

TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS

2019 JOINT COMMUNITY HEALTH NEEDS ASSESSMENT

Approved and Adopted by Arrowhead Behavioral Hospital Board of Trustees before December 31, 2019

Approved and Adopted by ProMedica Metro Hospitals' Board of Trustees on November 14, 2019

PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS

2019 JOINT COMMUNITY HEALTH NEEDS ASSESSMENT

TABLE OF CONTENTS

- I. Introduction page 3
- II. ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine and Arrowhead Behavioral Hospitals Community Service Area – page 4
- III. Impact of Previous Community Health Needs Assessment Plans page 6
- IV. Community Health Needs Assessment page 12
- V. Lucas County Health Needs & Priorities page 21
- VI. ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine and Arrowhead Behavioral Hospitals Community Health Needs Assessment Process page 28
- VII. ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine and Arrowhead Behavioral Hospitals Community Health Needs & Priorities page 30
- VIII. ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine and Arrowhead Behavioral Hospitals Community Unmet Needs, Gaps and Resource Assessment page 32
- IX. ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine and Arrowhead Behavioral Hospitals Joint Implementation Strategy Summary page 33
- X. Access to ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine and Arrowhead Behavioral Hospitals Community Health Needs Assessments and Other Resources – page 34

I. <u>INTRODUCTION</u>

This 2019 Community Health Needs Assessment (CHNA) is a joint assessment between ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals, all member hospitals of ProMedica Health System serving the primary service area of Lucas County, Ohio. Toledo, Flower and Wildwood Orthopaedic & Spine hospitals are committed healthcare resources for the Toledo metropolitan area, and the larger area of northwest Ohio and southeast Michigan community, providing acute emergency services, medical and surgical inpatient care, and outpatient ambulatory services, as well as mental health services. As not-for-profit hospitals, all patients are treated regardless of their ability to pay. Arrowhead Behavioral Hospital provides treatment for mental health and substance abuse. ProMedica hospitals' mission is to improve the health and well-being of the communities we serve.

The Toledo Hospital has served Lucas County and the surrounding Toledo metropolitan region for over one hundred years. The acute care hospitals are also teaching sites for students in medicine, nursing, and the allied health professions. In addition to inpatient and outpatient services, the acute care hospitals serve the surrounding community with both primary and specialty clinics, including safety net clinics that serve uninsured and underinsured residents of the Toledo metropolitan area. Significantly, the ProMedica Toledo Hospital is the region's largest employer, and has a dedicated community reinvestment plan that has coincided with significant upgrades in highway infrastructure, redevelopment of vacant buildings, and renewal of older neighborhoods, and is a driver of employment and associated community stability, with a concentrated focus on the social determinants of health, as a system.

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals, and Arrowhead Behavioral Hospital jointly conducted and adopted this community health needs assessment (CHNA) in 2019 and will implement the associated three year, strategic plan beginning in 2020. ProMedica hospitals participated in the 2016/2017 Lucas County Community Health Assessment (CHA) which was cross-sectional in nature and included collection and analysis of child, adolescent and adult data. Active engagement of community members throughout the planning process is regarded as an important step in completing a valid needs assessment. One area of weakness of the CHNA was the relative age of available secondary and public health data. 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. A resource assessment and gap analysis was completed as part of this process. Following the formal county health assessment process, ProMedica staff joined multiple community organizations to collaborate to develop a Community Health Improvement Plan (CHIP) for Lucas County.

In 2019, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals convened CHNA committees to review the most recent Lucas County

CHA and CHIP, taking into account the 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 hospitals received feedback on the CHNA and plan from the Toledo Lucas County Health Department, to confirm these needs from a community health expert perspective.

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals will specifically implement programs to address the following health needs, prioritized by ranking methodology, and listed in priority order, by hospital:

Toledo Hospital

- 1. Trauma
- 2. Mental Health/Substance Abuse

Flower Hospital

- 1. Mental Health
- 2. Cancer

Wildwood Orthopaedic & Spine Hospital

- 1. Hunger
- 2. Obesity

Arrowhead Behavioral Health

- 1. Substance Abuse
- 2. Mental Health

In addition, as part of ProMedica health system, some community health programs are developed and implemented at the system level, with social determinants of health, healthy aging and infant mortality identified as focal points for the system. Business units, such as hospitals, within ProMedica develop plans and implement programs that are complimentary to each other while trying to reduce duplication, which is the driving force behind this joint CHNA. The ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals, and Arrowhead Behavioral Hospital joint CHNA may be accessed online at www.promedica.org/chna

II. PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS COMMUNITY SERVICE AREA

The definition of the primary community served by ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals for this

assessment is Lucas County, Ohio, with a population of 429,899 (U.S. Census, V2018). Data indicates 70.57% of Flower Hospital's inpatients and 74.93% of its emergency patients reside in Lucas County; and 54.54% of inpatients at Toledo and Wildwood Orthopaedic & Spine Hospitals reside in Lucas County, with 83.61% of Toledo Hospital's emergency patients residing in Lucas County. These four hospitals along with six other hospitals meet the needs of the greater Lucas County area, with Toledo Hospital also serving as a regional tertiary referral hospital to a 28 county area in northwest Ohio and southeast Michigan. The secondary service area that is served by the hospitals includes the contiguous counties of Fulton, Ottawa and Wood located in the northwestern region of Ohio, with a total estimated population of 213,741 (240,625) (Source: U.S. Census Bureau,

https://www.census.gov/quickfacts/, V2018; statistics below in parentheses are from the previous hospital CHNA to be used for comparison); and Lenawee and Monroe counties, located in the southeastern region of Michigan, with a total population of 248,705 (248,272) (U.S.Census, V2018). For the purposes of this plan, health statistics and factors for Lucas County were reviewed and used in completing this community health needs assessment.

Demographic review of Lucas County, Ohio, Of the 429,899 (441,815) residents living in Lucas County, 6.4% (6.7%) are under the age of five, 22.9% (20.7%) are under the age of 18, and 16.3% (14.4%) of residents are age 65 and over. The majority of the population in Lucas County were White alone 74.3% (75.1%), with African American 20.3% (19.8%), Hispanic 7.3% (6.8%), Asian 1.8% (1.7%) and two or more races 3.2% (2.9%) comprising the rest of the population. The median household income in Lucas County is \$44,820 (\$41,751), with 17.9% (20.7%) of persons had income below the poverty level. 6% (7.3%) of Lucas County residents are uninsured according to the 2016/17 Lucas County Community Health Assessment.

Demographics for the secondary service area counties may be found at https://www.census.gov/quickfacts/, V2018). County health assessments for the contiguous counties may be found 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. Due to the presence of other hospital entities in each of the contiguous five counties, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals, focus most of their community health efforts within the greater Lucas County area - leaving the other county health improvement efforts to the hospitals located in each county.

Table 1 - Hospitals Serving the Five County Service Area		
Fulton County Health Center	Wauseon, OH (Fulton)	
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 Bay Park Hospital	Oregon, 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)
ProMedica Monroe Hospital	Monroe, MI (Monroe)
Wood County Hospital	Bowling Green, OH (Wood)
Magruder Hospital	Port Clinton, OH (Ottawa)

These ProMedica hospitals also collaborate with other entities to address issues in our service area. Community organizations who participated in the health assessment and strategic planning process include, but are not limited to: Adelante, ABLE, American Cancer Society, Area Office on Aging of Northwestern Ohio, Inc., Family & Children First Council, Hospital Council of Northwest Ohio, Healthy Lucas County, Hospital Council of Northwest Ohio, Lake Erie West Traffic Safety, Lucas County Family and Children First Council, Mercy Health, New Concepts, Neighborhood Health Association, Ottawa Hills Schools, Ohio State University Extension, ProMedica, Toledo Fire and Rescue Department, Toledo/Lucas County CareNet, Toledo Lucas County Commission on Minority Health, Toledo Lucas County Health Department, Toledo Public Schools, United Way of Greater Toledo, United Pastors for Social Empowerment, YMCA of Greater Toledo/Live Well Greater Toledo, YWCA Hope Center, and YWCA Child Care Resource and Referral. Additional meetings were held with other community partners to ensure community input.

