OhioHealth Mansfield Hospital
Community Health Needs Assessment
June 2019
OhioHealth Mansfield Hospital

Expert Physicians Committed to Providing Outstanding Care and Treatment

At OhioHealth Mansfield Hospital, we strive for the best possible experience, not only for you, but for your family members as well. We are more than a hospital; we are family dedicated to your health and well-being. As the north central Ohio area’s only full-service hospital, Mansfield Hospital is renowned for providing healthcare services for complex conditions right here in Richland County.

Vinson Yates, *President*
335 Glessner Avenue
Mansfield, Ohio 44903

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Table of Contents

Introduction ........................................................................................................................................1
A. Definition of the Community Served By the Hospital Facility ..........................................................3
B. Demographics of the Community ....................................................................................................4
C. Existing Healthcare Facilities and Resources within the Community That Are Available To Respond To the Health Needs of the Community .......5
D. How Data Was Obtained ...........................................................................................................12
E. The Significant Health Needs of the Community .........................................................................13
F. Primary and Chronic Disease Needs, and Other Health Issues of Uninsured Persons, Low-income Persons and Minority Groups ....................14
G. The Process for Identifying and Prioritizing Community Health Needs and Services to Meet Community Health Needs ........................................18
H. The Process for Consulting with Persons Representing the Community’s Interests and Input Provided .......................................................................................................................19
I. The Impact of Any Actions Taken to Address the Significant Health Needs Identified in the Hospital Facility’s 2016 CHNA ..................................................22
J. Contracted Organizations to Assist with Conducting the CHNA ..................................................23
References .........................................................................................................................................24
Appendix A. Summary of Data and Information from the Ohio 2016 State Health Assessment .................................................................29
Appendix B. Summary of data from the Health Assessment Survey of Richland County Adults, Youth and Children Compared to Ohio and United States ..........31
Appendix C. Summary of Input from Persons who Represent the Broad Interests of the Community Served .............................................................................................................45
Appendix D Documentation of Program Impacts from the Community Health Needs Assessment and Implementation Strategy Adopted in 2016 by OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital ........................................60
Introduction

OhioHealth is a family of nationally recognized, not-for-profit, faith-based hospitals and healthcare organizations with Methodist roots. Serving central Ohio communities since 1891, all OhioHealth entities are connected by a shared mission “to improve the health of those we serve.” With core values of compassion, excellence, stewardship integrity and inclusion, OhioHealth is committed to delivering quality, convenient, timely healthcare, regardless of ability to pay. OhioHealth is a family of 29,000 associates, physicians and volunteers, and a network of 11 hospitals, more than 50 ambulatory sites, hospice, home health, medical equipment and other health services spanning a 47-county area. OhioHealth hospitals include OhioHealth Riverside Methodist Hospital, OhioHealth Grant Medical Center, OhioHealth Doctors Hospital, OhioHealth Dublin Methodist Hospital, OhioHealth Rehabilitation Hospital, OhioHealth Grady Memorial Hospital, OhioHealth Marion General Hospital, OhioHealth Hardin Memorial Hospital, OhioHealth O’Bleness Hospital, OhioHealth Mansfield Hospital, OhioHealth Shelby Hospital and OhioHealth Grove City Methodist Hospital.

Truven Health Analytics has recognized OhioHealth as one of the top five large health systems in America in 2008, 2009, 2011, 2013, 2014 and 2015 (IBM Watson Health, n.d.). FORTUNE Magazine has recognized OhioHealth as one of the “100 Best Companies to Work For” and has been for 12 years in a row: 2007–2018. OhioHealth was also recognized as one of FORTUNE Magazine’s 100 Best Workplaces for Women and 100 Best Places to Work in Healthcare. OhioHealth has two member hospitals in Richland County, namely OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital. OhioHealth Mansfield Hospital is located at 335 Glessner Avenue, Mansfield, Ohio, and OhioHealth Shelby Hospital is located at 199 West Main Street, Shelby, Ohio. Mansfield Hospital is a 326-bed facility with an outpatient radiation therapy center, health and fitness center, surgery center, urgent care, home care, hospice and palliative care. It is the largest medical provider between Cleveland and Columbus, with more than 2,400 employees and more than 200 physicians serving 325,000 people in Richland County and the five surrounding counties. Shelby Hospital is a not-for-profit, general, acute hospital that has provided quality healthcare to the Shelby community since 1921. Each year, more than 1,400 patients are admitted, 175 babies are born and 142,000 procedures are conducted for our 13,200 outpatient visits. With a staff of more than 200, the hospital is able to provide acute and short-term skilled care, a full range of outpatient diagnostic and therapeutic services utilizing state-of-the-art technology, rehabilitation and physical therapy services as well as numerous community programs and services. The 24-hour Emergency Department (ED) is staffed by nurses and physicians specially trained in emergency care. Specifically, Shelby Hospital provides cancer care, diabetes services, endoscopy services, hospice care, maternity care, outpatient rehabilitation therapy, physical and occupational therapy, speech therapy, and inpatient and outpatient surgery programs.

Both Mansfield Hospital and Shelby Hospital have received various awards and recognitions related to excellent quality of patient care and use of technology to further improve patient care services.

a. **Primary Stroke Center** – Recognition given to Mansfield Hospital by The Joint Commission, which features Mansfield Hospital as a full-service program with comprehensive neuroscience offerings, including 24/7 stroke care.

b. **Total Hip and Total Knee Replacement Programs** – Recognition of Mansfield Hospital by The Joint Commission. Mansfield Hospital is the only hospital in Richland County that is certified for total hip and knee replacement programs.

c. **“A” Grade in the Leapfrog Hospital Safety Grades** – Recognition of Mansfield Hospital by The Leapfrog Group since 2015. This signifies an excellent record of patient safety.

d. **Level II Trauma Center Recertification** – Recertification of Mansfield Hospital by the American College of Surgeons. Mansfield Hospital has the only trauma center within a 60-mile radius.

e. **Top Rural Hospital** – Recognition of Shelby Hospital in 2016 by The Leapfrog Group.

f. **Top Quartile Performer and Excellence in Patient Satisfaction** – Recognition of Shelby Hospital by the State of Ohio’s Office of Rural Health.

g. **“Most Wired” Hospitals and Health Systems** – Recognition of Mansfield Hospital and Shelby Hospital by Hospital and Health Networks magazine since 2011.
OhioHealth is dedicated to serving the communities it serves through its community benefit. In fiscal year 2018, OhioHealth provided a total of $393.7 million of community benefit, comprising $90 million charity care, $240.4 million net cost of Medicaid programs, $54.1 million net cost of medical education, $1.9 million subsidized health services, $3.8 million community health services, $3 million cash and in-kind contributions, and $0.5 million research.

Both Mansfield Hospital and Shelby Hospital are significantly involved in community-building activities for Richland County, and have been recognized locally, regionally and nationally for community involvement efforts. Examples include:

b. United Way of Richland County Fundraising Campaign – Fundraising for the United Way of Richland County projects.
c. CPR in Schools Training Kits – Mansfield, Madison, Lexington and Shelby Schools were provided with materials to teach students how to perform hands-only CPR in 30 minutes.
d. OhioHealth Sports Medicine outreach to schools – Provides athletic programs to Lexington High School, Shelby High School, and Ashland University.
e. Creating Healthy Communities Coalition’s Partner of Excellence Award – Depicts active involvement in support of Richland Public Health’s efforts to reduce obesity and chronic disease.
f. Making Strides Against Breast Cancer 5K – Fundraising led by the American Cancer Society to benefit cancer programs. In addition to fundraising, OhioHealth engaged the public by encouraging employees and hospital visitors who are over the age of 40 to schedule their yearly mammograms.

The Patient Protection and Affordable Care Act of 2010 requires not-for-profit hospitals to conduct a community health needs assessment once every three years (Internal Revenue Service, 2018). Mansfield Hospital and Shelby Hospital collaborated with Richland Public Health and various community stakeholders to identify significant community health needs in Richland County and determine the priority health needs that will be addressed in the implementation strategy. During the prioritization meeting, the community stakeholders identified two priority health needs – (1) chronic disease and (2) mental health and addiction.

OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital worked together to develop this joint CHNA report. They will develop the joint 2020–2022 Implementation Strategy in collaboration with Richland Public Health, Shelby City Health Department and various community stakeholders to demonstrate our continuing commitment to play an active and effective role in the Richland County community by fulfilling our mission “to improve the health of those we serve.” Moreover, OhioHealth Mansfield and Shelby’s Implementation Strategy will include actions and strategies that align with the Ohio 2017–2019 State Health Improvement Plan (Ohio Department of Health, 2017b).

For information about the Mansfield Hospital and Shelby Hospital CHNA processes and for a copy of the reports please visit OhioHealth.com/MansfieldCommunityHealthNeedsAssessment and OhioHealth.com/ShelbyCommunityHealthNeedsAssessment, respectively. Please contact Shannon Ginther, (614)544.4392, or email Shannon.Ginther@OhioHealth.com to obtain hard copies of the CHNA reports at no charge. Written comments regarding this CHNA report may be submitted to Shannon Ginther at Shannon.Ginther@OhioHealth.com.
A. Definition of the Community Served By the Hospital Facility

A1. Location of hospitals and ZIP codes of communities served.

OhioHealth Mansfield Hospital is located at 335 Glessner Avenue, Mansfield, Richland County, Ohio 44903. OhioHealth Mansfield Hospital operates seven satellite facilities, all located in Mansfield, Richland County, Ohio. OhioHealth Shelby Hospital is located at 199 West Main Street, Shelby, Richland County, Ohio 44875. The "community served" by OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital is Richland County, Ohio. Richland County covers 13 ZIP Codes, including 44813, 44822, 44843, 44862, 44875, 44878, 44901, 44902, 44903, 44904, 44905, 44906, and 44907 (Datasheer, L.L.C., 2018).

A2. Percentage of patients served from Richland County, Ohio.

Review of OhioHealth data showed that for fiscal year 2018, 77.4 percent of all patients who were admitted to OhioHealth Mansfield Hospital and 77.6 percent of all patients admitted to OhioHealth Shelby Hospital resided in Richland County at the time of admission. Similarly, 76.6 percent of all patients from Mansfield Hospital and 80.5 percent of all patients from Shelby Hospital who had outpatient procedures or visits in fiscal year 2018 resided in Richland County at the time when the procedure or visit occurred.
B. Demographics of the Community

B1. Total population.

In 2010, actual population was 124,475. In 2017, estimated total population was 120,589 (Ohio Development Services Agency, n.d.).


In 2017, among Richland County residents, 86.9 percent were white, 7.5 percent were African American, 0.8 percent were Asian, 1.7 percent were Hispanic (of any race), 0.5 percent other races, 0.1 percent Native American, 0 percent Pacific Islander and 4.1 percent two or more races (Ohio Development Services Agency, n.d.). Minorities represented 14 percent of the population (Ohio Development Services Agency, n.d.).

B3. Age.

In 2017, among Richland County residents, 5.8 percent were younger than 5 years old, 16.1 percent were 5–17 years old, 8.5 percent were 18–24 years old, 24.1 percent were 25–44 years old, 27.5 percent were 45–64 years, and 18 percent were 65 years or older. Median age was 41.2 (Ohio Development Services Agency, n.d.).

B4. Income.

Median household income for 2017 was $42,849 and per capita income was $36,434. Approximately 12 percent of families and 16.5 percent of individuals had income below the poverty level (Ohio Development Services Agency, n.d.).

The 2016 Richland County Community Health Assessment discusses additional demographic characteristics of Richland County residents (Richland County Partners Community Health Assessment Collaborative, 2017).
C. Existing Healthcare Facilities and Resources within the Community That Are Available To Respond To the Health Needs of the Community

C1. Healthcare Facilities and Community Resources Addressing Chronic Disease

C1.1. OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital serve persons with heart disease, asthma, diabetes and other chronic diseases (OhioHealth, 2015-2018a, b).

C1.1.1. Heart and vascular services – OhioHealth Mansfield Hospital has the expertise and experience to perform most heart and vascular procedures without the risk of transferring patients. The hospital offers comprehensive open-heart surgery, implantable pacemakers and defibrillators, catheterization, angioplasty, intensive care treatments for heart attacks, echocardiography, cardiac rehabilitation, congestive heart failure, electrophysiology, resynchronization therapy and clinical trials. OhioHealth Mansfield Hospital has the following awards from Healthgrades®: (a) America’s 50 Best Hospitals for Cardiac Surgery in 2015, (b) Cardiac Surgery Excellence Award (2007–2015), (c) Top Five Percent in the Nation for Cardiac Surgery (2012–2015), (d) Five-Star Recipient for Coronary Interventional Procedures (2011–2015), (e) Five-Star Recipient for Coronary Bypass Surgery (2007–2015), and (f) Five-Star Recipient for Valve Surgery (2007–2015). OhioHealth Mansfield Hospital is also involved with various outreach activities in conjunction with American Heart Month, celebrated in February. These activities include (a) partnership with A Moveable Feast, a community organization that specializes in providing participants with a “farm-to-plate supper club experience” featuring heart-healthy food choices and heart health promotion; (b) Mended Hearts Dinner, which enables heart patients to celebrate their healing, participate in cooking demonstrations and interact with heart and vascular physicians and nurses; and (c) collaboration with the American Heart Association’s HeartChase community adventure game, to promote community engagement in physical activity.

C1.1.2. Fitness Center – OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital outreach on prevention and wellness include: (a) Health Matters, (b) articles on healthy nutrition and exercise, (c) participation in community health and wellness events, lectures and talks in schools, churches and community groups, (d) Healthy Chef Series, (e) Community Best Loser, and (f) free or discounted access to the OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital Health and Fitness Center for senior citizens during National Senior Health and Fitness Days.

C1.1.3. Endocrinology – OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital offer diabetes prevention programs to Richland County residents and endocrinology and diabetes services for type 2 diabetes, type 1 diabetes, insulin pump management, continuous glucose monitoring, gestational diabetes, referral to nutrition counseling for dietary advice and support, and referral for thyroid biopsies, as needed.

C1.1.4. Diabetes services – OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital programs include individualized assessments and consultation by a nurse educator and dietitian, and comprehensive education classes. OhioHealth Mansfield Hospital offers diabetes support groups. The nurse educator helps patients acquire knowledge on the following: (a) diabetes management, (b) preventing diabetes complications, (c) using a glucose meter and taking medicines, (d) dealing with emotions, and (e) lifestyle and behavior changes. The dietitian assists patients with (a) developing a healthy eating plan, (b) making the necessary lifestyle changes, and (c) enjoying tasty but healthy foods.

