide charitable funding for various community programs and help organize volunteers and fund raising for community charities.

The implementation plans for these priorities include specific programs and measurements that will occur annually and progress will be reported regularly to leadership and the Board of Directors. Following approval of the ProMedica Monroe Regional Hospital implementation strategy and plan by the ProMedica Monroe Regional Hospital board of trustees, the execution of the ProMedica Monroe Regional Hospital implementation action plan will be initiated, with quarterly updates of these plans provided to the ProMedica Monroe Regional Hospital leadership, as well as the ProMedica Monroe Regional Hospital Board of Trustees.

Following approval of ProMedica Monroe Regional Hospital 2019 CHNA and implementation plan by the board of trustees, the execution of the implementation action plans will be initiated in 2020, with updates of these plans provided to respective hospital leadership, as well as the hospital's board of trustees.

Annual inclusion of a community benefit section in operational plans is reflected in the ProMedica strategic that is approved by the board of trustees, and monitored by 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 this needs assessment is inherent in the hospital budget. The 2019 CHNA and 2020-2022 Implementation Plan was adopted and approved by the ProMedica Monroe Regional Hospital Board of Trustees on November 4, 2019.

X. ACCESS TO PROMEDICA MONROE REGIONAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT AND OTHER RESOURCES

ProMedica Monroe Regional Hospital community health needs assessment is widely available in printable (PDF) form to the public on the hospital website at:

<u>https://www.promedica.org/Pages/about-us/default.aspx</u> or http://www.mercymemorial.org/Main/Home.aspx

Additional regional county health needs assessments may be found on the following website: Hospital Council of Northwest Ohio - http://www.hcno.org/community/reports.html

To provide feedback or for any questions related to the ProMedica Monroe Regional Hospital community assessment process and strategic plan, or to request a free, printed copy of the assessment, please email: gaye.martin@promedica.org.