III. IMPACT OF PREVIOUS COMMUNITY HEALTH NEEDS ASSESSMENT PLANS

The 2016 Joint Community Health Needs Assessment for ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals was posted online inviting feedback from the community, with no responses over the past three years. Beginning in 2017, ProMedica Toledo Hospital implemented programs in Lucas County to address the following health needs, listed in order of priority, with the following impact demonstrated in 2017 and 2018 (Note: 2019 activities were not complete at the time of this publication and will not be included in this summary):

1. Trauma – Education and Fall Prevention

Strategies focused on EMS (Emergency Medical Services) education and improving balance will improve emergency care and fall prevention will improve outcomes for these

populations. Actions taken included:

- Provided free Continuing Medical Education (CME), in various categories, to EMS providers in the region to improve the care provided to patients at the scene prior to transportation to a hospital. In 2017, over 48 sessions with 566 participants were provided free education. Some topics include Narcotic Overdose, Trauma Triage, Circadian Rhythm, Pediatric Trauma, Heart Failure, Interpreting Vital Signs (Adult and Pediatric), Pediatric Behavioral, Emergency Preparedness, Pediatric Behavioral Emergencies, Back to the Basics, stroke, 12 Lead Class, Paramedic Refresher, Emergency Vehicle Operator Course (EVOC), Northwester Ohio Volunteer Firemen's Association (NOVFA) Fire School, and Geriatric Emergencies. In 2018, over 41 sessions with 312 participants were provided free education. Some topics included: Geriatric Psychiatric Issues, Narcotic Overdose, Orthopedic Aspects of Emergency Care, Pediatric Trauma, Stroke Update, and Spinal Motion Restriction.
- o Provided Matter of Balance and other fall prevention education sessions in the community, at 44 venues, with over 7,500 participants.
- o Provided free home safety assessments for ProMedica home care patients, with 12,828 assessments in 2017 and 13,104 assessments in 2018.

2. Cardiovascular Disease

Strategies focused on increasing education on CPR will improve outcomes for individuals experiencing a myocardial infarction (heart attack) in the community. Actions taken included:

- Provided 17 free Hands Only CPR education sessions to the public with over 4,000 participants.
- Provided assistance to ten Toledo Public Schools to meet CPR graduation requirement with 25 employees trained in 2017. Provided assistance to ten Toledo Public Schools to meet CPR graduation requirement, with 3,202 students trained in 2018.

Based on their 2016 CHNA Implementation Plan ProMedica Flower Hospital implemented programs in Lucas County in 2017 to address the following health needs, listed in order of priority, with the following impact demonstrated in 2018 (complete 2019 activities were not available at the time of this publication):

1. Mental Health

Strategies focused on advocacy, capacity building and programming for mental health will increase access to resources and overall care and outcomes for patients with a mental health diagnosis. Actions taken included:

o "Critical ConneXions" Conference was sponsored in part by ProMedica/Flower Hospital and was held at the Huntington Center on Saturday, March 18, 2017, to educate and inspire coaches and youth leaders to play a more active role in identifying warning signs and addressing mental health issues affecting young people. Attendees heard an inspiring and encouraging message from keynote speaker, former coaching legend and sports analyst Lou Holtz. Educational presentations by the Fellowship of Christian Athletes and Harbor

- Behavioral Health addressed the mental health issues facing children and teens in our communities and provided the potentially life-saving tools and techniques coaches and leaders need to recognize mental health warning signs in the young people they serve. The number of participants was approximately 600.
- On Friday, November 3, 2017, at the 21st Annual Psychiatric Symposium, Dr. Mark Hurst Medical Director of the Ohio Department of Mental Health and Addiction Services, spoke regarding Traumatic Experiences and their Impact on Physical, Emotional, and Societal Health. Also, discussed were methods to implement trauma- informed practices into clinical settings and how to incorporate into family education. The number of participants was approximately 225.
- On May 1, 2018 Flower Hospital Psychiatric Director participated in a panel at the Stomp Out Stigma presentation. This program was presented in conjunction with the Sylvania Schools Parent Organization and ProMedica – over 150 participants for the lecture/panel discussion and an information table for related education was available.
- Lake High School October 10, 2018 a Flower Hospital staff member had an education table at the Project Change Event, with approximately 300 participants.
- On November 2, 2018, the Second Annual Psychiatric Symposium was held with two Flower Hospital speakers. Dr. Johnathon Stewart spoke regarding Management of Psychiatric and Behavioral Problems in Dementia. He described three basic principles of working with patients with dementia and how to incorporate family education related to dementia. Dr. Bachaar Arnout presented on Managing Substance Use Disorders including community resources for patients and families. The number of participants was approximately 214.
- O Programming Flower Hospital developed and maintained a family support group for parents and families whose children have a mental health diagnosis by partnering with community groups to increase staffing that provides system and resource navigation support to parents and families whose children have a mental health diagnosis. Collaborated with community groups to create information and referral resources for parents and families with children who have a mental health diagnosis. Providing support mechanisms and education about mental health programs and treatment to parents and families should increase access to mental health programs and treatment.
- Throughout 2017, the committee developed a 32-page Mental Health Resource Guide for Northwest Ohio - books were printed for resource fairs and an online version is at www.promedica.org/NWOhioMHR, to create information and referral source for parents and families.
- In May 2017 and May 2018 psychiatric staff participated in the Lucas County National Alliance for Mental Illness (NAMI) Walk to increase mental awareness, health resources and collaboration.
- Worked with NAMI on plan to increase staffing to enable increased hours for 2018.
 Continue to work on funding.

- From March 6 to May 22, 2018 ProMedica Flower Hospital provided the space for NAMI to host their 12-week Family to Family education sessions - seven families participated in these sessions.
- Funding secured in 2018 to support NAMI increased staffing to enable increased hours for 2019.
- Held educational sessions each year that provided education and information on various topics and issues that are important to parents and families whose children have a mental health diagnosis.
- o Participated in the African American Male Walk on Saturday, August 19, 2017, hosting an educational table, engaging 28 participants.
- Participated in NAMI conference for African American families on October 20, 2017. Jim Thompson, Social Worker, participated in a two-hour panel discussion to answer questions and promote family education. There were approximately 75 participants.
- Participated in NAMI Mentor Café on November 28, 2017. Jim Thompson, Social Worker, participated in a 2-hour educational family support meeting, and stressed the importance of family as partners in the overall treatment process.
- O Provided a Mock Heroin Overdose presentation for the Lucas County Health Department on June 20, 2017, with approximately 20 participants. Flower Hospital Emergency Department nurses and Julie Kookoothe, director of mental health services, presented four versions of a Mock Heroin Overdose and provided education on where to find treatment for mental health and drug/alcohol abuse, including parent support for those in crisis.
- O Provided A Mock Heroin Overdose presentation at the Eastern Maumee Bay Chamber of Commerce Heroin Forum on October 26, 2017. Flower Hospital Emergency Department nurses and Julie Kookoothe, director of mental health services, provided parent education and how to access resources for mental health and drug/alcohol treatment. There were approximately 50 participants.
- Provided a Mock Heroin Overdose presentation for the "Families and Addicts Coming Together" (FACT) support group at the Pilgrim Church in West Toledo on December 6, 2018. Education was provided, with resource materials distributed along with information on how to access other resources. Approximately 40 people participated in the presentation/discussion.

2. Cancer

Strategies to engage and educate community members on cancer screenings and early detection of cancer will improve outcomes related to cancer.

- Developed community-based programs to engage community partners to develop and implement a unique Lay Health Advisor training to address cancer health disparities among medically underserved in Lucas County (2017-2019). Provided a 3-session Lay Health Advisor training program for community members. Sessions included: Colorectal Cancer screening education, Prostate Cancer Screening Education, Survivor stories and resources. In 2017:
 - Continued to meet with community barbers on providing cancer education to barber shop clients.