C1.1.5. Pulmonary rehabilitation – OhioHealth Mansfield Hospital offers education and exercise sessions to control symptoms and improve quality-of-life, disease management skills, breathing retraining, education
about medications, aerobic and cardiovascular exercise, conditioned weight training, smoking cessation, relaxation training, nutritional and diet counseling, and airway clearance techniques.

**C1.1.6. Primary care services** – Several family practice physicians who provide care to children, adults and families are affiliated with these two hospitals. Examples of affiliated physician practices include OhioHealth Primary Care Physicians, OhioHealth Women’s Health Primary Care Physicians and Ontario Medical Associates. OhioHealth Mansfield Hospital, in collaboration with Nationwide Children’s Hospital, offers pediatric therapy, which serves children with special needs in Richland County and surrounding communities by providing therapeutic activities to children with the following conditions: (a) attention deficit disorders, (b) autism, (c) pervasive developmental disorder, (d) cerebral palsy, (d) developmental delays, (e) feeding and swallowing disorders, (f) genetic disorders, (g) hand injuries, (h) head or spinal cord injuries, (i) hearing impairment, (j) juvenile arthritis, (k) learning disabilities, (l) mental retardation, (l) orthopedic injuries, (m) sensory integration dysfunction, (n) spina bifida, (o) stuttering, and (p) verbal or motor apraxia.

**C1.2. Third Street Family Health Services** (Third Street Family Health Services, 2015a,b,c,) – Provides (a) preventive care such as annual physical exams, cancer screening, Pap tests, prostate exams, diabetes screening and heart disease maintenance, (b) chronic medical care for high blood pressure, diabetes and asthma, (c) screening during Women’s Health Day, (d) access to drug programs such as 340b pricing and assistance from pharmaceutical companies, and (e) other comprehensive services, including medical, dental, mental and behavioral, and OB/GYN services.

**C1.3. Richland Public Health** (Richland Public Health, 2018a-f) – Programs and services include:

**C1.3.1. Community health screenings** – Blood pressure, hemoglobin A1C, weigh-ins, blood sugar, cholesterol, child development, medication counseling, nutrition education and lead screenings for children ages 0 to 6.

**C1.3.2. Richland County employee wellness program** – Screens for cholesterol, blood sugar, blood pressure, PSA prostate, TSH thyroid, and hemoglobin A1C given to employees and spouses.

**C1.3.3. Creating Healthy Communities** – Organized the Mansfield Coalition and the Shelby Creating Healthy Communities Task Force, which provide opportunities for residents and representatives of community agencies to share information, discuss initiatives and collaborate in improving health. Partners of the Creating Healthy Communities Coalition include Community Action for Capable Youth, North End Community Improvement Collaborative, Mansfield YMCA, Mansfield City Schools, OhioHealth Mansfield Hospital, OhioHealth Shelby Hospital, City of Shelby, Shelby YMCA and Richland County Regional Planning Commission. Creating Healthy Communities’ goals include healthy eating, physical activity and tobacco-free living.

**C1.3.4. School nursing services** – Provides school nursing services to Clear Fork Local Schools, Crestview Local Schools, Lexington Local Schools, Lucas Local Schools, Plymouth/Shiloh Local Schools, Ontario Local Schools, Pioneer Career and Technology Center, Foundation Academy, Mansfield Elective Academy, Sacred Heart Catholic School and St. Mary’s Catholic Church School. Richland Public Health School Nurses also provide vision and hearing screenings to students from both the Richland Academy School of Excellence and the Discovery School.

**C1.3.5. Richland Fit Community** – Collaborates with local gyms for hosting free fitness week and distributing walking maps to residents.

**C1.3.6. Senior health screenings** – Services include screenings for blood pressure, pulse, weight and blood sugar as well as medication review, discussion of health concerns, referrals to community agencies and educational brochures.

**C1.3.7. Breast and Cervical Cancer Project** – Provides free mammograms, breast exams, Pap tests and follow-up screenings.

**C1.3.8. Preventing Chronic Disease Program** – Provides resources and programming to stop diabetes.
C1.3.9. **Healthy Homes Program** – Helps protect children and adults from household dangers, such as poor indoor air quality and dampness that causes molds that trigger asthma attacks.

C1.4. **City of Shelby Health Department** ([City of Shelby, n.d.](#)) – Provides health education, nutrition services, chronic disease management, health screenings, blood pressure checks and other preventive services.

C1.5. **Mansfield Area YMCA** ([Mansfield Area YMCA, 2018](#)) – Offers programs that promote health, well-being and fitness, including (a) group fitness classes, (b) water fitness, (c) martial arts and strength courses, (d) personal training and specialized programs, (e) healthy lifestyle education, (f) classes for active older adults, and (g) LIVESTRONG at the YMCA. Youth development programs include availability of Early Learning and Development Centers, education and leadership opportunities for youth, and building self-confidence and positive relationships through sports and play activities. Healthy-living activities are family-centered and focus on building balance of mind, body and spirit. Examples of healthy-living activities include “Family Time,” “Health, Well-being and Fitness,” “Sports and Recreation,” and “Group Interests.” As part of “Social Responsibility,” YMCA offers social services, opportunities for volunteerism, and other community activities.

C1.6. **American Lung Association Asthma 101** ([American Lung Association, 2018](#)) – Offers one-hour-and-45-minute program in-service to teach basic asthma knowledge in schools, daycare and communities, as a means of improving awareness among children with asthma. Topic areas include (a) “What Is Asthma?” (b) “Asthma Management: Environmental Control,” (c) “Asthma management: Treatment and Tools” and (d) other resources. The curriculum follows the guidelines for asthma management from the National Heart, Lung and Blood Institute and a certified asthma 1-2-3 facilitator provides the in-service. Participants learn about asthma triggers, warning signs and treatment, and confidence in and knowledge about responding to an asthma emergency.

C1.7. **Richland County Children Services** ([Richland County Children Services, 2018a,b](#)) – Services for children and families include: (a) intake services, (b) prevention services, (c) protective services, (d) kinship services, and (e) foster care and adoption services. Under intake services, once telephone calls are received regarding child abuse and neglect, the social workers assess the case by interviewing and observing child-family interactions. Under prevention services, the agency staff works closely with young mothers and families of school-aged children and families of delinquent youths to prevent abuse and neglect. Protective services help families and children from being abused or neglected through case management, scheduling of family meetings, mental and behavioral health services, drug abuse treatment and parenting skills. Kinship services help families avail benefits and other services. Foster care and adoption services ensure that children are placed in safe foster homes until family reunification is possible.

C1.8. **Richland County Youth and Family Council** ([Richland County Youth and Family Council, n.d.](#)) – Instrumental in leading an effective coordination of community services for families and children to meet their needs and responsibilities. The Council is committed in promoting child well-being through initiatives that support parents and newborns, readiness and success in school, healthy behaviors and choices, and successful transitioning of youth into adulthood. The Council organizes “Boot Camp for New Dads/Dad Day Out,” where dads who experienced the first months of parenthood share their journey towards fatherhood and show basic skills in taking care of the baby.

C1.9. **Richland County Fatherhood Initiative** – Aims to improve the well-being of children through responsible fatherhood. The Richland County Fatherhood Initiative is part of the Ohio Commission on Fatherhood, which has a mission “to enhance the well-being of Ohio’s children by providing opportunities for fathers to become better parents, partners and providers.” In Richland County, the Fatherhood Initiative has support from the Child Support Enforcement Agency, Richland County Children Services, Richland County commissioners, leaders in public office and Richland County residents ([Ohio Commission on Fatherhood, 2010](#)).

C1.10. **Community Health Access Project (CHAP)** – The use of community health workers to connect persons and families to community resources has improved birth outcomes and overall health status of persons served ([Community Health Access Project, 2016](#)).

C1.11. **Schools** (K12 Academics, 2004-2018) – The school districts in Richland County, Ohio, are all actively involved in providing nutritious breakfast and lunch options as well as opportunities for physical activity. These schools include Clear Fork Valley School District, Foundation Academy School District, Goal Digital Academy School District, Imac School District, Lexington Local School District, Lucas Local School District, Madison Local
School District, Mansfield City School District, Mansfield Community School District, Mansfield Elective Academy School District, Mansfield Enhancement Academy School District, Mid-Ohio Esc., Ontario Local School District, Pioneer Career and Technology, and Shelby City School District. For example, Mansfield City Schools Food Service Department provides healthy and nutritious meals to students based on the National School Lunch and National School Breakfast program guidelines. Mansfield City Schools serves about 1,800 breakfasts and 2,700 lunches per day. Mansfield City Schools Athletics Department provide opportunities for students to have ample physical activity as well.

C1.12. The Ocie Hill Neighborhood Center (The City of Mansfield Department of Regional Community Advancement, n.d.) – Offers underserved families access to community services provided on-site or by referral, including:

C1.12.1. Culliver Reading Center – Provides tutoring to K–8 students to improve reading skills and provide extra help with homework.

C1.12.2. The Success Center After School Program – Collaboration between the City of Mansfield and Mansfield City Schools to provide homework assistance, recreation, arts, mental health services and healthy meals for K–12 students.

C1.12.3. Summer Enrichment Program – This is an extension of the Success Center Program during the summer months. Students in grades K–12 are involved in math and reading enrichment programs, recreation, arts, field trips and excursions.

C1.12.4. Mansfield City Schools Attendance Service – Raises awareness of the importance of attending school regularly.

C1.12.5. Mansfield Elective Academy – A school for K–8 students who are in nontraditional families with foster parents or grandparents. It offers a school curriculum that meets academic, emotional and psychosocial needs of children.

C1.12.6. Mansfield Enhancement Academy/STAR and Interactive Media and Construction (IMAC) – Assists students who were unsuccessful in completing requirements for a high school diploma by way of individualized instruction and social and emotional support. The program enables students to obtain a high school diploma and the career technical skills to find employment.

C1.12.7. Help Me Grow – A home visiting program that offers interdisciplinary, family-focused activities, community referral, and developmental screenings (as needed) for children up to age 3. Help Me Grow also offers education to parents who are expecting.

C1.12.8. Community Health Access Project (CHAP) – Provides access to community health workers who assist with care coordination in order to improve access to needed health and social services (Community Health Access Project, 2016).

C1.12.9. Kinship Care Navigator – Serves nonparental caregivers taking care of children who are at risk of being placed under the custody of Richland County Children Services (Richland County Children Services, 2018b).

C1.12.10. Cosby Educational Heritage Center – Provides access to African American history, artifacts and documents (The City of Mansfield Department of Regional Community Advancement, n.d.).

C1.12.11. Ocie Hill Fitness Program – Provides opportunities for the entire family to be physically fit (The City of Mansfield Department of Regional Community Advancement, n.d.).

C1.13. The Friendly House – Funded by United Way of Richland County, which provides crime prevention, recreation, education, health and fitness, camping, and day care programs to the community at reasonable cost (Friendly House, 2017).
C1.14. Mansfield/Richland County Public Library – Operates various community outreach programs such as First Call 2-1-1, outreach services, lobby stops, community lectures, homebound delivery, participation in health fairs, festivals and community meetings, services for special needs, TeacherZone, and international collaboration with Adelaide, South Australia (Mansfield/Richland County Public Library. (2018)).

C1.15. Ohio Heartland Community Action Commission – Provides services to Richland County residents such as Richland County Head Start and the Fatherhood Program. Richland County Head Start is a free, preschool education and socialization program for low-income families with children ages 3–5, including those with special needs (Ohio Heartland Community Action Commission, 2018).

C1.16. Mansfield Metropolitan Housing Authority – Serves low-income families and older adults of Richland County by providing affordable housing, economic opportunities and safe living conditions (Mansfield Metropolitan Housing Authority, n.d.).

C1.17. Richland County Transit – Richland County Transit (RCT) has 12 fixed routes to the City of Mansfield and the Village of Ontario. There are bus routes (#8 Glessner Ave; #13 Shelby) that service OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital. RCT offers priority seating for the elderly and/or persons with disabilities, Dial-A-Ride and RCT-Plus Senior Shopping Services (Richland County Transit, n.d.).

C1.18. Ohio District Five Area Agency on Aging – Examples of services for Richland County residents include: (a) access to long-term care services through the Aging and Disability Resource Network, (b) personal care, (c) homemakers, (d) home-delivered meals, (e) transportation, (f) caregiver assistance, (g) adult day services, (h) energy assistance, (i) minor home modification, (j) long-term care planning, (k) advice on housing options, (l) safety monitoring and assistance with household chores, and (m) assistance with prescription drugs (Ohio District 5 Area Agency on Aging, 2018).

C1.19. Richland County Coalition on Homelessness and Housing in Ohio (COHHIO) – Conducts point-in-time surveys of homeless persons in Richland County. The Coalition addresses housing needs of the community through community discussions. Coalition members include Volunteers of America, Harmony House, domestic violence shelters, Parent Aide, Catholic Charities, Richland County Foundation, Mansfield City Schools, District Five Ohio Area Agency on Aging, Community Action Commission of Erie, Huron and Richland Counties Inc., and First Call 2-1-1 (Richland County Children Services, 2018a,b).

C1.20. Catholic Charities Diocese of Toledo – Serves communities in Richland County and other northwest Ohio Counties. Examples of services include (a) crisis navigation services, (b) financial education, (c) family support and guidance, (d) H.O.P.E. Food Pantry, and (e) adult advocacy services for the elderly (Richland Area Chamber of Commerce, 2018).

C1.21. Community Action for Capable Youth (CACY) – Offers health and safety education programs for youth, and parenting programs, and promotes community awareness related to alcohol, substance abuse and smoking cessation. CACY provides interventions that empower youth to value themselves, their family and the community, and manifest healthy behaviors (Community Action for Capable Youth, 2018).

C1.22. North End Community Improvement Collaborative – Examples of programs include (a) Community Tool Shed, where residents are allowed to borrow yard and garden tools to help maintain their yard; (b) Senior Meetings, supporting networking and intergenerational interactions; and (c) housing initiatives, which identify unsafe housing that leads to neighborhood problems such as crime, health and safety issues, fires, and decrease of property value in neighboring homes (North End Community Improvement Collaborative Inc., 2018).