- ➤ "Brews and Bros' Men's Health Fundraiser held in May 2017 to fund program for cancer disparities in men's health.
- ➤ Power Point education on Prostate, Colorectal and Lung cancer was developed and presented by a ProMedica physician on April 6 to African American men's event.

In 2018:

- ➤ Introduced barbers to ProMedica doctors to encourage relationships. Provided resources and education at each of the five African American barbershops in program.
- ➤ Free Community Prostate Cancer Screening at Scott High School for Minority Health Month in collaboration with Toledo-Lucas County Dept. of Health.
- Three Saturday Barbershop Screenings providing colorectal testing FIT kits, nutrition education and physician speakers on various related topics.
- ➤ "Stand by Your Man" men's community health program at the Frederick Douglass Community Center included free prostate cancer screenings, physician led education on Colorectal and Prostate cancer, including survivor speakers.
- At six barbershops held bi-weekly programs to educate barbers on cancer screening opportunities, and how to talk to clients about those screenings.
- At six barbershops, 33 barbers and over 200 barbershop clients were provided educational material handouts and resources including: 200 each from American Cancer Society Guide/Education books: "Prostate Cancer What You Should Know"; Colorectal Cancer screening guidelines; and guidelines for early detection of cancer.
- ➤ Held "Brews and Bros" men's health fundraiser in May 2018 to fund programs for cancer disparities in men's health.
- o Increased early detection and treatment of breast cancer (2017-2019)
 - ➤ In 2017 free mammograms paid by ProMedica Toledo Hospital Foundation and Komen funded mammograms continued (1/1-2/26), including bilateral screening mammograms for four participants, diagnostic mammograms for two participants, breast ultrasounds for two participants, breast MRI for two participants, breast MBI for two participants, and breast biopsy for one participant (benign finding). Three additional patients were provided free mammograms through the Ohio breast and cervical cancer program (BCCP).
 - ➤ In 2018 free mammograms paid by ProMedica Toledo Hospital Foundation and Komen funded mammograms continued 3rd & 4th quarters of 2018, including bilateral screening mammograms for 37 participants, diagnostic mammograms for 16 participants, breast ultrasounds for 12 participants, breast MRI for 14 participants, breast MBI for three participants, and breast biopsy for seven participants. Five participants were diagnosed with cancer.
- Collaborated with neighborhood agencies to provide support for tobacco treatment programs in an effort to reduce community member nicotine dependence (2017-2019). Provided tobacco cessation materials and staff education to community agencies.

- Organizing tobacco action plan for "Compassion Health Toledo" in collaboration with the Toledo Lucas County Department of Health. Program will provide two bi-lingual tobacco treatment specialists to meet with pregnant women in primarily Hispanic neighborhoods.
- Seventy-five American Cancer Society Tobacco Free books distributed at Compassion Health Toledo.
- Met with Compassion Health Toledo to help develop a tobacco cessation program for Pregnant Latino Women. Resources and program supplies provided for social worker and doctors.

Based on its 2016 CHNA Implementation, Plan ProMedica Wildwood Orthopaedic and Spine Hospital implemented programs in Lucas County to address the following health needs, listed in order of priority, with the following impact demonstrated (complete 2019 activities were not available at the time of this publication):

1. Hunger

Strategies to screen patients for food insecurity and provide food and community food resources will improve overall health of patients served.

- Screened all inpatients on admission for food insecurity. A total of 480 patients at Toledo Hospital (which Wildwood operates under) were provided with emergency food boxes at discharge in 2017 and 114 in 2018.
- Screened all outpatients in specific ProMedica primary care offices for food insecurity, and provided a referral to a ProMedica food pharmacy and/or provided a listing of food agencies to assist patients with food access; 1,364 unique households with no children were served at the ProMedica Food Clinic in 2017, and 1,424 unique households were served in 2018.
- Nursing director volunteered at the food clinic monthly to assist patients in selecting healthy food for their household.

2. Obesity

Strategies to provide healthy cooking classes and grocery store tours, as well as physical activity education, will improve knowledge of healthy food and activity to improve obesity in the population served.

- o Provided six free Cooking Matters programs to parents and families throughout the community in both 2017 and 2018. Cooking Matters is a 6-week healthy eating and cooking class for low-income families, which will be offered at the ProMedica Ebeid Institute's teaching kitchen. There were 82 participants in 2017 and 61 participants in 2018.
- o Provided five free Cooking Matters at the Store programming to parents and families. Cooking Matters at the Store is a one-time, educational grocery store tour teaching healthy eating on a budget. There were 36 participants in 2017 and 40 participants in 2018.
- Provided 12 physical activity education sessions in both 2017 and 2018 as part of the programming at the Ebeid Institute for Population Health. There were approximately 600 participants in 2017 and 600 participants in 2018.

Based on its 2016 CHNA Implementation, Plan Arrowhead Behavioral Hospital implemented programs in Lucas County to address the following health needs, listed in order of priority, with

the following impact demonstrated (complete 2019 activities were not available at the time of this publication):

1. Substance Abuse

Strategies to increase substance abuse screening, education and access to care will improve outcomes for the population served.

- Provided six drug/alcohol screenings via mobile assessments at local emergency rooms,
 Lucas County Jail, skilled nursing facilities and medical rehab centers in 2017, and eight in 2018.
- Provided free transportation for outpatient services and inpatient discharges/admissions, when needed.
- Continued ongoing collaboration with Lucas County DART (Drug Abuse Response Team)
 with Arrowhead staff a community liaison for this program.
- Participated in approximately 30 community awareness/education activities in both 2017 and 2018, including; Relapse Prevention, Alcoholics Anonymous and NAMI Family to Family.

2. Mental Health

Strategies to increase mental health education and access to care will improve outcomes for the population served.

- Participated in approximately 30 community awareness/education activities in both 2017 and 2018.
- o Provided inpatient care to 32 uninsured patients in 2017 and 29 uninsured patients in 2018.
- Arrowhead staff participated in multiple NAMI events, including the donation of \$2,500 as a sponsor in the NAMI Walk. Hosted NAMI Family to Family community groups in spring and fall of 2018.

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

IV. COMMUNITY HEALTH NEEDS ASSESSMENT

The ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals **process for identifying and prioritizing community health needs and services included:**

- Review of existing primary and second data sources available in the county health assessment (CHA);
- Discussion and selection of priority health issues for ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals' community;
- Discussion of gaps and current community resources which address the priority health issues;
- Discussion of effective programs, policies and/or strategies to recommend for implementation plan

- Identification of specific implementation action steps for each of next three years, and
- Development of 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, arthritis, asthma, diabetes, quality of life, social determinants of health, environmental conditions, youth weight status, youth tobacco use, youth alcohol consumption, youth drug use, youth sexual behavior, youth mental health, youth personal health and safety, youth violence, youth perceptions, child health and function status, child health care access, early childhood (0-5 years), middle childhood (6-11 years), family and community characteristics, and parental health.

LUCAS COUNTY HEALTH NEEDS ASSESSMENT PROCESS

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals utilized the data provided in the 2016/17 Lucas County Community Health Assessment 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 assessment utilizing the following methodology (refer to pages 19-20 for a full listing of collaborating organizations).

PRIMARY DATA COLLECTION METHODS

DESIGN

This community health assessment was cross-sectional in nature and included a written survey of adults, adolescents, and parents within Lucas 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

Three survey instruments were designed and pilot tested for this study: one for adults, one for adolescents in grades 6-12, and one for parents of children ages 0-11. As a first step in the design process, health education researchers from The University of Toledo and staff members from The Hospital Council of Northwest Ohio (HCNO) met to discuss potential sources of valid and reliable survey items that would be appropriate to assess the health status and health needs of adults and adolescents. The investigators decided to derive the majority of the adult survey items from the Behavioral Risk Factor Surveillance System (BRFSS). The majority of

survey items for the adolescent survey were derived from the Youth Risk Behavior Surveillance System (YRBSS), and most of the survey items for the parents of children 0-11 were derived from the National Survey of Children's Health (NSCH). This decision was based on being able to compare local data with state and national data. The project coordinator from The Hospital Council of Northwest Ohio conducted a series of meetings with Healthy Lucas County's Health Assessment Committee. During these meetings, HCNO and the planning committee reviewed and discussed banks of potential survey questions from the BRFSS, YRBSS and NSCH surveys. Based on input from Healthy Lucas County's Health Assessment Committee, the project coordinator composed drafts of surveys containing 116 items for the adult survey, 70 items for the adolescent survey, and 88 items for the child survey. The drafts were reviewed and approved by health education researchers at The University of Toledo.

SAMPLING | Adult Survey

The sampling frame for the adult survey consisted of adults ages 19 and over living in Lucas County. There were an estimated 297,515 people ages 19 and over living in Lucas 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 384 adults was needed to ensure this level of confidence for the general population. The investigators also calculated the population of African American and Latino adults living in Lucas County. According to 2015 American Community Survey 5-year estimate data, approximately 82,182 African American and 28,558 Latino adults 19 years and older were living in Lucas County. A sample size of at least 382 African American adults and 376 Latino adults were needed to ensure a 95% confidence level for each population. The random sample of mailing addresses of adults from Lucas County was obtained from Melissa Data Corporation in Rancho Santa Margarita, California.

SAMPLING | Adolescent Survey

The sampling frame for the adolescent survey consisted of youth in grades 6-12 in Lucas County public school districts. For more information on participating districts and schools, see Appendix IV. The U.S. 2010 Census Bureau reported that approximately 43,198 of all youth ages 12-18 years old live in Lucas County. A sample size of 382 adolescents was needed to ensure a 95% confidence interval with a corresponding 5% margin of error. Students were randomly selected and surveyed in the schools.

SAMPLING | 0-11 Survey

The sampling frame for the survey of children consisted of parents of children ages 0-11 in Lucas County. The U.S. 2010 Census Bureau determined that approximately 69,902 children ages 0-11 live in Lucas County. 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). The sample size required to generalize to children ages 0-11 was 382. The random sample of mailing addresses of parents of children 0-11 was obtained from Melissa Data Corporation in Rancho Santa Margarita, California.

PROCEDURE | Adult Survey

Prior to mailing the survey, the project coordinator mailed an advance letter to 3,600 adults in Lucas County: 1,200 to the general population, 1,200 to the African American population, and 1,200 to the Latino population. This advance letter was personalized, printed on Healthy Lucas County stationery and signed by the following: Eric Zgodzinski, Health Commissioner of the Toledo-Lucas County Health Department; W. Scott Fry, President and CEO of The Hospital Council of Northwest Ohio; Paula Hicks-Hudson, Mayor of Toledo; and Guisselle Mendoza McDonald, Executive Director of Adelante Inc. The letter introduced the county health assessment project and informed readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected, and it encouraged the readers to complete and return the survey promptly if they were selected. Three weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized, hand signed cover letter (on Healthy Lucas County stationery) describing the purpose of the study, the questionnaire, a self-addressed stamped return envelope, and a \$2 incentive, which were all included in a large green envelope. Approximately three weeks after the first-wave mailing, a second-wave mailing included another personalized cover letter encouraging recipients to reply, another copy of the questionnaire, 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 general population was 41% (n=446: CI=± 4.64). This return rate and sample size means that the responses in the health assessment should be representative of the entire county. The response rate for the African American mailing was 22% (n=223: CI= \pm 6.50). The response rate for the Latino mailing was 18% (n=182: $CI=\pm 7.23$). Only 223 African Americans and 182 Latino adults responded to the survey. As a result, there is a greater margin of error when generalizing to the overall population of these specific two racial/ethnic groups. Caution should be taken when generalizing the results of this assessment to the African American and Latino communities. Key leaders within the minority populations determined it would be beneficial to create individual health assessments for the African American and Latinos along with the general survey findings.

PROCEDURE | Adolescent Survey

The survey was approved by all participating superintendents. Schools and grades were randomly selected. Each student in that grade had to have an equal chance of being in the class that was selected, such as a home room or health class. Classrooms were randomly chosen by the school principal. Passive permission slips were mailed home to parents of any student

whose class was selected to participate. The response rate was 94% (n=1,535: CI= ± 2.48).

PROCEDURE | Children 0-5 and 6-11

Prior to mailing the survey to parents of children ages 0-11, the project team mailed an advance letter to 2,400 parents in Lucas County. This advance letter was personalized, printed on Healthy Lucas County stationery and signed by the following: Eric Zgodzinski, Health Commissioner of the Toledo-Lucas County Health Department; W. Scott Fry, President and CEO of The Hospital Council of Northwest Ohio; Paula Hicks-Hudson, Mayor of Toledo; and Guisselle Mendoza McDonald, Executive Director of Adelante Inc. The letter introduced the county health assessment project and informed readers that they may be randomly selected to receive the survey. The letter also explained that the respondents' confidentiality would be protected and encouraged the readers to complete and return the survey promptly if they were selected. Three weeks following the advance letter, a three-wave mailing procedure was implemented to maximize the survey return rate. The initial mailing included a personalized, hand-signed cover letter (on Healthy Lucas County stationery) describing the purpose of the study, a questionnaire, a self-addressed stamped return envelope, and a \$2 incentive. Approximately three weeks after the first-wave mailing, a second-wave mailing included another personalized cover letter encouraging parents to reply, another copy of the questionnaire, 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 was 16% (n=316: CI=± 5.51).

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 Lucas County, the adult data collected was weighted by age, gender, race, and income using 2015 Census data. Multiple weightings were created based on this information to account for different types of analyses. For more information on how the weightings were created and applied, see Appendix III of the full report (http://www.hcno.org/wp-content/uploads/2017/10/FINAL-2016-17-General-Lucas-County-CHA-Participant-Feedback-Included-10-4-17.pdf).

LIMITATIONS

As with all county assessments, it is important to consider the findings in light of all possible limitations. First, the Lucas 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 Lucas County). If there were little to no differences between respondents and non-respondents, then this would not be a limitation. Second, the response rate for African Americans (22%) and Latinos (18%) in Lucas County

was very low, even though a specialized mailing list was purchased to recruit African Americans and Latinos. Though the African American and Latino response rates were low, Lucas County yielded a higher response than the 2015 Ohio BRFSS rate of 11.5% for African Americans and 2.8 % for Latinos. To be 95% confident in our findings with a 5% margin of error, we would have needed 382 surveys to be returned from the African American population and 376 from the Latino population. The low response rate yielded only 223 African American responses resulting in a margin of error of 6.50% and 182 Latino responses resulting in a margin of error of 7.23%. Furthermore, while the survey was sent to random households in Lucas County, those responding to the survey were more likely to be older. For example, only 18 respondents were younger than 30. While weightings might be applied during calculations to help account for this, it still presents a potential limitation (to the extent that the responses from these 18 individuals might substantively different than the majority of Lucas County residents younger than 30). Therefore, those younger than 30 were not included in the graphs throughout the report. 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 and the NSCH questionnaire, the adult and parent data collection method differed. CDC adult data and NSCH child data were collected using a set of questions from the total question bank and adults were asked the questions over the telephone rather than via mail survey. The youth CDC survey was administered in schools in a similar fashion as this county health assessment. Lastly, this survey asked parents questions regarding their young children. Should enough parents felt compelled to respond in a socially desirable manner inconsistent with reality, this would represent a threat to the internal validity of the results.

CONSULTING PERSONS AND ORGANIZATIONS

The process for consulting with persons representing the community's interests and public health expertise began when local community agencies, including the Toledo Lucas County Health Department, 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, reviewing resources and gaps, 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. This community health assessment was cross-sectional in nature and included a written survey of adults, adolescents, and parents within Lucas 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 (pages 19-20), the hospital facility took into account input from persons who represent the community by

participating with other organizations in Lucas County who contracted with the Hospital Council of Northwest Ohio, a non-profit hospital association, located in Toledo, Ohio, to coordinate and manage the county health assessment and 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 Lucas County.