C2. Healthcare Facilities and Community Resources Addressing Mental Health and Addiction

C2.1. OhioHealth Mansfield Hospital Psychiatric Department – Offers (a) adult inpatient programing, (b) adult intensive outpatient programing and (c) adolescent inpatient programing. Treatment interventions include behavioral health therapy, half-day partial hospitalization outpatient program, nursing, pastoral care and social work services (OhioHealth. (2015-2018a).
C2.2. Third Street Family Health Services – Coordinates mental healthcare for patients with various specialists and provides counseling services such as: (a) clinical social work counseling for persons age 6 and older, (b) diagnosis and treatment of mental and emotional disorders, (c) individual, group and family counseling, (d) crisis intervention, (e) advocacy and community liaison, (f) stress management, (g) coping skills, (h) depression, (i) anxiety, (j) relationship issues, (k) anger management, (l) grief issues, (m) chronic disease management, (n) end of life, (o) life coaching, and (p) trauma (Third Street Family Health Services. (2015a, b, c). The Third Street Family Health Services also offers the Weight and Depression Support Group, which assists persons who have been depressed due to weight issues (Third Street Family Health Services. (2015a, b, c).

C2.3. Richland County Mental Health and Recovery Services Board – Has partner agencies that serve mentally ill persons and those with substance abuse issues. Contract organizations include (a) Community Action for Capable Youth (CACY), (b) Catalyst Life Services, (c) Family Life Counseling and Psychiatric Services, (d) National Alliance on Mental Illness of Richland County (NAMI), and (e) Mansfield Urban Minority Alcohol and Drug Addiction Outreach Program. Affiliate agencies include (a) Foundations for Living, (b) Abraxas, (c) Three C Counseling, LLC, (d) Visiting Nurse Association of Mid-Ohio, and (e) Youth and Family Council (Richland County Mental Health and Recovery Services Board, 2018).

C2.4. Community Action for Capable Youth (CACY) – Focuses on prevention programs aimed at reducing the use of alcohol, tobacco and other drugs, while striving toward a drug-free community. Youth programs include (a) Informed Teens, (b) Positive Opportunities Program, (c) Tobacco Education Group, (d) Afterschool Programs, (e) Summer Programs, (f) Safety Town Programs, (g) First Time Offenders, (h) Tobacco Cessation Treatment Services, (i) LifeSkills Training for third-grade to tenth-grade students, (j) Second Step Curriculum for K–8, (k) Too Good for Drugs, geared toward elementary and middle school students, and (l) Too Good for Violence (Community Action for Capable Youth, 2018). Parenting programs include (a) Parent 2 Parent Classes, (b) Parents of At-Risk Teens Programs, (c) Parent Hosting Education, (d) Parent’s Week Activities, and (e) Raising Substance-Free Kids Info. Community education and awareness projects include (a) public awareness displays, (b) media articles, (c) community presentations, (d) campaign for Drug-Free Month celebration, (e) alcohol awareness campaign, (f) prevention programs for misuse of prescribed medicines, and (g) smoking cessation (Community Action for Capable Youth, 2018).

C2.5. Catalyst Life Services – A partnership between The Center for Individual and Family Services and The Rehabilitation Service of North and Central Ohio. Catalyst Life Services provides (a) mind, body and spirit rehabilitation, (b) crisis intervention and prevention, (c) transitional and residential programs, (d) communication support, such as audiology and deaf/hard-of-hearing support, and (e) vocational rehabilitation and training (Catalyst Life Services, 2018). Affiliated companies include (a) The Rehab Center, (b) Child and Adolescent Mental Health and Crisis Services, (c) The Center Adult Mental Health and Crisis Services, (d) New Beginnings Alcohol and Drug Treatment Services, (e) Audiology Services, (f) Community Center for the Deaf and Hard of Hearing, (g) District V Forensic Diagnostic Center, (h) Progress Industries, (i) Precise Services, and (j) Oasis Peer Center). (Catalyst Life Services, 2018).

C2.6. Family Life Counseling and Psychiatric Services – Has an approach to therapy that treats the entire family, maintains natural family structure and support, and focuses on returning the person to a healthy family and community. Examples of program and services for children include (a) Forever Families Created by Adoption, (b) in-home counseling, and (c) Revive Child Play Therapy. Examples of programs and services for youth include (a) adolescent drug and alcohol programs, (b) Connections in Life, and (c) The Dream Team. Examples of programs and services for adults and seniors include (a) Connections in Life, (b) The Dream Team, and (c) Forever Families Created by Adoption. (Family Life Counseling and Psychiatric Services, 2017).

C2.7. National Alliance on Mental Illness Ohio – Provides family-to-family classes and family support groups for individuals, friends and families, and coping with mental illness (National Alliance on Mental Illness Ohio, n.d.).

C2.8. Mansfield Urban Minority Alcohol and Drug Addiction Outreach Program (UMADAOP) – Serves predominantly African American, Hispanic and other populations affected by alcohol and drug abuse. Examples of services include (a) assessments, counseling, intensive outpatient programs, aftercare groups and prevention of relapse, (b) medication assisted treatment, including suboxone treatment, evaluation and prescription of medication, (c) prevention services to adolescents and teens, and (d) Circle for Recovery Ohio, which provides re-entry and support services for parolees, probationers and court referrals (Mansfield UMADAOP, 2011).
C2.9. Foundations for Living – An 84-bed center that serves youth ages 11-17 with the following services: (a) VISIONS, which serves males and females with dual diagnoses of substance dependency and mental health treatment; (b) PASSAGES, which focuses on behavior modification and substance abuse counseling services for females; (c) EXPLORATION, which is a 45-day assessment with psychiatric and medical evaluations, medication assessments as well as individual, group and family therapy; (d) care, treatment and support for pregnant women; and (e) care and treatment for victims of human trafficking through trauma-focused cognitive behavioral therapy and support and advocacy during legal proceedings (Foundations for Living, 2018). The Foundations for Living social programs capitalize on the strengths of youth with emotional or behavioral problems (Foundations for Living, 2018).

C2.10. Abraxas Ohio – A 100-bed residential treatment center for male youth located in Shelby, Ohio. Abraxas Ohio provides drug and alcohol treatment as well as juvenile sex offender programming, educational services, life skills and independent living, participation in community service projects and medical services (Abraxas Ohio, 2018).

C2.11. Three-C Counseling, LLC – An outpatient mental health and substance abuse program for youth and adults that focuses on: (a) addiction education, (b) application of skills learned from the program in daily living, and (c) care after treatment to ensure a sustainable recovery (Drug and Alcohol Rehab Centers, 2018).

C2.12. Visiting Nurse Association of Ohio – A home health agency serving Richland County and central Ohio counties. Home care services include (a) home healthcare including medical-surgical nursing, mental health, TeleHealth and rehabilitation services, (b) hospice and special care, and (c) personal care and private duty nursing (Visiting Nurse Association of Ohio, 2016).

C2.13. Richland County Youth and Family Council – Leads initiatives in ensuring an effective system of collaboration and coordination of community services, helping families and individuals attend to their needs and responsibilities. The Council provides case management, Help Me Grow, newborn home visits and the Family Information Network of Ohio (Richland County Youth and Family Council, n.d.).
D. How Data Was Obtained

D1.1. The definition of the community served by OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital was developed using the percentage of patients of who reside in Richland County during fiscal year 2018, based on electronic medical records. See Section A.

D1.2. The demographic data of Richland County population was obtained from the Ohio Development Services Agency (Ohio Development Services Agency, n.d.). See Section B.

D1.3. Pertinent health data from Ohio’s 2016 Community Health Assessment was summarized (Ohio Department of Health, 2016). See Appendix A.

D1.4. Pertinent health data from Richland County’s 2016 Community Health Assessment was summarized (Richland County Partners Community Health Assessment Collaborative, 2017). See Appendix B. (a) Review, synthesis, and analysis of primary and secondary data collected in Richland County by the Hospital Council of Northwest Ohio and University of Toledo (Richland County Partners Community Health Assessment Collaborative, 2017). This process was described succinctly in the 2016 Richland County Community Health Assessment (Richland County Partners Community Health Assessment Collaborative, 2017). Primary data were collected from more than 1,700 Richland County residents. Representatives from 26 nonprofit organizations based in Richland County and surrounding areas provided community inputs.

D1.5. Pertinent health data from the significant health needs identified by the community partners as part of the Richland County’s Community Health Improvement Plan was summarized (Richland County Community Health Partners, 2017). See Section E.

No information gaps were identified that may impact the ability to assess health needs during this community health needs assessment process.
E. The Significant Health Needs of the Community

As part of the development of the Community Health Improvement Plan, the Richland County Community Health Partners, comprised of representatives from 26 organizations (Appendix C), participated in identifying the significant health needs of the community based upon the primary and secondary data available, as well as from their experiences serving people from their respective agencies.

The significant health needs of Richland County include:

a. **Chronic disease** – Includes (a) obesity among children, youth and adults, (b) asthma among children and adults, and (c) diabetes among adults.

b. **Mental Health and Addiction** – Includes (a) substance abuse among youth and adults, (b) depression and suicide among youth and adults, and (c) adverse childhood experiences among children.
F. Primary and Chronic Disease Needs, and Other Health Issues of Uninsured Persons, Low-income Persons and Minority Groups

F1. Adult Chronic Disease (18 votes)

F1.1. Obesity – 42 percent of Richland County adults were at risk. Those most at risk for obesity were ages 30–64, females and African Americans.

F1.2. High blood pressure – 40 percent of Richland County adults were at risk. The most at risk for high blood pressure were ages 65 and older, males and African Americans.

F1.3. High blood cholesterol – 39 percent of Richland County adults were at risk. The most at risk for high blood cholesterol were ages 65 and older, males and African Americans.

F1.4. Arthritis – 35 percent of Richland County adults were at risk. The most at risk for arthritis were ages 65 and older, females and African Americans.

F1.5. Overweight – 31 percent of Richland County adults were at risk. The most at risk for being overweight were ages 65 and older, females and African Americans.

F2. Adult Substance abuse (12 votes)

F2.1. Current alcohol drinker – 50 percent of Richland County adults were at risk. The most at risk for drinking alcohol were persons ages 30 and below and African Americans.

F2.2. Binge alcohol drinker among current drinkers – 41 percent of Richland County adults were at risk. The most at risk for binge alcohol drinking were persons ages 30 and below and African Americans.

F2.3. Used medications not prescribed for them – 7 percent of Richland County adults were at risk. The most at risk for using medications of other people are persons ages 30–64, males and African Americans.

F2.4. Overdose deaths – death rate was 438 per 100,000 adults in Richland County.

F3. Adult Mental Health (11 votes)

F3.1. Did not get enough rest or sleep – 31 percent of Richland County adults were at risk.

F3.2. Felt sad, blue or depressed – 14 percent of Richland County adults were at risk.

F3.3. Made a plan to attempt suicide – 3 percent of Richland County adults were at risk. The most at risk for making a plan to attempt suicide were African Americans.

F3.4. Attempted suicide – 1 percent of Richland County adults attempted suicide. The most at risk for attempting suicide were African Americans.
F4. Adult Tobacco Use (5 votes)

F4.1. Former smoker – 24 percent of Richland County adults were at risk. The most at risk were persons ages 30–64, males and African Americans.

F4.2. Current smoker – 16 percent of Richland County adults were at risk. The most at risk were persons ages 30–64, females and African Americans.

F5. Adult Cancer (2 votes)

F5.1. Mammogram in the past year – 39 percent of Richland County adults were at risk for not getting yearly mammograms. The most at risk were persons age 40 and older and females.

F5.2. Breast cancer – 31 percent of Richland County adults were at risk for breast cancer.

F5.3. Prostate cancer – 15 percent of Richland County adults were at risk for prostate cancer.

F6. Adult Asthma (2 votes)

F6.1. Diagnosed with asthma – 18 percent of Richland County adults were diagnosed with asthma. Those most at risk were persons 30 and younger, females and African Americans.

F6.2. Adult Health Insurance (2 votes)

F6.3. Uninsured – 15 percent of Richland County adults were uninsured. Those most at risk for not having health insurance were persons age 30 and younger, males and African Americans.

F7. Adult Health Perceptions (1 vote)

F7.1. Rated mental health as not good on four or more days – 34 percent of Richland County adults were at risk. Those most at risk were African Americans.

F7.2. Rated physical health as not good on four or more days – 27 percent of Richland County adults were at risk. Those most at risk were African Americans.

F8. Infant mortality (1 vote)

F9. Youth Substance Abuse (16 votes)

F9.1. Binge alcohol drinker (of current drinkers) – 57 percent of Richland County youth were at risk, primarily those who are ages 14–16, and males.

F9.2. Lifetime alcohol drinker – 38 percent of Richland County youth were at risk, primarily those who are age 17 and older, and females.

F9.3. Current alcohol drinker – 17 percent of Richland County youth were at risk, primarily those who are age 17 and older.

F9.4. Used inhalants – 8 percent of Richland County youth were at risk, primarily those who are in grades 9–12 and males.

F9.5. Current tobacco smoker – 7 percent of Richland County youth, primarily those age 17 and older and males.
F10. Youth Obesity and Overweight (12 votes)

F10.1. Drank soda at least once in the past week – 28 percent of Richland County youth were at risk.

F10.2. Drank beverage high in caffeine at least one to three times in the past week – 27 percent of Richland County population were at risk.

F10.3. Overweight – 20 percent of Richland County population were at risk, primarily those who are ages 14–16 and males.

F10.4. Obese – 19 percent of Richland County population were at risk, primarily those ages 13 and below and males.

F11. Youth Violence (11 votes)

F11.1. Bullied in the past year – 46 percent of Richland County youth were at risk, primarily those in high school (grades 9–12).

F11.2. Carried a weapon in the past 30 days – 12 percent of Richland County youth were at risk, primarily those ages 14–16 and males.

F12. Youth Mental Health (10 votes)

F12.1. Depression – 25 percent of Richland County youth were at risk, primarily those who are in high school (grades 9–12) and females.

F12.2. Contemplated suicide – 25 percent of Richland County youth were at risk, primarily those who are ages 14–16 and females.

F12.3. Attempted suicide – 7 percent of Richland County youth were at risk, primarily those who are ages 14–16 and females.

F13. Youth Risky Behaviors (9 votes)

F13.1. Had multiple sexual partners – 53 percent of Richland County youth were at risk, primarily those who are in high school (grades 9–12).

F13.2. Had been asked to meet someone they met online – 18 percent of Richland County youth were at risk.

F13.3. Teen Birth Rate (2 votes) – 51 per 1,000 youth.

F13.4. Infant Mortality Rate (1 vote)

F14. Overweight and Obese among Children (12 votes)

F14.1. Obese – 41 percent of Richland County children ages 0–11 were obese.

F14.2. Overweight – 17 percent of Richland County children ages 0–11 were overweight.

F14.3. Physically active every day of the week – only 17 percent of Richland County youth were physically active on a daily basis.