During these meetings, banks of potential survey 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, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals received feedback on this CHNA and implementation plan from the Toledo Lucas County Health Department to confirm these needs from the community 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 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.

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals conducted the Lucas County Health Assessment and planning process with the following hospitals:

- Mercy Children's Hospital
- Mercy St. Anne Hospital
- Mercy St. Charles Hospital
- Mercy St. Vincent Hospital
- ProMedica Hospitals
- St. Luke's Hospital
- University of Toledo Medical Center

The results of the Lucas County Health Assessment were presented at a county data release event. 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 community health needs assessment. Community participants were invited to join the community health improvement (CHIP) process to complete the strategic plan for the county.

LUCAS COUNTY STRATEGIC PLANNING PROCESS

The Lucas County Community Health Improvement Planning (CHIP) Committee met eight times and the community health improvement plan (CHIP) was approved by the Healthy Lucas

County Executive Committee in April, 2018.

Following the community assessment data release in September 2017, the Toledo-Lucas County Health Department along with the local hospitals and key community leaders participated in an organized process of Community Health Improvement Planning (CHIP) 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 assessments were used by the Lucas County CHIP Committee to prioritize specific health issues and population groups which are the foundation of this plan.

Priority health issues for Lucas County include:

- Mental Health
- Addiction/Drug and Opiate Use
- Chronic Disease/Obesity
- Maternal & Infant Health/Infant Mortality

Lucas County's CHIP has ten cross-cutting strategies that will work toward addressing all priority areas include: 1) School-Based Obesity Prevention Interventions, 2) Complete Streets, 3) Smoke-Free Policies for Multi-Unit Housing, 4) Community Health Workers (CHWs), 5) Cultural Competence training for Health Care Professionals, 6) Food Insecurity Screen and Referral, 7) PHQ-9, 8) Tobacco 21, 9) School-Based Health Alliance, and 10) Walk Friendly Communities.

The Lucas County CHA and CHIP processes included input from organizations and persons who represent the community. Collaborating organizations included:

Adelante

Advocates for Basic Legal Equality, Inc. (ABLE) American Cancer Society Area Office on Aging of Northwestern Ohio Center for Health and Successful Living - University of Toledo

Central State University

CWA Local 4319/NAACP 3204

Family and Child Abuse Prevention Center

Fredrick Douglass Center

Healthy Lucas County

Hospital Council of Northwest Ohio

Lake Erie Traffic Safety

Lucas County Family Council

Lucas County Department of Job and Family Services

Mercy Health

Mental Health & Recovery Services Board of Lucas County

New Concepts

Neighborhood Health Association

Ottawa Hills Schools

Ohio State University Extension

Paramount Insurance

ProMedica

St. Luke's Hospital

Toledo Fire and Rescue

Toledo/Lucas County CareNet

Toledo Lucas County Commission on Minority Health

Toledo Lucas County Health Department

Toledo Museum of Art

Toledo Public Schools

Toledo Public Schools - Head Start

The University of Toledo

University of Toledo Medical Center

United Way of Greater Toledo/Live Well Toledo

United Pastors for Social Empowerment

YMCA of Greater Toledo

YWCA of Northwest Ohio

Many of the above organizations represent expertise in public health, including the Toledo Lucas County Health Department. In addition, 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 hospitals were represented by ProMedica system staff in the county health assessment and the development of the community-wide community health improvement plan for Lucas County. The Lucas County CHIP was written based on the conclusions and recommendations after completing the MAPP process.

V. COMMUNITY HEALTH NEEDS & PRIORITIES

Key findings that were identified in the Lucas County 2016/2017 Health Assessment include the items below. (Note: statistics in parentheses below are from the previous 2014 and 2011 Lucas County Health Assessment, respectively, that may be used for comparison to current data.):

➤ Health Status and Coverage

o 6% (14%, 13%) of Lucas County adults were uninsured vs. 8% in Ohio and 11% in the U.S.; 14% of Lucas County adults with incomes less than \$25,000 were uninsured.

➤ Health Care Access and Utilization

- o 79% of Lucas county adults had visited a doctor's office for health care services or advice
- 13% of adults looked for a program to help with depression, anxiety, or some mental health problem

Preventive Medicine

52% (53%, 37%) of Lucas County adults had a flu vaccine in the past year; 73% (75%) of adults ages 65 and over had a flu vaccine in the past year vs. 58% in Ohio and 61% in the U.S.

> Women's Health

- o 75% (73%, 74%) of Lucas County women age of 40 and older reported having a mammogram in the past two years vs. 72% in Ohio and the 73% in the U.S.
- o 70% (72%) of Lucas County women ages 40 and over have had a clinical breast exam in the past two years vs. 75% in Ohio and 77% in the U.S.
- o 68% (73%, 72%) of women in Lucas County have had a pap smear to detect cancer of the cervix in the past three years vs. 74% in Ohio and 75% in the U.S.

Men's Health

o 18% (22%, 26%) of men had a digital rectal exam in the past year

> Adult Oral Health

o 66% (66%, 68%) of Lucas County adults visited a dentist in the past year vs. 65% in both Ohio and the U.S.

➤ Health Status Perceptions

49% (45%, 48%) of Lucas County adults rated their health status as excellent or very good. Conversely, 14% (18%, 18%) of adults described their health as fair or poor, increasing to 25% of those with incomes less than \$25,000 who described their health as fair or poor

➤ Adult Weight Status

o 38% (34%, 36%) of adults were obese based on BMI vs. 37% in Ohio and 36% in the U.S.

➤ Adult Tobacco Use

o 14% (19%, 24%) of adults were a current smoker vs. 22% in Ohio and 18% in the U.S.

➤ Adult Alcohol Consumption

o 24% (21%, 23%) of adults were binge drinkers* vs. 18% in Ohio and 16% in the U.S.

➤ Adult Drug Use

o 6% (10%, 8%) of adults misused prescription drugs in the past 6 months

➤ Adult Sexual Behavior

o 12% (8%, 9%) of Lucas County adults had more than one sexual partner in the past year

➤ Adult Mental Health

o 2% (3%, 3%) of Lucas County adults considered attempting suicide in the past year

➤ Cardiovascular Health

- o 5% (5%, 3%) of Lucas County adults had a heart attack, 34% (37%, 34%) had high blood pressure and 3% (3%, 2%) had a stroke
- Heart disease is the leading cause of death and stroke the fourth leading cause of death in Lucas County (Source: http://www.hcno.org)

Cancer

- o 13% (10%, 11%) of Lucas County adults were diagnosed with cancer at some point in their lives
- o Cancer was the second leading cause of death in the county with lung cancer the leading cause of cancer deaths (Source: ODH Data Warehouse, 2013-2015)

> Arthritis

o Arthritis has been diagnosed in 23% (19%, 19%) of Lucas County adults vs. 28% in Ohio and 25% in the U.S.

> Asthma

Ohio and 14% in the U.S. 0 Asthma has been diagnosed in 10% (13%, 13%) of Lucas County adults vs. 14% in Ohio and 14% in the U.S.

Diabetes

O Diabetes has been diagnosed in 12% (15%, 13%) of adults vs. 11% in Ohio and 10% in the U.S.

Quality of Life

 43% (47%) of Lucas County adults are limited is some way because of physical, mental or emotional problem

> Social Determinants of Health

o In 2017, 9% (6%) of Lucas County adults were abused in the past year (including physical, sexual, emotional, financial, or verbal abuse). Sixteen percent (16%) of adults had bills they could not pay for, and more than half (52%) of adults reported gambling in the past year.

> Environmental Conditions

 Lucas County adults reported the following as the top three issues that threatened their health in the past year: insects (11%), rodents (8%), and bed bugs (7%). Seventy-two percent (72%) of adults reported they had a working smoke detector in their home.