F15. Bullying among Children (7 votes)

F15.1. Bullying – 43 percent of Richland County children ages 0–11 were bullied, primarily among ages 6–11.
F16. Adverse Childhood Experiences among Children (7 votes)

F16.1. Adversity – 20 percent of Richland County children ages 0–11 had two or more adverse childhood experiences.

F17. Asthma among Children (7 votes)

F17.1. Children Asthma – 13 percent of Richland County youth were diagnosed with asthma, Children ages 0–5 were most at risk.

F18. Attention Deficit Disorder (ADD) and Attention Deficit Hyperactivity Disorder (ADHD) (2 votes)

F18.1. ADD and ADHD – 7 percent of children ages 0–11 were diagnosed with ADD or ADHD, primarily those ages 6–11.

F19. Mental or Emotional Health of Children’s Parents (1 vote)

F19.1. Mother’s mental or emotional health is fair or poor – 6 percent of mothers of children ages 0–11 reported that their mental or emotional health is fair or poor. Children who are ages 6–11 are most at risk.

F19.2. Father’s mental or emotional health is fair or poor – 4 percent of fathers of children ages 0–11 reported that their mental or emotional health is fair or poor. Children who are ages 6–11 are most at risk.

F20. Head Injury among Children (1 vote)

F20.1. Head injury – 4 percent of Richland County children were diagnosed with a head injury, primarily those who are ages 6–11.

F21. Autism among Children (1 vote)

F21.1. Autism – 2 percent of Richland County children ages 0–11 were diagnosed with autism, primarily those who are ages 6–11.

F22. Dental and Vision Health of Children (1 vote)

F22.1. Dental care visit in the past year – 43 percent of Richland County children ages 0–11 visited the dentist in the past year, primarily those ages 0–5. 57 percent of children ages 0–11 did not have a dental checkup in the past year.

F22.2. Diagnosed with permanent vision problems – 2 percent of Richland County children ages 0–11 had permanent vision problems, primarily those who were ages 0–5.
G. The Process for Identifying and Prioritizing Community Health Needs and Services to Meet Community Health Needs

G1. Process and Criteria of Identifying and Prioritizing Significant Health Needs

The Richland County Community Health Improvement Plan (CHIP) Committee that is part of the Richland County Community Health Partners reviewed the data and information from the 2016 Richland County Community Health Assessment and identified primary issues affecting the Richland County population. During meetings held on April to June 2017, each committee member participated in ranking the key issues based on (a) magnitude of the issues, (b) seriousness of the consequence, and (c) possibility of successfully addressing the issue. The rankings of committee members were averaged to determine the priority health needs.

Table 1. Rankings of significant health needs identified in Richland County, Ohio.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Health Issue</th>
<th>Average Score (Rank)</th>
<th>Age Group</th>
<th>Health Issue</th>
<th>Average Score (Rank)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHILD</td>
<td>Overweight/Obesity</td>
<td>25.0 (1st)</td>
<td>CHILD</td>
<td>Adverse childhood experiences</td>
<td>21.8 (7th)</td>
</tr>
<tr>
<td>YOUTH</td>
<td>Overweight/Obesity</td>
<td>24.3 (2nd)</td>
<td>YOUTH</td>
<td>Violence</td>
<td>21.6 (8th)</td>
</tr>
<tr>
<td>ADULT</td>
<td>Chronic disease</td>
<td>23.6 (3rd)</td>
<td>YOUTH</td>
<td>Risky behaviors</td>
<td>21.6 (9th)</td>
</tr>
<tr>
<td>YOUTH</td>
<td>Substance abuse</td>
<td>23.0 (4th)</td>
<td>YOUTH</td>
<td>Mental health</td>
<td>21.5 (10th)</td>
</tr>
<tr>
<td>ADULT</td>
<td>Substance abuse</td>
<td>22.2 (5th)</td>
<td>CHILD</td>
<td>Bullying</td>
<td>20.2 (11th)</td>
</tr>
<tr>
<td>ADULT</td>
<td>Mental health</td>
<td>22.1 (6th)</td>
<td>CHILD</td>
<td>Asthma</td>
<td>19.8 (12th)</td>
</tr>
</tbody>
</table>

Based on these rankings, chronic disease and mental health and addiction were identified as the two priority health needs in Richland County. The community stakeholders included overweight and obesity among children under chronic disease. Refer to Section E, “The Significant Health Needs of the Community.”
The Richland County Community Health Partners (H1 to H26) include the OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital, Richland Public Health, Shelby City Health Department and other community stakeholders. The Richland County Community Health Partners contracted with the Hospital Council of Northwest Ohio to conduct the community health assessments and facilitated the process for developing the Community Health Improvement Plan (Richland County Community Health Partners, 2017a,b). Meetings of the Richland County Community Health Partners were held April through June 2016, and April through June 2017 to gather input. Appendix C summarizes the inputs and timeframe of inputs of representatives from various organizations that are part of the Richland County Community Health Partners. These representatives participated in the Richland County Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP). The mission of the organization and examples of programs and services provided to the Richland County community are indicated. These organizations serve uninsured persons, low-income persons and minority groups. The representatives from these organizations have public health background.

OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital collaborated with Richland Public Health in obtaining inputs from persons who work either for organizations, government agencies or as community residents, and who represent the broad interests of Richland County. The organization name, representatives, populations served, specific inputs provided and timeframe of inputs are summarized in Appendix C. The programs and services provided by these organizations to medically underserved, low-income and minority populations are also included in Appendix C.

All required sources for community input participated in the community health needs assessment process.

No written comments were received on the prior community health needs assessment report.

**H1. Richland Public Health** – Located at 555 Lexington Avenue, Mansfield, Ohio 44907. Richland Public Health is the local health department serving all residents of Richland County, Ohio (Richland Public Health, 2018a).

**H2. Shelby City Health Department** – Located at 43 West Main Street, Shelby, Ohio 44875. The Shelby City Health Department serves residents of the City of Shelby, Ohio (City of Shelby, n.d.).

**H3. Mental Health and Recovery Services Board of Richland County** – Located at 87 East First Street, Suite L, Mansfield, Ohio 44902. The Mental Health and Recovery Services Board of Richland County partners with various agencies to provide services to people with mental health and substance abuse issues (Mental Health and Recovery Services Board of Richland County, 2018a, b).

**H4. Third Street Family Health Services** – Located at 600 West Third Street, Mansfield, Ohio 44906 (main location). The Third Street Family Health Services provides primary healthcare services to underserved populations, including medical care, pediatric care, obstetrics and gynecology, behavioral, and dental care (Third Street Family Health Services, 2015a,b,c). It is a recognized primary care medical home (PCMH). It is a private, nonprofit, Federally Qualified Health Center (Third Street Family Health Services, 2015a,b,c).

**H5. Richland County Children Services** – Located at 731 Scholl Road, Mansfield, Ohio 44907. Richland County Children Services is a public child welfare agency that has a legal mandate to determine child neglect and abuse in Richland County (Richland County Children Services, 2018a,b).

**H6. Richland Newhope/Richland County Board of Developmental Disabilities** – Located at 314 Cleveland Avenue, Mansfield, Ohio 44902. Richland Newhope supports families, children and adults by
Ohio Health Mansfield Hospital Community Health Needs Assessment

connecting them to community resources, appropriate employment, residence and community organizations (Richland Newhope, 2018).

H7. Avita Health System – Located at 269 Portland Way South, Galion, Ohio 44833 (headquarters) with hospitals in Galion, Bucyrus and Ontario (Avita Health System, n.d.).

H8. Richland County Job and Family Services – Located at 171 Park Avenue East, Mansfield, Ohio 44902. Richland County Job and Family Services supports families and workforce development through programs such as child care, disability assistance, First Call 2-1-1, food stamps, long-term care, Medicaid services, Ohio Works First, social services and Temporary Assistance for Needy Families (TANF) (Richland County Job and Family Services, 2011). Richland County Job and Family Services provided partial funding to the Richland County Community Health Assessment.

H9. Community Health Access Project – Located at 255 Hedges Street, Suite 115, Mansfield, Ohio 44902. The Community Health Access Project (CHAP) is a nationally certified Pathways Community HUB, which serves Richland County and neighboring areas (Community Health Access Project, 2016). The Community Health Workers provide home visiting and care coordination services to high-risk patients so they are connected to primary care, prevention services, behavioral health, housing, food clothing, adult education and employment (Community Health Access Project, 2016).

H10. Community Action for Capable Youth (CACY) – Located at 1495 West Longview Avenue, Suite 104, Mansfield, Ohio 44906. CACY is the oldest substance abuse prevention coalition in Richland County. CACY offers violence, tobacco, alcohol and other drug prevention and other education activities (Community Action for Capable Youth, 2018).

H11. First Call 211 – Located at the Mansfield/Richland County Public Library, 43 West Third Street, Mansfield, Ohio 44902. First Call 211 of Richland County is a free and confidential community service that provides information and referral to persons needing assistance for community resources. First Call 211 is a collaboration between the Mansfield/Richland County Public Library and Richland County Job and Family Services (Mansfield/Richland County Public Library, 2018).

H12. Harmony House Homeless Services Inc. – Located at 124 West Third Street, Mansfield, Ohio 44902. Harmony House assists homeless persons and families by providing emergency shelter, case management and support services, including job readiness and life-skills meetings, and medical screening and referrals (Harmony House Homeless Services Inc.).

H13. Mansfield City Schools – Located at 856 West Cook Road, Mansfield, Ohio 44907 (administrative office). Mansfield City Schools offers a K–12 public education program (Mansfield City Schools, 2016).

H14. The City of Mansfield Department of Regional Community Advancement (DRCA) – Located at the Ocie Hill Neighborhood Center, 445 Bowman Street, Mansfield, Ohio 44903. The City of Mansfield Department of Regional Community Advancement enables families to gather and advance their learning. Examples of activities include a minority health fair, kindergarten screening, community celebrations and immunizations. It offers access to a community room, fitness center and computer laboratory (The City of Mansfield Department of Regional Community Advancement, n.d.).

H15. Mansfield Memorial Homes – Located at 50 Blymyer Avenue, Mansfield, Ohio 44903. Mansfield Memorial Homes provides a skilled nursing facility, inpatient and outpatient therapy, independent and assisted living, adult day care, and Meals on Wheels (Mansfield Memorial Homes, n.d.).

H16. Mansfield Area YMCA – Located at 750 Scholl Road, Mansfield, Ohio 44907. The Mansfield Area YMCA offers the community opportunities to achieve a healthy body, mind and spirit. Physical and recreational activities are available for youth, adults, seniors and families. Examples of activities include adult sports, exercise in groups, health and fitness, swimming, youth sports, youth programs and various trainings (lifeguard certification, CPR, First Aid, AEE training, babysitting trainers course) (Mansfield Area YMCA, 2018).

H17. North End Community Improvement Collaborative Inc. – Located at 134 North Main Street, Mansfield, Ohio 44902. It utilizes the concept of asset-based community development, focusing on the assets of the community, leadership development, and tapping the impact of local organizations to address
social determinants of health for residents of the northern area of Mansfield, Ohio (North End Community Improvement Collaborative Inc., 2018).

H18. Ohio District 5 Area Agency on Aging Inc. – Located at 2131 Park Avenue West, Suite 100, Ontario, Ohio 44906. The Ohio District 5 Area Agency on Aging Inc. provides social and nutrition services to age 60 plus in Ashland, Crawford, Huron, Knox, Marion, Morrow, Richland, Seneca and Wyandot Counties (Ohio District 5 Area Agency on Aging, 2018).

H19. Richland County Domestic Relations Court – Located at 50 Park Avenue East, Mansfield, Ohio 44902 (Richland County Common Pleas Courts Domestic Division). The Domestic Court conducts hearings related to divorce, dissolution, parental rights and responsibilities, enforcement of court order (Richland County Common Pleas Courts, n.d.).

H20. Richland County Juvenile Court – Located at 411 South Diamond Street, Mansfield, Ohio 44902. The Richland County Juvenile Court conducts hearings on legal issues affecting juveniles (any person under the age of 18) such as delinquency, family matters involving juveniles of unmarried parents, custody, support and visitation (Richland County Common Pleas Courts, n.d.).

H21. Richland County Regional Planning Commission – Located at 35 North Park Street, Suite 230, Mansfield, Ohio 44902. The Richland County Regional Planning Commission serves entire Richland County, including the City of Mansfield, municipalities and townships. It focuses on community development, land utilization planning and transportation planning (Richland County Regional Planning Commission, n.d.).

H22. Richland County Youth and Family Council – Located at 171 Park Avenue East, Mansfield, Ohio 44902. The Richland County Youth and Family Council provides leadership and coordination of various community services for the whole family, including youth and children (Richland County Youth and Family Council, n.d.).

H23. Richland County Foundation – Located at 181 South Main Street, Mansfield, Ohio 44902. The Richland County Foundation improves and enhances the quality of life of the community through strategic philanthropy and leadership (Richland County Foundation, 2018). Examples of the Richland County Foundation’s projects includes The Women’s Fund, support of new businesses and entrepreneurship, grants for community programs and projects, promotion of diversity, equity and inclusion, promotion of economic development, programs for children and teachers.

H24. Richland Moves! – Located at West Fifth Street, Mansfield, Ohio 44902. Richland Moves enhances mobility and accessibility of the community by improving awareness, safety, convenience and walking and biking in neighborhoods (Richland Moves!, n.d.).

H25. Village of Bellville – Located in southern Richland County with a population of 1,918. The administration office is located in 142 Park Place, Bellville, Ohio 44813 (United States Census Bureau, n.d.; Village of Bellville, Ohio, 2018).

H26. Visiting Nurse Association of Ohio – Located in 40 West Fourth Street, Mansfield, Ohio 44902. The Visiting Nurse Association of Ohio provides home health and hospice care in Richland County, Ashland County, Ashtabula County, Crawford County, Cuyahoga County, Geauga County, Huron County, Knox County, Lake County, Lorain County, Marion County, Medina County, Morrow County, Portage County, Summit County, Wayne County and Wyandot County (Visiting Nurse Association of Ohio, 2016).
I. The Impact of Any Actions Taken to Address the Significant Health Needs Identified in the Hospital Facility’s 2016 CHNA

Appendix D summarizes the impact of OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital community benefit programs that addressed the priority health needs in the 2016 board-approved community health needs assessment and implementation strategy (OhioHealth 2016a,b,c).
J. Contracted Organizations to Assist with Conducting the CHNA

J1. The Hospital Council of Northwest Ohio (HCNO) – located at 3231 Central Park West Drive, Suite 200, Toledo, Ohio 43617. The Richland County Community Health Partners contracted with HCNO to conduct the community health assessments and facilitated the process for developing the Community Health Improvement Plan. HCNO is a member-driven regional hospital association that represents and advocates on behalf of its member hospitals and health systems. HCNO provides collaborative opportunities for its members and community partners to improve the health and well-being of Northwest Ohio’s residents. Community services and regional programs provided by HCNO include community health assessments, clergy badges, Healthcare Heroes, Northwest Ohio Disaster Preparedness, Northwest Ohio Pathways HUB, Northwest Ohio Regional Trauma Registry, and planning and evaluation services.