> Youth Weight Status

o 15% (13%, 15%) of Lucas County 9th -12th grade youth were obese, according to BMI, vs. 13% for Ohio and 14% for the U.S.

> Youth Tobacco Use

o 5% (9%, 18%) of Lucas County 9th -12th grade youth were current smokers vs. 15% for Ohio and 11% for the U.S.

➤ Youth Alcohol Consumption

- $\circ~27\%~(28\%,39\%)$ of Lucas County 9th -12th grade youth were a current drinker vs. 30% for Ohio and 33% for the U.S.
- o 13% (21%, 23%) of Lucas County 9th -12th grade youth were binge drinkers, vs. 16% for Ohio and 18% for the U.S.

> Youth Drug Use

 18% (19%, 26%) of Lucas County 9th -12th grade youth used marijuana in the past month, vs. 21% for Ohio and 22% for the U.S.; 5% of youth had tried marijuana before the age of 13

> Youth Sexual Behavior

- o 42% (53%, 63%) of Lucas County 9th -12th grade youth ever had sexual intercourse vs. 43% of Ohio and 41% % for the U.S.
- \circ 7% (10%, 12%) were sexually active before the age of 13 vs. 4% for Ohio in 2013 and 4% for the U.S. in 2015
- o 13% (10%, 7%) of Lucas County 9th -12th grade youth did not use any method to prevent pregnancy during their last sexual intercourse, vs. 12 % for Ohio and 14% for the U.S.

> Youth Mental Health

- o 14% (18%, 16%) of Lucas County 9th-12th grade youth had seriously considered attempting suicide in the past year vs. 14% in Ohio and 18% in the U.S.
- o 8% (8%, 4%) of Lucas County 9th-12th grade youth had attempted suicide in the past year vs. 6% in Ohio and 9% in the U.S.

➤ Youth Personal Health and Safety*

○ 35% (38%, 43%) of Lucas County 9th-12th grade youth were bullied in the past year – no data was available for Ohio or the U.S.

> Youth Violence

o 23% (25%, 28%) of Lucas County 9th-12th grade youth had been in a physical fight in the past year vs. 20% in Ohio and 23% in the U.S.; 7% (7%) had been threatened or injured with a weapon on school property in the past year vs. 6% in the U.S.

> Youth Perceptions

- Five percent (5%) of youth used the following medications that were not prescribed to them or took more than prescribed to feel good or high: Ritalin, Adderall, Concerta, or other ADHD medications (3%); tranquilizers (2%); Codeine, Demerol, Morphine, Percodan or Dilaudid (2%); OxyContin (1%), steroids (1%); Vicodin (1%); Ultram (<1%); Fentanyl (<1%); and Suboxone or Methadone (<1%).</p>
- O Youth who misused prescription medications got them in the following ways: a parent gave it to them (41%), a friend gave it to them (28%), bought it from someone else (14%) took it from a friend or family member (9%), bought it from a friend (8%), another family member gave it to them (6%) and the Internet (4%).

➤ Children's Health and Function Status

- o 98% (91%) of Lucas County parents rated their age 0-5 child's health as excellent or very good compared to 89% for Ohio and 86% for the U.S.
- o 97% (86%) of Lucas County parents rated their age 6-11 child's health as excellent or very good compared to 86% in Ohio and 83% in the U.S.

➤ Children Health Care Access

- o 61% (64%) of Lucas County parents said their age 0-5 child had dental care last year vs. 50% for Ohio and 54% for the U.S.
- 94% (91%) of Lucas County parents said their age 6-11 child had dental care last year vs.
 92% in Ohio and 88% in the U.S.
- o 96% (95%) of Lucas County parents said their age 0-5 child had been to a doctor for preventive care in past year vs. 94% for Ohio and 90% for the U.S.
- o 92% (88%) of Lucas County parents said their age 6-11 child had been to a doctor for preventive care in past year vs. 86% in Ohio and 82% in the U.S.

Early Childhood

22% (29%) of Lucas County mothers never breastfed their child vs. 29% in Ohio and 21% in the U.S.

81% (68%) of Lucas County parents said they put their child to bed on their back – no Ohio or U.S. comparisons were available

➤ Middle Childhood

- o 25% (24%) of Lucas County parents said their children ages 6-11 did not miss any days of school because of illness or injury vs. 16% in Ohio and 22% in the U.S.
- o 97% (96%) of Lucas County parents said their children ages 6-11 was usually/always safe at school vs. 96% in Ohio and 94% in the U.S.

➤ Parent, Family and Community Characteristics

- o 97% (96%) of parents reported their neighborhood was always or usually safe enough for their child to go out and play.
- o 7% of parents reported that someone in the household used cigarettes, cigars, or pipe tobacco around their children
- o 6% (2%) of parents reported there was an unlocked and loaded firearm in their home

Note: Many identified health needs are addressed by physicians at the time of related patient visits, or through other ProMedica programs.

The Lucas County Community Health Improvement Planning (CHIP) 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.

	ble 2 - Lucas County Community Health provement Plan (CHIP) – Selected Priorities	Facilitating Agency(s)
Pri	ority 1: Mental Health	
1.	Implement school-based alcohol/other drugs, mental health, and tobacco prevention programs	Mental Health and Recovery Board of Lucas County
2.	Increase awareness of trauma-informed health care	Mental Health and Recovery Board of Lucas County
3.	Expand access to tobacco cessation treatments and medications	Live Well Greater Toledo* Toledo Lucas County Health Department
Pri	ority 2: Addiction/Drug and Opiate Use	
1.	Implement Generation Rx in grades K-12	Toledo Public Schools
2.	Implement a community-based comprehensive program to reduce tobacco use	Toledo Lucas County Health Department
3.	Implement an opioid harm reduction prevention program	Toledo Lucas County Health Department
4.	Implement a clinical opioid disposal program	Hospital Council of Ohio*
5.	Explore feasibility of expanding the scope of the current referral coordination system	Mental Health and Recovery Board of Lucas County
6.	Implement a community-based comprehensive program to reduce alcohol and other drug misuse/abuse	Toledo Lucas County Health Department

7.	Increase awareness of the Lucas County Opioid Coalition	Toledo Lucas County Health Department		
Pri	iority 3: Chronic Disease/Obesity			
1.	Expand nutrition and physical activity interventions in preschool/childcare	Toledo Public Schools (Head Start)		
2.	Expand safe routes to school	Live Well Greater Toledo*		
3.	Implement healthy home environment assessments	Toledo-Lucas County Health Department		
4.	Increase school-based active recess and policies	Live Well Greater Toledo*		
5.	Expand nutrition prescriptions	YMCA of Greater Toledo Hospital Council of Northwest Ohio*		
6.	Increase healthy foods in convenience stores	Live Well Greater Toledo* Toledo-Lucas County Health Department		
7.	Increase farmer's markets/stands	YMCA of Greater Toledo Toledo-Lucas County Health Department Area Office on Aging		
8.	Increase awareness of the Diabetes Prevention Program (DDP)	YMCA of Greater Toledo Toledo-Lucas County Health Department Area Office on Aging		
9.	Increase enrollment into the Diabetes Education and Empowerment Program (DEEP)	Area Office on Aging		
	iority #4 – Maternal and Infant Health/Infant ortality			
1.	Increase progesterone treatments	Hospital Council of Northwest Ohio*		
2.	Increase provider counseling with patients about preconception health and reproductive life plans	Getting to 1*		
3.	Increase breastfeeding support at birthing facilities	Hospital Council of Northwest Ohio*		
4.	Increase coordination of home visiting programs	Getting to 1* Help Me Grow*		
5.	Increase breastfeeding promotion programs	Hospital Council of Northwest Ohio* Help Me Grow*		
6.	Implement preconception education interventions	Getting to 1*		

An asterisk (*) above indicates ProMedica has, or participates in, coalitions or community programs addressing these issues, that may include ProMedica corporate financial support that may not be specific to one ProMedica hospital. These hospitals' participation with organizations addressing these county health priority issues may also include financial support. ProMedica hospitals along with 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. ProMedica is taking a lead in our communities with programs focused on the social determinants of health, specifically focused on food access, job training, and housing.

In Lucas County, cross-cutting, best practice strategies considered for all priorities include:

School-Based Obesity Prevention Interventions, Complete Streets; Smoke-Free Policies for Multi-Unit Housing; Community Health Workers (CHWs); Cultural Competence Training for Health Care Professionals; Food Insecurity Screening and Referral; PHQ9; Tobacco 21; School Based Health Alliance; and Walk Friendly Communities (Refer to Lucas County CHIP for detail at http://www.hcno.org.

<u>LUCAS COUNTY - HEALTH ISSUES FOR UNINSURED, LOW INCOME AND MINORITY GROUPS</u>

In Lucas County, primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups include: healthcare coverage, 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 disease, cancer, arthritis, asthma, diabetes, quality of life, social determinants of health, and, environmental conditions. Specific Lucas County assessments were conducted for the Lucas County African American and Hispanic populations for the first time in 2016/2017.

In general, adults with an income less than \$25,000 per year measured worse in most areas of health. The percent of Lucas County adults with an annual household income under \$25,000 measured worse compared to other county groups in the areas of: uninsured, health perception fair/poor, women's health exams (specifically breast exams and pap smears), visiting a dentist in the past year, marijuana use in past 6 months, arthritis (only 65 and over group had higher percent), and, limited in some way. In many other areas this group was high compared to the county. Lucas County adults who were uninsured reported that the reason they were without health care coverage was they lost their job/changed employers (38%), could not afford to pay premiums (28%) and their employee does not offer/stopped offering insurance (20%), their spouse/parent lost their job or changed employers (15%), and they were confused about how to enroll (11%).

The links between economic stability and health status is evident, and 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, and the social determinants of health, something ProMedica is committed to assisting.(https://www.promedica.org/socialdeterminants/pages/default.aspx)

Table 3 – Health Issue	Whites	Latinos	African Americans	Lucas County 2017
Rate health as fair/poor	11%	25%	20%	14%
Uninsured	7%	10%	3%	6%

Diagnosed with High Blood Pressure	30%	33%	44%	34%
Diagnosed with High Cholesterol	25%	17%	24%	25%
Diagnosed with Diabetes	9%	16%	22%	12%
Diagnosed with Arthritis	23%	20%	22%	23%
Diagnosed with Asthma	9%	7%	14%	10%
Overweight or Obese by BMI	73%	80%	85%	74%
Current Smoker	12%	26%	17%	14%
Binge Drank in past month	19%	41%	21%	24%
Used Marijuana in the past 6 months	14%	9%	7%	12%
Misused prescription drugs in past 6 months	4%	6%	11%	6%
Have had a Mammogram in past two years (40 and over)	74%	64%	80%	75%
Have had a Pap Smear in the past three years	69%	69%	77%	68%
Digital rectal exam in past year	21%	14%	7%	18%
Had more than one sexual partner in past year	9%	14%	26%	12%
Limited in some way	40%	40%	56%	43%
Visited a dentist in the past year	74%	39%	63%	66%
Have considered attempting suicide	2%	7%	2%	2%

Lucas County African American adults measured worse when compared to Whites, Latinos and Lucas County adults as a whole in the following areas: high blood pressure, diabetes, asthma, obesity, prescription drugs misuse, had more than one sexual partner last year, and limited in some way because of physical, mental or emotional problem.

Lucas County Latino adults measured worse when compared to Whites, African Americans and Lucas County adults as a whole in the following areas: rated their health as fair/poor, uninsured, highest average number of days that physical health not good in past month (7.5), angina, stroke (tied with African Americans), binge drinker, current smoker, had a flu or pneumonia vaccine in past year, had a mammogram in the past two years, visited a dentist in the past year, and seriously considered suicide in the past year.

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals are part of ProMedica Health System that includes a regional health plan, Paramount, that serves both Medicare and Medicaid patients also contributing to the understanding of core community needs and metrics. By serving a Medicaid population, additional focus and services

are made available for minority and underserved populations. ProMedica, Paramount health plan, the State of Ohio, and ProMedica Toledo and Flower hospitals have made the provision of women's ambulatory services for this population a priority. This includes both obstetrics and gynecology and outreach nurse midwife clinics in partnership with the Toledo Lucas County Health Department and the Pathways HUB, which serves minority and indigent patients in primarily poorer parts of Toledo, Ohio, to address the issue of infant mortality through a systematic approach.

This, and many regional counties' CHIP strategic planning committees concluded that key leadership in the counties should be made aware of the links between economic stability and health status. Most county groups feel 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. ProMedica is taking a lead in our communities with programs focused on the social determinants of health, specifically focused on food access, job training, and housing.

LUCAS 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.

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 TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals', and Arrowhead Behavioral Hospital's leadership convened CHNA committees 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 develop implementation plans to address the specific needs of the population.

Prioritization of health needs in its community was accomplished by the ProMedica Toledo,

Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals' CHNA committees that included staff from administration and various areas involved in patient care. The ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals' CHNA committees developed the hospitals' joint CHNA and plans, following the Lucas County CHIP process, through the following steps.

- Review of existing Lucas County primary and secondary data sources
- Review of Lucas County CHIP Plan
- Discussion, selection and ranking of priority health issues for each hospital, separately
- 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
- Identification of specific implementation action steps for each of the next three years (2020-2022), and
- 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 Lucas County Leading Causes of Death 2013-2015		
1. Heart Disease	26% of all deaths	
2. Cancer	22%	
3. Chronic Lower Respiratory Diseases	7%	
4. Stroke	6%	
5. Accidents/Unintentional Injuries	55	
(Source: CDC Wonder 2013-2015)		

Although some areas of the Lucas County CHIP were not identified as a priority in the ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals' Joint CHNA or implementation plans, ProMedica hospitals participate in many areas of the county plan, as indicated in Table 2, and through various community health coalitions and initiatives, and ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals will focus on the areas of health discussed below.

VII. HOSPITAL COMMUNITY HEALTH NEEDS & PRIORITIES

As indicated in Table 2, ProMedica is actively involved in many priority health areas identified through the community health improvement plan and participates in Toledo Lucas County CareNet to provide free health care to Lucas County adults and children that are not eligible for public or private healthcare coverage. ProMedica has also contributed funding for dental care for children.

Following a review and discussion of health data and community priorities, as well as organizational and community programs to address these community needs, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals identified the following priority health needs, listed order of priority, prioritized through ranking methodology, with supporting statistics, as follows (Note: statistics in parentheses are data from previous 2014 and 2011 county health assessments, respectively, to use for comparison and trending):

Toledo Hospital CHNA Implementation Plan

Toledo Hospital determined that the following health needs (in priority order) identified in the CHNA should be addressed in the 2020-2022 CHNA implementation plan, based on the supporting statistics provided below:

1. Trauma

- > One out of five falls causes a serious injury such as a broken bones or a head injury.
- More than one out of four older people fall each year.
- ≥ 23% (25%, 28%) of Lucas County 9th-12th grade youth had been in a physical fight in the past year vs. 20% in Ohio and 23% in the U.S.; 7% (7%) had been threatened or injured with a weapon on school property in the past year vs. 6% in the U.S.

2. Mental Health/Substance Abuse

- ▶ 6% (10%, 8%) of adults misused prescription drugs in the past 6 months
- ➤ 18% (19%, 26%) of Lucas County 9th -12th grade youth used marijuana in the past month, vs. 21% for Ohio and 22% for the U.S.; 5% of youth had tried marijuana before the age of 13
- Five percent (5%) of youth used the following medications that were not prescribed to them or took more than prescribed to feel good or high: Ritalin, Adderall, Concerta, or other ADHD medications (3%); tranquilizers (2%); Codeine, Demerol, Morphine, Percodan or Dilaudid (2%); OxyContin (1%), steroids (1%); Vicodin (1%); Ultram (<1%); Fentanyl (<1%); and Suboxone or Methadone (<1%).
- Youth who misused prescription medications got them in the following ways: a parent gave it to them (41%), a friend gave it to them (28%), bought it from someone else (14%) took it from a friend or family member (9%), bought it from a friend (8%), another family member gave it to them (6%) and the Internet (4%).