J2. Bricker & Eckler LLP/INCompliance Consulting (Chris Kenney, Jim Flynn) – located at 100 South Third Street, Columbus, Ohio 43215. Bricker & Eckler LLP was contracted to review this community health needs assessment report. Jim Flynn is a partner with the Bricker & Eckler healthcare group, where he has practiced for 28 years. His general healthcare practice focuses on health planning matters, certificates of need, nonprofit and tax-exempt healthcare providers, and federal and state regulatory issues. Mr. Flynn has provided consultation to healthcare providers, including nonprofit and tax-exempt healthcare providers as well as public hospitals, on community health needs assessments. Chris Kenney is the director of regulatory services with INCompliance Consulting, an affiliate of Bricker & Eckler LLP. Ms. Kenney has more than 39 years of experience in healthcare planning and policy development, federal and state regulations, certificate of need regulations, and Medicare and Medicaid certification. She has been conducting CHNAs in compliance with federal rules since 2012, providing expert testimony on community needs and offering presentations and educational sessions regarding CHNAs.
References


References (continued)


Mansfield Area YMCA. (2018). We are community. Retrieved May 8, 2018, from https://www.mansfieldy.org/about/we-are-community.


References (continued)


References (continued)


References (continued)


Appendix A

Summary of Data and Information from the Ohio 2016 State Health Assessment

1. Ohio’s rank on national scorecards (Ohio Department of Health, n.d.)

2. Mental health and addiction (Ohio Department of Health, n.d.)
Opiate overdose deaths are an immediate threat to the health of Ohioans. In 2014, 37 percent of admissions for addiction treatment was due to heroin and prescription opioids, relative to 7 percent in 2001. The death rate due to unintentional injuries (primarily from drug overdoses) increased by 30 percent from 2009 to 2014. Opiate addiction and tobacco use are major challenges to health in Ohio.

2.1. Poor mental health days – 4.1 percent (Ohio); 3.7 percent (U.S.)
2.2. Unmet need for mental health – 21.3 percent (Ohio); 20.3 percent (U.S.)
2.3. Youth with depression who did not receive mental health services – 64 percent (Ohio); 64.1 percent (U.S.)
2.4. Unmet need for illicit drug use treatment – 2.7 percent (Ohio); 2.4 percent (U.S.)

3. Chronic disease (Ohio Department of Health, n.d.)
3.1. Heart disease and cancer were the two leading causes of death in Ohio in 2014.
3.2. Heart disease prevalence – 4.8 percent (Ohio); 4.2 percent (U.S.)
3.3. Cancer incidence – 174 per 100,000 population (Ohio); 168 per 100,000 population (U.S.)
3.4. Adult obesity – 32.6 percent (Ohio); 29.6 percent (U.S.)
3.5. Youth obesity – 13.0 percent (Ohio); 13.7 percent (U.S.)
3.6. Hypertension prevalence – 33.5 percent (Ohio); 31.4 percent (U.S.)
3.7. Adult diabetes – 11.7 percent (Ohio); 10 percent (U.S.)
3.8. Adult asthma – 10.8 percent (Ohio); 8.9 percent (U.S.)
3.9. Child asthma – 14.3 percent (Ohio); 14 percent (U.S.)

4. Maternal and infant health (Ohio Department of Health, n.d.)
4.1. Infant mortality rate – 6.8 per 1,000 live births (Ohio); 6 per 1,000 live births (U.S.)
4.2. In 2014, black infant mortality rate was 14.3 per 1,000 live births, compared to white infant mortality rate of 5.3 per 1,000 live births and Hispanic infant mortality rate of 6.2 per 1,000 live births. Compared to whites and Hispanics, black Ohioans were least likely to obtain prenatal care within the first trimester of pregnancy.

4.3. Breastfeeding at six months – 42.1 percent (Ohio); 49.4 percent (U.S.)
4.4. Two notable areas of progress in Ohio: (a) teen birth rate declined 15.8 percent from 2012 to 2014, (b) percentage of infants most often laid on their back to sleep (“safe sleep”) – 76 percent (Ohio); 71.7 percent (U.S.)
4.5. Preterm birth – 10.3 percent (Ohio); 9.6 percent (U.S.)
4.6. Low birth weight – 8.5 percent (Ohio); 8.0 percent (U.S.)
5. **Tobacco use and perceived risks** (Ohio Department of Health, n.d.)
   5.1. Adult smoking – 21 percent (Ohio); 18.1 percent (U.S.)
   5.2. Youth tobacco use – 28.4 percent (Ohio); 25.3 percent (U.S.)
   5.3. Smoking during pregnancy – 16.3 percent (Ohio); 8.4 percent (U.S.)
   5.4. Perceived risk of cigarettes – 64.7 percent (Ohio); 65.3 percent (U.S.)

6. **Alcohol and other drug use and perceived risks** (Ohio Department of Health, n.d.)
   6.1. Illicit drug use – 8.7 percent (Ohio); 9.8 percent (U.S.)
   6.2. Excessive drinking – 19.1 percent (Ohio); 18.2 percent (U.S.)
   6.3. Perceived risk of alcohol abuse – 37 percent (Ohio); 39.1 percent (U.S.)
   6.4. Perceived risk of marijuana – 24.7 percent (Ohio); 23.5 percent (U.S.)

7. **Healthy eating** (Ohio Department of Health, n.d.)
   7.1. Fruit consumption – 41.7 percent (Ohio); 39.2 percent (U.S.)
   7.2. Vegetable consumption – 26.3 percent (Ohio); 22.9 percent (U.S.)

8. **Lack of physical activity** (Ohio Department of Health, n.d.)
   8.1. Physical inactivity – 25 percent (Ohio); 23.7 percent (U.S.)

9. **Lack of sleep** (Ohio Department of Health, n.d.)
   9.1. Insufficient sleep – 37.1 percent (Ohio); 34.2 percent (U.S.)
Appendix B

Summary of Data from the Health Assessment Survey of Richland County Adults, Youth and Children Compared to Ohio and United States

Appendix B1. Adult Health Data Summary (Richland County Partners Community Health Assessment Collaborative, 2017)

B1.1. Adult Health Status
The percentage of Richland County adults who rated their health status as excellent or very good declined from 53 percent in 2011 to 45 percent in 2016. In 2016, the percentage of adults who rated their health status as excellent or very good was 7 percent lower in Richland County, compared to Ohio and the United States. Richland County adults reported about five to six days of poor physical or mental health, compared to about four days in Ohio and the United States.

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</thead>
<tbody>
<tr>
<td>Percentage of adults who rated their health status as excellent or very good</td>
<td>53 percent</td>
<td>45 percent</td>
<td>52 percent</td>
<td>52 percent</td>
</tr>
<tr>
<td>Percentage of adults who rated their health status as fair or poor</td>
<td>12 percent</td>
<td>13 percent</td>
<td>17 percent</td>
<td>16 percent</td>
</tr>
<tr>
<td>Average number of days in past month when physical health was not good</td>
<td>No data</td>
<td>5.5</td>
<td>4.0</td>
<td>3.8</td>
</tr>
<tr>
<td>Average number of days in past month when mental health was not good</td>
<td>No data</td>
<td>6.2</td>
<td>4.3</td>
<td>3.7</td>
</tr>
</tbody>
</table>

B1.2. Adult Healthcare Coverage
In Richland County, 15 percent of adults were uninsured in 2016, which is 2 percent higher than in 2011. There were more uninsured adults in Richland County, compared to rates for Ohio and the United States.

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<tbody>
<tr>
<td>Percentage of adults who were uninsured</td>
<td>13 percent</td>
<td>15 percent</td>
<td>8 percent</td>
<td>11 percent</td>
</tr>
</tbody>
</table>
**B1.3. Adult Chronic Diseases – Diabetes, Asthma and Arthritis**

The percentage of Richland County adults who were diagnosed with diabetes was 3 percent higher in 2016, compared to 2011. Richland County has a higher percentage of adults with either diabetes, asthma or arthritis, compared to Ohio and the United States.

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<tbody>
<tr>
<td>Percentage of adults who were diagnosed with diabetes</td>
<td>10 percent</td>
<td>13 percent</td>
<td>11 percent</td>
<td>10 percent</td>
</tr>
<tr>
<td>Percentage of adults who were diagnosed with asthma</td>
<td>15 percent</td>
<td>18 percent</td>
<td>14 percent</td>
<td>14 percent</td>
</tr>
<tr>
<td>Percentage of adults who were diagnosed with arthritis</td>
<td>31 percent</td>
<td>35 percent</td>
<td>28 percent</td>
<td>25 percent</td>
</tr>
</tbody>
</table>

**B1.4. Adult Heart Health**

The percentage of Richland County adults who had chest pain, high blood pressure and high blood cholesterol increased by 2 to 5 percent from 2011 to 2016. In 2016, the percentage of Richland County adults who had chest pain, diagnosed with high blood pressure, or high blood cholesterol was higher than in Ohio and the United States. The percentage of Richland County adults who had a heart attack and stroke declined by 2 to 3 percent from 2011 to 2016, which may be partially attributed to the 10 percent increase in Richland County adults who had a blood cholesterol checked within the past five years.

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<tbody>
<tr>
<td>Percentage of adults who had chest pain (angina)</td>
<td>4 percent</td>
<td>6 percent</td>
<td>4 percent</td>
<td>4 percent</td>
</tr>
<tr>
<td>Percentage of adults who had a heart attack</td>
<td>7 percent</td>
<td>5 percent</td>
<td>5 percent</td>
<td>4 percent</td>
</tr>
<tr>
<td>Percentage of adults who had a stroke</td>
<td>6 percent</td>
<td>3 percent</td>
<td>4 percent</td>
<td>3 percent</td>
</tr>
<tr>
<td>Percentage of adults who has been diagnosed with high blood pressure</td>
<td>35 percent</td>
<td>40 percent</td>
<td>34 percent</td>
<td>31 percent</td>
</tr>
<tr>
<td>Percentage of adults who were diagnosed with high blood cholesterol</td>
<td>34 percent</td>
<td>39 percent</td>
<td>37 percent</td>
<td>36 percent</td>
</tr>
<tr>
<td>Percentage of adults who had blood cholesterol checked within past five years</td>
<td>73 percent</td>
<td>83 percent</td>
<td>78 percent</td>
<td>78 percent</td>
</tr>
</tbody>
</table>
B1.5. Adult Weight Status
The percentage of Richland adults who were obese was 7 percent higher in 2016, compared to 2011. Obesity rates among adults was 12 percent greater in Richland County, compared to Ohio and the United States.

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</thead>
<tbody>
<tr>
<td>Percentage of adults who are overweight</td>
<td>38 percent</td>
<td>31 percent</td>
<td>37 percent</td>
<td>36 percent</td>
</tr>
<tr>
<td>Percentage of adults who are obese</td>
<td>35 percent</td>
<td>42 percent</td>
<td>30 percent</td>
<td>30 percent</td>
</tr>
</tbody>
</table>

B1.6. Adult Alcohol Consumption
The percentage of Richland County adults who had five or more drinks in a couple of hours increased from 16 percent in 2011 to 20 percent in 2016. The percentage of binge drinking among Richland County adults was 2 percent greater than in Ohio and 4 percent greater compared to the United States.

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<tbody>
<tr>
<td>Percentage of adults who had at least one alcoholic beverage in the past month</td>
<td>51 percent</td>
<td>50 percent</td>
<td>53 percent</td>
<td>54 percent</td>
</tr>
<tr>
<td>Percentage of adults who binge drank in past month (five or more drinks in a couple of hours on a single occasion)</td>
<td>16 percent</td>
<td>20 percent</td>
<td>18 percent</td>
<td>16 percent</td>
</tr>
</tbody>
</table>

Appendix B1.7. Adult Tobacco Use
The percentage of current smokers in Richland County declined from 19 percent in 2011 to 16 percent in 2016. The percentage of tobacco use in 2016 was 6 percent lower than Ohio and 2 percent lower than the United States. At least 40 percent of Richland County adults in 2016 tried to quit smoking.

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</thead>
<tbody>
<tr>
<td>Current smoker</td>
<td>19 percent</td>
<td>16 percent</td>
<td>22 percent</td>
<td>18 percent</td>
</tr>
<tr>
<td>Former smoker</td>
<td>23 percent</td>
<td>24 percent</td>
<td>24 percent</td>
<td>25 percent</td>
</tr>
<tr>
<td>Tried to quit smoking</td>
<td>49 percent</td>
<td>40 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
</tbody>
</table>
B1.8. Adult Drug Use

The percentage of Richland County adults who used marijuana in the past six months decreased from 9 percent in 2011 to 6 percent in 2016. The percentage of adults who misused prescription drugs in the past six months decreased from 13 percent to 7 percent in 2016.

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<tbody>
<tr>
<td>Percentage of adults who use marijuana in the past six months</td>
<td>9 percent</td>
<td>6 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>Percentage of adults who misused prescription drugs in the past six months</td>
<td>13 percent</td>
<td>7 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
</tbody>
</table>

B1.9. Adult Preventive Medicine

The percentage of Richland County adults ages 65 and older who had a pneumonia vaccine increased from 49 percent in 2011 to 72 percent in 2016. The percentage of Richland County adults ages 65 and older who had a pneumonia vaccine in 2016 was comparable to that of Ohio and the United States.

The percentage of Richland County adults ages 65 and older who had a flu vaccine in the past year increased from 56 percent in 2011 to 78 percent in 2016. In 2016, the percentage of Richland County adults ages 65 and older who had a flu vaccine was 20 percent greater than in Ohio and 17 percent greater than in the United States.

The percentage of adults who had a mammogram in the past two years (ages 40 and older) decreased from 83 percent in 2011 to 76 percent in 2016. In 2016, the percentage of adults who had a mammogram in the past two years (ages 40 and older) was 4 percent higher than in Ohio and 3 percent higher than in the United States.

The percentage of adults who had a Pap test in the past three years decreased from 67 percent in 2011 to 66 percent in 2016. In 2016, the percentage of adults who had a Pap test in the past three years was 8 percent lower than in Ohio and 9 percent lower than in the United States.