Flower Hospital CHNA Implementation Plan

Flower Hospital determined that the following health needs (in priority order) identified in the CHNA should be addressed, based on the supporting statistics provided below:

1. Mental Health

- ▶ 14% (18%, 16%) of Lucas County 9th-12th grade youth had seriously considered attempting suicide in the past year vs. 14% in Ohio and 18% in the U.S.
- ▶ 8% (8%, 4%) of Lucas County 9th-12th grade youth had attempted suicide in the past year vs. 6% in Ohio and 9% in the U.S.
- ➤ 35% (38%, 43%) of Lucas County 9th-12th grade youth were bullied in the past year no data was available for Ohio or the U.S.

2. Cancer

- ➤ 13% (10%, 11%) of Lucas County adults were diagnosed with cancer at some point in their lives
- Cancer was the second leading cause of death in the county with lung cancer the leading cause of cancer deaths (Source: ODH Data Warehouse, 2013-2015)
- ➤ 18 % of Lucas County males had a digital rectal exam in the past year. Prostate Cancer accounted for 9% of all cancer deaths in Lucas County from 2011-2015.
- ➤ Breast Cancer accounted for 14% of all cancer diagnosis in Lucas County. 56% of women over the age of 40 had a mammogram in the past year. If detected early, the 5-year survival rate for breast cancer is 98%.

Wildwood Orthopaedic & Spine Hospital CHNA Implementation Plan

Wildwood Orthopaedic & Spine Hospital determined that the following health needs (in priority order) identified in the CHNA should be addressed in the 2020-2022 CHNA implementation plan, based on the supporting statistics provided below:

1. Hunger

➤ In the past 30 days, 16% of adults were concerned about having enough food for themselves and their family, at the highest risk are those with incomes less than \$25,000.

2. Obesity

- ➤ In 2016, Four percent (4%) of adults ate 5 or more servings of fruits and vegetables per day; 24% ate 3 to 4 servings; 62% ate 1 to 2 servings; and 10% ate 0 servings of fruits and vegetables per day.
- ➤ One-fifth (20%) of adults did not participate in any physical activity in the past week, including 2% who were unable to exercise
- ➤ In 2017, almost three-fourths (74%) of Lucas County adults were either overweight (38%) or obese (36%) by Body Mass Index (BMI).

Arrowhead Behavioral Hospital CHNA Implementation Plan

The board of trustees of Arrowhead Behavioral Health has determined that the following health needs (in priority order) identified in the CHNA should be addressed in the 2020-2022 CHNA implementation plan, based on the supporting statistics provided below:

1. Substance Abuse

- ➤ Heroin/Opioid overdoses and deaths in Lucas County were reported as follows per media outlets, there are 3 overdoses per week in Lucas County.
- Lack of capacity of detox services and inpatient detox beds.

2. Mental Health

- ➤ 2% (3%, 3%) of Lucas County adults considered attempting suicide in the past year
- ➤ 43% (47%) of Lucas County adults are limited is some way because of physical, mental or emotional problem

As a ProMedica member hospital, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals are represented and are participating in the execution of the community-wide community benefit plans by working with Healthy Lucas County and other organizations and coalitions in the community who are addressing health-related issues (see Table 2). The Toledo Lucas County Health Department provided feedback for the hospitals' CHNA and implementation plans, to confirm these plans from a community health expert perspective.

VIII. PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS – COMMUNITY UNMET NEEDS, GAPS AND RESOURCE ASSESSMENT

ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals did not address all of the needs identified in the most recently conducted Lucas County Community Health Assessment as these areas either go beyond the scope of the hospital or are being addressed by, or with, other organizations in the community. To some extent, resource restrictions do not allow the hospital to address all of the needs identified through the health assessment, but most importantly to prevent duplication of efforts and inefficient use of resources as many of these issues are addressed by other community organizations and coalitions. Table 2 indicates many of the community wide organizations and coalitions addressing the prioritized county strategic plan issues. ProMedica 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 were identified as not having specific programs to address these issues in the larger community: underage drinking, binge drinking, youth carrying weapons, youth who purposefully hurt themselves, youth violence at school, youth violence in neighborhoods, youth marijuana use, and delaying first sexual intercourse. Due to the size of the greater Toledo community, it is difficult to inventory all resources and gaps, even with the input of multiple organization and individuals.

With that being said, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals 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 hospitals participate 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 Lucas County strategic plan health needs.

IX. PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS - IMPLEMENTATION STRATEGY SUMMARY

In 2019, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals commenced with their CHNA strategic planning process, whereby they analyzed and discussed data, selected and prioritized focus areas for each hospital-based CHNA implementation plans, reviewed resources and gaps in resources, and developed hospital-based implementation plans, including annual goals, taking into consideration county strategic plan, as well as alignment with the Ohio State Health Assessment and Healthy People 2020. No community feedback was received on the previous CHNA posted on the ProMedica website. ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals identified the following health priorities, listed in order of priority:

Toledo Hospital

- 1. Trauma
- 2. Mental Health/Substance Abuse

Flower Hospital

- 1. Mental Health
- 2. Cancer

Wildwood Orthopaedic & Spine Hospital

- 1. Hunger
- 2. Obesity

Arrowhead Behavioral Health

- 1. Substance Abuse
- 2. Mental Health

In addition to the above hospital specific strategies, the hospitals will continue to collaborate with Healthy Lucas County to support its CHIP initiatives.

To achieve maximum impact, ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral hospitals 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 also 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 at least annually to hospitals' leadership and the Board of Trustees. As stated above, these ProMedica hospitals will not address all of the needs identified in the most recently conducted Lucas County Community Health Assessment as these areas either go beyond the scope of the hospitals 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 County. Many health issues are addressed by physicians at a related patient visit.

Following approval of ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral hospitals' CHNA and implementation plans by the respective hospital board of trustees, the execution of the implementation action plans will be initiated in 2020, with some programs already in place.

Annual inclusion of a community benefit section in operational plans is reflected in the ProMedica strategic plan that is reviewed and approved by the Board of Trustees and monitored and reported to hospital leadership. As part of the annual strategic planning and budgeting process, the adoption of a budget for provision of services that address the needs identified in the needs assessment is inherent in the hospital budget and approved by ProMedica Metro Hospital Board of Trustees, and Arrowhead Behavioral Hospital Board of Trustees. The 2019 Joint Community Health Needs Assessment and 2020-2022 Implementation Plan was approved and adopted by the ProMedica Metro Board of Trustees on November 12, 2019, and the Arrowhead Behavioral Hospital Board of Trustees before December 31, 2019.

X. ACCESS TO PROMEDICA TOLEDO, FLOWER, WILDWOOD ORTHOPAEDIC & SPINE, AND ARROWHEAD BEHAVIORAL HOSPITALS JOINT COMMUNITY RESOURCE ASSESSMENT AND OTHER RESOURCES

The ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals Joint Community Health Needs Assessment is widely available in printable (pdf) form to the public on the hospital websites at: https://www.promedica.org/Pages/about-us/default.aspx (for ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine Hospitals) and https://www.arrowheadbehavioral.com (for Arrowhead Behavioral Hospital).

The Lucas County Community Health Assessment and Community Health Improvement Plan as well as other regional county health assessments and plans, may be found on the Hospital Council of Northwest Ohio website: http://www.hcno.org/community-services/community-health-assessments/

To provide feedback or for any questions related to the ProMedica Toledo, Flower, Wildwood Orthopaedic & Spine, and Arrowhead Behavioral Hospitals Joint Community Health Needs Assessment and strategic plans, or to request a free, printed copy of this document, please email: gaye.martin@promedica.org.