In 2016, 73 percent of Richland County adults had a clinical breast exam in the past two years (ages 40 and over). The percentage of adults who had a clinical breast exam in the past two years (ages 40 and over) increased from 42 percent in 2011 to 56 percent in 2016.
### Percentage of adults who had a pneumonia vaccine (ages 65 and older)

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<tbody>
<tr>
<td>Percentage of adults who had a pneumonia vaccine (ages 65 and older)</td>
<td>49 percent</td>
<td>72 percent</td>
<td>72 percent</td>
<td>73 percent</td>
</tr>
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</table>

### Percentage of adults who had a flu vaccine in the past year (ages 65 and over)

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<tbody>
<tr>
<td>Percentage of adults who had a flu vaccine in the past year (ages 65 and over)</td>
<td>56 percent</td>
<td>78 percent</td>
<td>58 percent</td>
<td>61 percent</td>
</tr>
</tbody>
</table>

### Percentage of adults who had a mammogram in the past two years (ages 40 and older)

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<tbody>
<tr>
<td>Percentage of adults who had a mammogram in the past two years (ages 40 and older)</td>
<td>83 percent</td>
<td>76 percent</td>
<td>72 percent</td>
<td>73 percent</td>
</tr>
</tbody>
</table>

### Percentage of adults who had a Pap test in the past three years

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<tbody>
<tr>
<td>Percentage of adults who had a Pap test in the past three years</td>
<td>67 percent</td>
<td>66 percent</td>
<td>74 percent</td>
<td>75 percent</td>
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</table>

### Percentage of adults who had a clinical breast exam in the past two years (ages 40 and over)

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<tbody>
<tr>
<td>Percentage of adults who had a clinical breast exam in the past two years (ages 40 and over)</td>
<td>No data</td>
<td>73 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
</tbody>
</table>

### Percentage of adults who had a colonoscopy or sigmoidoscopy in the past five years (ages 50 and over)

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<tbody>
<tr>
<td>Percentage of adults who had a colonoscopy or sigmoidoscopy in the past five years (ages 50 and over)</td>
<td>42 percent</td>
<td>56 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
</tbody>
</table>

## B1.10. Adult Quality of Life

The percentage of Richland County adults who are limited in some way because of physical, mental or emotional problems decreased from 32 percent in 2011 to 29 percent in 2016. In 2016, the percentage of Richland County adults who are limited in some way because of physical, mental or emotional problems was 8 percent higher than in Ohio and the United States.

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<tbody>
<tr>
<td>Percentage of adults who are limited in some way because of physical, mental or emotional problem</td>
<td>32 percent</td>
<td>29 percent</td>
<td>21 percent</td>
<td>21 percent</td>
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## Appendix B1.11. Adult Mental Health

The percentage of Richland County adults who considered attempting suicide in the past year increased from 1 percent in 2011 to 3 percent in 2016.

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<tbody>
<tr>
<td>Percentage of adults who considered attempting suicide in the past year</td>
<td>1 percent</td>
<td>3 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
</tbody>
</table>
B1.12. Adult Oral Health

The percentage of Richland adults who have visited the dentist in the past year declined from 66 percent to 65 percent in 2016. In 2016, the percentage of Richland County adults who have visited the dentist in the past year was the same in Ohio and the United States.

The percentage of Richland County adults who have had one or more permanent teeth removed increased from 44 percent in 2011 to 51 percent in 2016. In 2016, the percentage of adults who have had one or more permanent teeth removed was 4 percent higher in Richland County than in Ohio and 8 percent higher than in the United States.

The percentage of adults 65 and older who had all their permanent teeth removed declined from 14 percent in 2011 to 13 percent in 2016. In 2016, the percentage of adults 65 and older who had all their permanent teeth removed was 5 percent lower than in Ohio and 2 percent lower than in the United States.

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</thead>
<tbody>
<tr>
<td>Percentage of adults who visited the dentist in the past year</td>
<td>66 percent</td>
<td>65 percent</td>
<td>65 percent</td>
<td>65 percent</td>
</tr>
<tr>
<td>Percentage of adults who had one or more permanent teeth removed</td>
<td>44 percent</td>
<td>51 percent</td>
<td>47 percent</td>
<td>43 percent</td>
</tr>
<tr>
<td>Percentage of adults 65 and older who had all their permanent teeth removed</td>
<td>14 percent</td>
<td>13 percent</td>
<td>18 percent</td>
<td>15 percent</td>
</tr>
</tbody>
</table>
**Appendix B2. Youth Health Summary Data (grades 9–12)** (Richland County Partners Community Health Assessment Collaborative, 2017)

**B2.1. Youth Weight Control (grades 9–12)**

In 2016, 22 percent of Richland County youth were obese, compared to 13 percent in Ohio and 14 percent in the United States. In the same year, 26 percent of Richland County youth were overweight, compared to 16 percent in Ohio and the United States. 4 percent of Richland County youth went without eating for 24 hours, compared to 10 percent in Ohio and 13 percent in the United States. 90 percent of Richland County youth ate one to four servings of fruits and vegetables per day. 18 percent of Richland County youth did not participate in at least 60 minutes of physical activity on any day in past week, compared to only 13 percent in Ohio and 14 percent in the United States.

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<tbody>
<tr>
<td>Percentage of youth who were obese</td>
<td>22 percent</td>
<td>13 percent</td>
<td>14 percent</td>
</tr>
<tr>
<td>Percentage of youth who were overweight</td>
<td>26 percent</td>
<td>16 percent</td>
<td>16 percent</td>
</tr>
<tr>
<td>Percentage of youth who were trying to lose weight</td>
<td>42 percent</td>
<td>47 percent</td>
<td>46 percent</td>
</tr>
<tr>
<td>Percentage of youth who described themselves as slightly or very overweight</td>
<td>29 percent</td>
<td>28 percent</td>
<td>32 percent</td>
</tr>
<tr>
<td>Percentage of youth who exercised to lose weight</td>
<td>45 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>Percentage of youth who ate less food, fewer calories, or foods lower in fat to lose weight</td>
<td>29 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>Percentage of youth who went without eating for 24 hours or more</td>
<td>4 percent</td>
<td>10 percent</td>
<td>13 percent</td>
</tr>
<tr>
<td>Percentage of youth who took diet pills, powders or liquids without a doctor’s advice</td>
<td>3 percent</td>
<td>5 percent</td>
<td>5 percent</td>
</tr>
<tr>
<td>Percentage of youth who vomited or took laxatives</td>
<td>2 percent</td>
<td>5 percent</td>
<td>4 percent</td>
</tr>
<tr>
<td>Percentage of youth who were physically active at least 60 minutes per day on every day in past week</td>
<td>24 percent</td>
<td>26 percent</td>
<td>27 percent</td>
</tr>
<tr>
<td>Percentage of youth who were physically active at least 60 minutes per day on five or more days in past week</td>
<td>47 percent</td>
<td>48 percent</td>
<td>49 percent</td>
</tr>
<tr>
<td>Percentage of youth who did not participate in at least 60 minutes of physical activity on any day in past week</td>
<td>18 percent</td>
<td>13 percent</td>
<td>14 percent</td>
</tr>
<tr>
<td>Percentage of youth who ate one to four servings of fruits and vegetables per day</td>
<td>90 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>Percentage of youth who watched television three or more hours per day</td>
<td>23 percent</td>
<td>28 percent</td>
<td>25 percent</td>
</tr>
</tbody>
</table>
B2.2. Unintentional Injuries and Violence (grades 9–12)
In 2016, 18 percent of Richland County youth had been in a physical fight in the past year, compared to 6 percent in Ohio and 8 percent in the United States. 46 percent of Richland County youth have been bullied in the past year.

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<tbody>
<tr>
<td>Percentage of youth who carried a weapon in the past month</td>
<td>14 percent</td>
<td>14 percent</td>
<td>16 percent</td>
</tr>
<tr>
<td>Percentage of youth who have been in a physical fight in the past year</td>
<td>18 percent</td>
<td>6 percent</td>
<td>8 percent</td>
</tr>
<tr>
<td>Percentage of youth who have been threatened or injured with a weapon on school property in the past year</td>
<td>7 percent</td>
<td>No data</td>
<td>6 percent</td>
</tr>
<tr>
<td>Percentage of youth who did not go to school because they felt unsafe</td>
<td>4 percent</td>
<td>5 percent</td>
<td>6 percent</td>
</tr>
<tr>
<td>Percentage of youth who have been bullied in the past year</td>
<td>46 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>Percentage of youth who have been electronically or cyber bullied in the past year</td>
<td>13 percent</td>
<td>15 percent</td>
<td>16 percent</td>
</tr>
<tr>
<td>Percentage of youth who have been hit, slapped or physically hurt on purpose by their boyfriend or girlfriend in the past year</td>
<td>7 percent</td>
<td>No data</td>
<td>10 percent</td>
</tr>
<tr>
<td>Percentage of youth who have been forced to have sexual intercourse</td>
<td>9 percent</td>
<td>8 percent</td>
<td>7 percent</td>
</tr>
</tbody>
</table>

B2.3. Alcohol Consumption (grades 9–12)
In 2016, the percentage of Richland County youth who have ever tried alcohol was 55 percent, which was 16 percent lower than in Ohio and 8 percent lower than in the United States. In 2016, the percentage of youth who rode with someone who was drinking was 14 percent, which was 3 percent lower than in Ohio and 6 percent lower than in the United States.

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<tbody>
<tr>
<td>Percentage of youth who have ever tried alcohol</td>
<td>55 percent</td>
<td>71 percent</td>
<td>63 percent</td>
</tr>
<tr>
<td>Percentage of youth who were current drinkers</td>
<td>28 percent</td>
<td>30 percent</td>
<td>33 percent</td>
</tr>
<tr>
<td>Percentage of youth who are binge drinkers</td>
<td>18 percent</td>
<td>16 percent</td>
<td>18 percent</td>
</tr>
<tr>
<td>Percentage of youth who drank for the first time before age 13</td>
<td>13 percent</td>
<td>13 percent</td>
<td>17 percent</td>
</tr>
</tbody>
</table>
### B2.4. Youth Tobacco Use (grades 9–12)

In 2016, 32 percent of Richland County youth had tried cigarettes, which is 20 percent lower than in Ohio, but the same as the United States. In 2016, 11 percent of youth are current smokers, which is 4 percent lower than in Ohio, but the same as the United States. In 2016, 57 percent of Richland County youth tried to quit smoking, which is 1 percent higher than in Ohio and 12 percent higher than in the United States. In 2016, only 1 percent of Richland County youth smoked cigarettes on 20 or more days during the past month, compared to 7 percent in Ohio and 3 percent in the United States. In 2016, 5 percent of Richland County youth smoked a whole cigarette for the first time before the age of 13, which is 9 percent lower than in Ohio and 2 percent lower than in the United States.

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<tbody>
<tr>
<td>Percentage of youth who have ever tried cigarettes</td>
<td>32 percent</td>
<td>52 percent</td>
<td>32 percent</td>
</tr>
<tr>
<td>Percentage of youth who are current smokers</td>
<td>11 percent</td>
<td>15 percent</td>
<td>11 percent</td>
</tr>
<tr>
<td>Percentage of youth who tried to quit smoking</td>
<td>57 percent</td>
<td>56 percent</td>
<td>45 percent</td>
</tr>
<tr>
<td>Percentage of youth who smoked cigarettes on 20 or more days during the past month</td>
<td>1 percent</td>
<td>7 percent</td>
<td>3 percent</td>
</tr>
<tr>
<td>Percentage of youth who smoked a whole cigarette for the first time before the age of 13</td>
<td>5 percent</td>
<td>14 percent</td>
<td>7 percent</td>
</tr>
</tbody>
</table>
B2.5. Youth Sexual Behavior (grades 9–12)

In 2016, the percentage of Richland County youth who ever had a sexual intercourse was 31 percent, compared to 43 percent in Ohio and 41 percent in the United States. In 2016, both the percentage of Richland County youth males who used a condom at last intercourse (57 percent) and the percentage of Richland County youth females who used birth control pills (26 percent) at last intercourse were higher than in Ohio and the United States. 53 percent of Richland County youth had multiple sexual partners. 9 percent of Richland County youth had four or more sexual partners.

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<tbody>
<tr>
<td>Percentage of youth who ever had sexual intercourse</td>
<td>31 percent</td>
<td>43 percent</td>
<td>41 percent</td>
</tr>
<tr>
<td>Percentage of youth who used a condom at last intercourse</td>
<td>57 percent</td>
<td>51 percent</td>
<td>57 percent</td>
</tr>
<tr>
<td>Percentage of youth who used birth control pills at last intercourse</td>
<td>26 percent</td>
<td>24 percent</td>
<td>18 percent</td>
</tr>
<tr>
<td>Percentage of youth who had multiple sexual partners</td>
<td>53 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>Percentage of youth who did not use any method to prevent pregnancy during last sexual intercourse</td>
<td>12 percent</td>
<td>12 percent</td>
<td>14 percent</td>
</tr>
<tr>
<td>Percentage of youth who had four or more sexual partners</td>
<td>9 percent</td>
<td>12 percent</td>
<td>12 percent</td>
</tr>
<tr>
<td>Percentage of youth who had sexual intercourse before age 13</td>
<td>2 percent</td>
<td>4 percent</td>
<td>4 percent</td>
</tr>
</tbody>
</table>
B2.6. **Youth (grades 9–12) Drug Use** (Richland County Partners Community Health Assessment Collaborative, 2017)

In 2016, 15 percent of Richland County youth used marijuana in the past month, compared to 21 percent in Ohio and 22 percent in the United States. Only 2 to 3 percent of Richland County youth used methamphetamines, cocaine, heroin and steroids. 8 percent of youth misused prescription medications. 10 percent of youth have used inhalants. 12 percent of Richland County youth were offered, sold or given an illegal drug by someone on school property, compared to 20 percent in Ohio and 22 percent in the United States.

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<tr>
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<tbody>
<tr>
<td>Percentage of youth who used marijuana in the past month</td>
<td>15 percent</td>
<td>21 percent</td>
<td>22 percent</td>
</tr>
<tr>
<td>Percentage of youth who ever used methamphetamines</td>
<td>2 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>Percentage of youth who ever used cocaine</td>
<td>2 percent</td>
<td>4 percent</td>
<td>5 percent</td>
</tr>
<tr>
<td>Percentage of youth who ever used heroin</td>
<td>3 percent</td>
<td>2 percent</td>
<td>2 percent</td>
</tr>
<tr>
<td>Percentage of youth who ever used steroids</td>
<td>3 percent</td>
<td>3 percent</td>
<td>4 percent</td>
</tr>
<tr>
<td>Percentage of youth who ever used inhalants</td>
<td>10 percent</td>
<td>9 percent</td>
<td>7 percent</td>
</tr>
<tr>
<td>Percentage of youth who ever misused prescription medications</td>
<td>8 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>Percentage of youth who ever used a needle to inject any illegal drug</td>
<td>2 percent</td>
<td>2 percent</td>
<td>2 percent</td>
</tr>
<tr>
<td>Percentage of youth who have ever been offered, sold or given an illegal drug by someone on school property in the past year</td>
<td>12 percent</td>
<td>20 percent</td>
<td>22 percent</td>
</tr>
</tbody>
</table>
B2.7. Youth Mental Health

In 2016, 32 percent of Richland County youth were depressed, which is 6 percent higher than in Ohio and 2 percent higher than in the United States. 20 percent of Richland County youth seriously considered attempting suicide and 7 percent actually attempted suicide. Overall, youth mental health issues in Richland County are generally worse compared to Ohio and the United States.

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<tr>
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</thead>
<tbody>
<tr>
<td>Percentage of youth who felt sad or hopeless almost every day for two or more weeks in a row</td>
<td>32 percent</td>
<td>26 percent</td>
<td>30 percent</td>
</tr>
<tr>
<td>Percentage of youth who had seriously considered attempting suicide in the past year</td>
<td>20 percent</td>
<td>14 percent</td>
<td>18 percent</td>
</tr>
<tr>
<td>Percentage of youth who had attempted suicide in the past year</td>
<td>7 percent</td>
<td>6 percent</td>
<td>9 percent</td>
</tr>
</tbody>
</table>
### B3.1. Child Health and Functional Status

In 2016, 43 percent of children ages 0–5 and 87 percent of children ages 6–11 had a dental care visit in past year. In 2016, 13 percent of children ages 0–5 and 10 percent ages 6–11 were diagnosed with asthma. 7 percent of children ages 6–11 were diagnosed with either attention deficit hyperactivity disorder (ADHD) or attention deficit disorder (ADD). 5 percent of children ages 6–11 were diagnosed with permanent vision problems.

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</thead>
<tbody>
<tr>
<td>Percentage of children who had a dental care visit in past year</td>
<td>0–5</td>
<td>47 percent</td>
<td>43 percent</td>
<td>50 percent</td>
<td>54 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>86 percent</td>
<td>87 percent</td>
<td>92 percent</td>
<td>88 percent</td>
</tr>
<tr>
<td>Percentage of children who were diagnosed with asthma</td>
<td>0–5</td>
<td>9 percent</td>
<td>13 percent</td>
<td>6 percent</td>
<td>6 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>16 percent</td>
<td>10 percent</td>
<td>10 percent</td>
<td>10 percent</td>
</tr>
<tr>
<td>Percentage of children who were diagnosed with ADHD/ADD</td>
<td>0–5</td>
<td>0 percent</td>
<td>0 percent</td>
<td>No data</td>
<td>2 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>10 percent</td>
<td>7 percent</td>
<td>12 percent</td>
<td>9 percent</td>
</tr>
<tr>
<td>Percentage of children who were diagnosed with autism</td>
<td>0–5</td>
<td>0 percent</td>
<td>0 percent</td>
<td>No data</td>
<td>2 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>1 percent</td>
<td>2 percent</td>
<td>No data</td>
<td>3 percent</td>
</tr>
<tr>
<td>Percentage of children with behavioral problems</td>
<td>0–5</td>
<td>2 percent</td>
<td>2 percent</td>
<td>No data</td>
<td>2 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>5 percent</td>
<td>3 percent</td>
<td>5 percent</td>
<td>4 percent</td>
</tr>
<tr>
<td>Percentage of children with permanent vision problems</td>
<td>0–5</td>
<td>1 percent</td>
<td>2 percent</td>
<td>No data</td>
<td>&lt;1 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>3 percent</td>
<td>6 percent</td>
<td>No data</td>
<td>2 percent</td>
</tr>
<tr>
<td>Percentage of children with bone, joint or muscle problems</td>
<td>0–5</td>
<td>1 percent</td>
<td>4 percent</td>
<td>No data</td>
<td>1 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>3 percent</td>
<td>4 percent</td>
<td>No data</td>
<td>2 percent</td>
</tr>
<tr>
<td>Percentage of children who were diagnosed with epilepsy</td>
<td>0–5</td>
<td>2 percent</td>
<td>0 percent</td>
<td>No data</td>
<td>&lt;1 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>1 percent</td>
<td>1 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td>Percentage of children who were diagnosed with a head injury</td>
<td>0–5</td>
<td>2 percent</td>
<td>4 percent</td>
<td>No data</td>
<td>&lt;1 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>1 percent</td>
<td>4 percent</td>
<td>No data</td>
<td>&lt;1 percent</td>
</tr>
<tr>
<td>Percentage of children who were diagnosed with diabetes</td>
<td>0–5</td>
<td>0 percent</td>
<td>&lt;1 percent</td>
<td>No data</td>
<td>No data</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>1 percent</td>
<td>&lt;1 percent</td>
<td>No data</td>
<td>&lt;1 percent</td>
</tr>
<tr>
<td>Percentage of children who were diagnosed with depression</td>
<td>0–5</td>
<td>0 percent</td>
<td>0 percent</td>
<td>No data</td>
<td>&lt;1 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>3 percent</td>
<td>2 percent</td>
<td>No data</td>
<td>2 percent</td>
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</tbody>
</table>
### B3.2. Child Healthcare Coverage, Access and Utilization

The percentage of children ages 0–5 who had public insurance increased from 20 percent in 2011 to 26 percent in 2016. The percentage of children ages 0–5 who had public insurance was 40 percent in Ohio and 44 percent in the United States. The percentage of children ages 6–11 increased from 16 percent in 2011 to 18 percent in 2016. The percentage of children ages 6–11 who had public insurance was 34 percent in Ohio and 37 percent in the United States. The percentage of children ages 0–5 who had been to the doctor for preventive care increased from 85 percent in 2011 to 88 percent in 2016. In Ohio, 94 percent of children had been to the doctor for preventive visit, compared to 90 percent in the United States.

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<tbody>
<tr>
<td>Percentage of children who had public insurance</td>
<td>0–5</td>
<td>20 percent</td>
<td>26 percent</td>
<td>40 percent</td>
<td>44 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>16 percent</td>
<td>18 percent</td>
<td>34 percent</td>
<td>37 percent</td>
</tr>
<tr>
<td>Percentage of children who had been to the doctor for preventive care in past year</td>
<td>0–5</td>
<td>85 percent</td>
<td>88 percent</td>
<td>94 percent</td>
<td>90 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>70 percent</td>
<td>75 percent</td>
<td>86 percent</td>
<td>82 percent</td>
</tr>
<tr>
<td>Percentage of children who have a personal doctor or nurse</td>
<td>0–5</td>
<td>78 percent</td>
<td>84 percent</td>
<td>91 percent</td>
<td>91 percent</td>
</tr>
<tr>
<td></td>
<td>6–11</td>
<td>86 percent</td>
<td>83 percent</td>
<td>93 percent</td>
<td>90 percent</td>
</tr>
</tbody>
</table>
Appendix C

Summary of Input from Persons Who Represent the Broad Interests of the Community Served

1. Avita Health System
   - **Representative:** Jerry Morasko, president and chief executive officer; Cinda Kropka (team member)
   - **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all persons regardless of ability to pay.
   - **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   - **Time frame of input:** August 2016 to June 2017
   - **Website:** [http://avitahealth.org/home](http://avitahealth.org/home)
   - **Mission of organization:** “To improve the health and well-being of those we serve.”
   - **Examples of programs and services** (Avita Health System, n.d.):
     + Avita Summit Therapy, Avita Fourth Street Medical, Ontario Hospital, Avita Workwell, Avita Specialty Center, Walk-In Clinic
     + Breastfeeding class
     + Pregnant and Nursing Mom’s Sprouts Learning Group
     + Stroke Support Group
     + Diabetes Support Group
     + Cancer Support Group
     + Free blood pressure checks

2. Community Action for Capable Youth (CACY)
   - **Representative:** Tracee Anderson, executive director
   - **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all residents of Richland County.
   - **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   - **Time frame of input:** August 2016 to June 2017
   - **Website:** [https://www.cacyohio.org/about-us](https://www.cacyohio.org/about-us)
   - **Mission of organization:** “To provide education to prevent substance abuse, bullying and problem gambling in youth and to promote a safe and healthy community for all ages.”
   - **Examples of programs and services** (Community Action for Capable Youth, 2018):
     + **Youth programs** – Include Informed Teens (IT), Positive Opportunities Program (POP), Youth Mentoring Program, Tobacco Education Group, Afterschool Programs, Summer Programs, Safety Town Programs, First-Time Offenders, Tobacco Cessation Treatment Services, LifeSkills Training (LST) Curriculum, Second Step Curriculum, Too Good for Drugs Curriculum, and Too Good for Violence (bullying prevention).
3. Community Health Access Project (CHAP)
   - **Representative:** Beth Hildreth, executive director; Sarah Redding, MD, project director
   - **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all residents of Richland County, especially at-risk populations.
   - **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   - **Time frame of input:** August 2016 to June 2017
   - **Website:** [http://chap-ohio.com/](http://chap-ohio.com/)
   - **Mission of organization:** "To eliminate health and social disparities in our community by finding those at risk, connecting them to care and measuring the outcomes. We believe all communities can be transformed through the work of community health workers and the creation of community HUBs – an accountable care coordination delivery system."
   - **Examples of programs and services** (Community Health Access Project, 2016):
     - Partnerships with Third Street Family Health Services, Mansfield Urban Minority Alcoholism and Drug Abuse Outreach Program, and Mid-Ohio Youth Mentoring, to reduce infant mortality in Richland County

4. First Call 211
   - **Representatives:** Terry Carter, information and referral coordinator
   - **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all age groups who need information about community resources.
   - **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   - **Time frame of input:** August 2016 to June 2017
   - **Website:** [https://www.mrcpl.org/community/first-call-211](https://www.mrcpl.org/community/first-call-211)
   - **Mission of organization:** "To provide useful information to the public and to connect members of our community with services that meet their needs."
   - **Examples of programs and services** (Mansfield/Richland County Public Library, 2018):
     - Information about community meals and food pantries
     - Homeless shelter
     - Financial assistance
     - Utility assistance
     - Transportation assistance
     - Offices of local and state government
     - Consumer protection and education
     - Seasonal assistance for utility bills
     - Reporting abuse
     - Food and nutrition programs
     - Immunizations, screenings and healthcare services
5. Harmony House Homeless Services Inc.
   • **Representatives:** Mary Lacey, case manager
   • **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves homeless persons from various age groups
   • **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   • **Time frame of input:** August 2016 to June 2017
   • **Website:** http://harmonyhousehomeless.org/index.html
   • **Mission of organization:** “To provide life-sustaining services to the homeless and empower them to become contributing members of our community”
   • **Examples of programs and services** (Harmony House Homeless Services Inc., n.d.):
     + 65-bed emergency shelter offering a maximum 90-day stay
     + Case management
     + Meetings on job readiness and life skills
     + Transportation assistance
     + Rent assistance for first month and deposit
     + After school and summer tutorials and SAFE Programs for children at Mansfield City Schools
     + Personal items and beddings
     + Laundry services
     + Medical services and referrals
     + Guidance in obtaining community resources
     + Problem solving support and assistance

6. Mansfield Area YMCA
   • **Representatives:** Kerrick Franklin, director of Community Outreach; James Twedt, director of External Operations
   • **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves residents of Richland County from all age groups.
   • **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   • **Time frame of input:** August 2016 to June 2017
   • **Website:** https://www.mansfieldymca.org/
   • **Mission of organization:** “Building a community where all people especially, the young, are encouraged to develop their fullest potential in spirit, mind and body.”
   • **Examples of programs and services** (Mansfield Area YMCA, 2018):
     + **Adult Sports** – include Adult Basketball Corporate Challenge
     + **Health and Fitness** – include Personal Training, Polar Body Age Fitness Assessment, Specialize Group Training, ACTIVELINXX Training System, Diabetes Prevention Program, LIVESTRONG at the YMCA, and Enhanced Fitness.
     + **Red Cross Training** – Red Cross Lifeguard Certification, CPR, AEE and First Aid, American Red Cross Babysitter’s Training, Mobile Training Courses
7. Mansfield City Schools

- **Representative:** Peggy Sutton, school nurse
- **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves school-aged students and other residents of Richland County.
- **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs; (e) Identification of available community resources that may potentially address the health needs identified; (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
- **Time frame of input:** August 2016 to June 2017
- **Website:** [http://www.tygerpride.com/](http://www.tygerpride.com/)
- **Mission of organization:** "All students will be well educated and academically prepared for personal success in life, for their chosen careers, for lifelong learning, and for contributing positively to their local, national, and global communities."
- **Examples of programs and services**
  - K-12 Education
  - Career Tech Program
  - Sports

8. Mansfield Memorial Homes

- **Representative:** Seth Roberts, administrator
- **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all persons in Richland County and other areas.
- **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs; (e) Identification of available community resources that may potentially address the health needs identified; (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
- **Time frame of input:** August 2016 to June 2017
- **Website:** [http://www.mansfieldmh.com/home.html](http://www.mansfieldmh.com/home.html)
- **Mission of organization:** "To provide quality care and services to all residents on its campus. Our campus includes a nursing home, residential care facility, and independent living apartments."
- **Examples of programs and services:** (Mansfield Memorial Homes, n.d.)
  - Skilled nursing – Available in the Nursing Center and medically complex care and subacute care.
  - Therapy services – Include rehabilitation services, physical therapy, occupational therapy and access to speech-language pathologists.
  - Conard House Assisted living – Provides professional healthcare assistance in a residential setting.
  - The Robert Sturges Memorial Home – Provides independent apartments for persons 55 and older or adults who have permanent physical disabilities.
  - Rotary Adult Daycare Center – Serves Richland County residents aged 60 years and older who have Alzheimer’s Disease or dementia, Monday to Friday, 9 a.m. to 4:30 p.m.
  - Meals on Wheels – Delivers doctor-ordered meals three days a week.
9. Mansfield YMCA
   - Representative: James Twedt, director of external operations; Kerrick Franklin, director of community outreach
   - Description of the medically underserved, low-income or minority populations represented by the organization: Serves all youth, adults, seniors and families in Richland County and other areas
   - Inputs: (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   - Time frame of input: August 2016 to June 2017
   - Website: https://www.mansfieldy.org/
   - Mission of organization: “Building a community where all people, especially the young, are encouraged to develop their fullest potential in spirit, mind and body.”
   - Examples of programs and services:
     + Adult sports
     + Group exercise
     + Health and fitness
     + Swimming
     + Youth sports and programs
     + Various trainings, including lifeguard certification, CPR, First Aid, AEE training, and babysitting trainers course

10. Mom’s Clean Air Force
    - Representative: Laura Burns, Ohio field consultant
    - Description of the medically underserved, low-income or minority populations represented by the organization: Serves all people.
    - Inputs: (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
    - Time frame of input: August 2016 to June 2017
    - Website: https://www.momscleanairforce.org/
    - Mission of organization: “To protect our children’s health.”
    - Examples of programs and services: (Moms Clean Air Force, 2010-2018)
      + Information campaign to address the issues of clean air, changing climate, toxic chemicals and health of children and families (“Baby Power”, “Ecomadres”).

11. National Association for the Advancement of Colored People (NAACP)
    - Representative: Geron Tate, president
    - Description of the medically underserved, low-income or minority populations represented by the organization:
    - Inputs: (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
    - Time frame of input: August 2016 to June 2017
    - Website: https://www.naaccp.org/about-us/
    - Mission of organization: “To ensure the political, educational, social, and economic equality of rights of all persons and to eliminate race-based discrimination.”
Examples of programs and services: (Mills, 2019)
- Education scholarships for youth going to college or institutions of higher learning.
- Youth town hall meetings to identify productive activities for youth and young adults in Richland County.

12. North End Community Improvement Collaborative (NECIC)
- Representatives: Tony Chinni, community development coordinator; Nyshia Brooks, community organizer and community health worker
- Description of the medically underserved, low-income or minority populations represented by the organization: Serves all persons in Richland County, especially residents of the North End area.
- Inputs: (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
- Time frame of input: August 2016 to June 2017
- Website: https://www.necic-ohio.org/
- Mission of organization: “To improve the quality of life and economic landscape of the North End Community.”
- Examples of programs and services (North End Community Improvement Collaborative, n.d.):
  - NECIC North End Elder Program – Social and educational events for North End residents 60 and over, which are held on the second and fourth Tuesdays of each month. Lunch is served at each event. Meetings are held at United Steelworkers Local 169 at 376 West Longview Avenue, Mansfield, Ohio 44903. Examples of social events include bingo, arts and crafts and line dancing. Examples of educational events include neighborhood safety, public education and health topics.
  - North End Farmers Market – Part of North End Local Foods Initiative, which provides fresh and healthy food products, and launching small market business for the North End residents.
  - Community Gardens – NECIC support community gardens throughout Richland County, especially those that are located at the North End.
  - North End Neighbor Up Night – Enables North End residents to discuss community issues and develop potential solutions to community problems. The neighbors meet at 5 p.m. at the NECIC office grounds during second Wednesday of each month, where they enjoy a meal together, meet each other and discuss community issues.
  - NECIC Blust Avenue Teaching Garden – Offers educational classes and learning activities for adults and children, such as Volunteer for Veggies, Farm to Market, Host Your Own Event, and Open Hours (garden questions and tours).
  - Small grants – Helps advance the North End Community Economic Development.
  - Focus on Youth – Helps the North End community to address youth violence, and supports youth in gaining skills, harnessing talents and developing leadership skills.
  - Real Opportunities for Achievement and Readiness (ROAR) – Mentoring program for students in grades 7–12 from Mansfield City Schools. NECIC identifies mentors from the community to empower and guide students individually and in group settings in learning new skills and developing their talents.

13. Ohio District 5 Area Agency on Aging Inc.
- Representatives: Teresa Cook, chief of marketing and development; Diane Ramey, chief of long-term care
- Description of the medically underserved, low-income or minority populations represented by the organization: Serves persons from Richland, in Ashland, Crawford, Huron, Knox, Marion, Morrow, Seneca and Wyandot counties who are ages 60 and older.
- Inputs: (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
- Time frame of input: August 2016 to June 2017
- Website: https://www.aaa5ohio.org/
• **Mission of organization:** “Help older people remain healthy, access public benefits, and discover meaningful ways to continue contributing to society.”

• **Examples of programs and services:** (Ohio District 5 Area Agency on Aging, 2018)
  + **Aging and Disability Resource Network** – Group of community organizations who are referral sources for older or disabled adults and their care providers.
  + **Personal care** – Including bathing, grooming, maintenance of personal hygiene and safety, laundry, house cleaning and emotional support.
  + **Transportation** – Assists with appointments to medical offices and physical, occupational and behavioral mental health services.
  + **Steady U: A Matter of Balance** – Teaches on fall prevention and overcoming the fear of falling.

14. **OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital**

• **Representatives:** Robert Exten, ME, physician medical oncology; Terry Weston, MD, administrative physician, Medical Staff Services; Janene Yeater, vice president, clinical quality services

• **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all persons regardless of ability to pay.

• **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.

• **Time frame of input:** August 2016 to June 2017


• **Mission of organization:** “To improve the health of those we serve.”

• **Examples of programs and services** (OhioHealth, 2015-2018a,b)
  + Full service Emergency Department
  + Level II Trauma Center
  + Women’s health
  + Maternity program
  + Breast health services
  + Heart and vascular services
  + Orthopedics (spine, hip and knee)
  + ENT
  + General surgery
  + Cancer

15. **Richland County Children Services**

• **Representative:** Marsha Coleman, clinical director (with knowledge of and expertise in public health)

• **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves children and families in Richland County that are at risk for abuse and neglect, and/or are otherwise vulnerable.

• **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.

• **Time frame of input:** August 2016 to June 2017

• **Website:** [https://www.richlandcountychildrenservices.org/](https://www.richlandcountychildrenservices.org/)

• **Mission of organization:** “To lead our community in assuring the safety, well-being and permanency of children at risk of abuse of neglect.”

• **Examples of programs and services** (Richland County Children Services, 2018a,b)
Screening and receiving child abuse and neglect reports – Receive calls about child abuse and neglect issues, 24/7. The screening team classifies the information as (a) child abuse or neglect report, (b) dependency report, (c) family in need of services, and (d) information or referral.

Intake Investigation – Caseworkers evaluate the abuse or neglect report by interviewing and observing the child and family interactions and assess safety. The caseworkers collaborate with law enforcement officers when dealing with sexual abuse and serious physical abuse concerns.

Ongoing Services Division – Services provided to assist families in solving youth misbehaviors through counseling, day care, treatment, ongoing evaluation and community referrals.

Family Team Meetings – Assesses strengths and limitations of families, assist in developing goals and reviewing family progress. The family team may be comprised of family members, friends, support persons, community specialists and caseworkers.

HOPE Primary Partner Program – HOPE (Helping Ohio Parent Effectively) uses the experience of parents who have significant experience with Richland County Children Services to support and advocate for other parents who have less experience in order to provide a permanent and stable plan for their children.

Protective Services – Promotes children’s safety from abuse and neglect through community referrals to mental and behavioral health services, substance abuse treatment centers, training for parents, and advocacy and support for victims of domestic violence. Protective Services include Kinship Services, placement teams, foster care and family support.

Prevention services – Provides school-based and court-based social workers, protective support social workers and family team support as a means of preventing risky behaviors in children and teens.

16. Richland County Domestic Relations Court
   • Representative: Elizabeth Blakly, court administrator
   • Description of the medically underserved, low-income or minority populations represented by the organization: Serves all residents of Richland County.
   • Inputs: (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   • Time frame of input: August 2016 to June 2017
   • Website: http://richlandcourtsoh.us/dr.php
   • Mission of organization: Not available on website.
   • Examples of programs and services: (Richland County Common Pleas Courts, n.d.):
     + Conducts hearings of domestic relations court cases.

17. Richland County Foundation
   • Representative: Maura Teynor, Chief Advancement Officer
   • Description of the medically underserved, low-income or minority populations represented by the organization: Serves all persons from Richland County through various community projects.
   • Inputs: (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   • Time frame of input: August 2016 to June 2017
   • Website: https://www.richlandcountyfoundation.org/
   • Mission of organization: “To improve and enhance the quality of life in Richland County through strategic philanthropy and community leadership.”
   • Examples of programs and services: (Richland County Foundation, 2018)
     + Richland IdeaAudition – Assists entrepreneurs to (a) share ideas about a new business, (b) help initiate small business, and (c) meet the community for support.
18. Richland County Juvenile Court GAL/CASA Program
- **Representative:** Brooke Henwood, CASA Director
- **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves Richland County youth with court cases.
- **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs; (e) Identification of available community resources that may potentially address the health needs identified; (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
- **Time frame of input:** August 2016 to June 2017
- **Website:** https://richlandcourts.oh.us/dr.php
- **Mission of organization:** “To handle court proceedings of Richland County youth.”
- **Examples of programs and services** (National CASA Association, 2018):
  - **GAL/CASA Program** – Enables volunteers to represent abused, neglected and dependent children in court proceedings to assist the court in identifying child placement and needed support services. A child with a Court Appointed Special Advocate (CASA) will have a better chance of finding a safe and permanent home, will spend less time in foster care, is more likely to avail themselves of community resources, and obtain support from adults.

19. Richland County Mental Health and Recovery Services Board
- **Representatives:** Joseph Trolian, executive director; Sherry Branham, director of external operations
- **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves youth and adults with mental health issues.
- **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs; (e) Identification of available community resources that may potentially address the health needs identified; (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
- **Time frame of input:** August 2016 to June 2017
- **Website:** http://www.richlandmentalhealth.com/
- **Mission of organization:** “To secure sufficient funds to plan, establish and maintain unified services primarily for the mentally ill, drug- or alcohol-dependent individuals and their families.”
- **Examples of programs and services** (Richland County Mental Health and Recovery Services Board, 2018):
  - **Crisis Intervention Team (CIT) Advisory Board** – Includes representatives from NAMI Richland County, Richland County Mental Health and Recovery Services Board, law enforcement and safety services. The team members receive 40 hours of training in psychiatric disorders, substance abuse, de-escalation techniques, substance abuse and mental health-related legal issues, and displays of empathy.
  - **Early Childhood Mental Health** – Provides clinical consultation and training to families of children with mental illnesses. Activities include consults to early childhood programs, mentorship, coaching, problem identification, problem solving, and assessing the impact of depression, substance use, domestic violence and other stressors on children’s behaviors.
  - **NAMI Support Group** – Confidential and safe support group for families and caregivers of persons with mental illness.
  - **Recovery to Work Project** – A collaborative between Opportunities for Ohioans with Disabilities (OOD) and Richland County Mental Health and Recovery Services Board to generate high-quality vocational rehabilitation programs and expand services for persons with disabilities.
Suicide Prevention Coalition – Aims to reduce the number of suicides and attempts to commit suicide in Richland County through community partnerships. The Coalition has three goals: (a) increase awareness to reduce stigma in seeking help for mental and behavioral health issues, (b) reduce suicidal risk factors, and (c) data gathering and evaluation of programs that aims to prevent suicide.

Treatment Court Advisory Board – Consist of community partners who work with specialty dockets such as Alcohol and Drug Court, Mental Health Court and Veterans Court. These specialty dockets link offenders to community-based treatment programs as an alternative to incarceration.

Youth Crisis Response Team – Provides immediate interventions to school, family or community members when traumatic situations occur. The team members provide (a) on-site intervention during trauma or crisis, (b) assist with supporting friends and classmates of the youth in crisis, (c) referral and linkage to community resources, and (d) community education and awareness on dealing with various crisis situations.

20. Richland County Newhope/Richland County Board of Developmental Disabilities

- **Representative:** Liz Prather, superintendent; Julie Litt, coordinator of student services
- **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all age groups.
- **Inputs:** (a) Participation in planning meeting for survey question development; (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs; (e) Identification of available community resources that may potentially address the health needs identified; (f) Member of the Richland County Community Health Improvement Plan (CHIP) Committee.

**Time frame of input:** August 2016 to June 2017

**Mission of organization:** “To support people with developmental disabilities to live, work and participate in the community, making individual choices within their circle of support.”

**Examples of programs and services** (Richland Newhope, 2018)
- **Services for children** – Includes early intervention program, preschool education, determination of eligibility, coordination of services, support system for school-age children, adult transition, family support, residential services and therapy.
- **Services for adults** – Includes eligibility, coordination of services, community-based and residential-based support services, employment assistance, volunteering, transportation, therapy, and participation in clubs and organizations.
- **Services for individuals and families** – Include investigations of possible neglect and abuse and other health and safety issues among Richland County residents with developmental disabilities.

21. Richland County Prosecutor’s Office

- **Representative:** Martin Jones
- **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all Richland County residents.

**Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.

**Time frame of input:** August 2016 to June 2017

**Website:** https://www.richlandprosecutoroh.us/

**Mission of organization:** “Ensure that all victims and witnesses in criminal cases receive fair and courteous treatment.”

**Examples of programs and services:**
- **Criminal Division** – Prosecutes adult felony cases occurring in the county.
- **Juvenile Division** – Prosecutes felony, misdemeanor and traffic cases involving offenders under the age of 18.
- **Victim Services Division** – Protects victims’ rights under the law.
22. Richland County Regional Planning Commission
   • **Representative:** Jotika Shetty, executive director
   • **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all residents of Richland County, Ohio.
   • **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   • **Time frame of input:** August 2016 to June 2017
   • **Website:** https://www.rcrpc.org/
   • **Mission of organization:** “To provide innovative information and regional planning services, in a professional and ethical manner, to our community partners and the general public, to facilitate implementation of regional and local goals.”
   • **Examples of programs and services** (Richland County Regional Planning Commission, n.d.):
     + **Community development** – Provides multiple forms of funding for various projects such as emergency home repair, business development, transportation development and environmental preservations. In order to promote economic development, the Richland County Regional Planning Commission cooperates with the Ohio Development Services Agency, Richland County Development Group, Richland Area Chamber of Commerce, Braintree Business Development Center, Downtown Mansfield Inc., North End Community Improvement Collaborative, City of Mansfield Community Development, City of Mansfield Economic Development, Ontario Growth Association, Shelby Business Development, Clear Fork Valley Chamber of Commerce, and Butler Area Merchants Association.
     + **Land use** – Develops and administers the Richland County Subdivision regulations, zoning and subdivision land use, mapping, development of the Storm Water Management and Erosion, and Control Regulations, and preparation of a Farmland Preservation Plan.
     + **Transportation planning** – Effective coordination of the Richland County Public Transit with various human services transportation options to serve the elderly, disabled, low-income groups, and children from Richland County with efficient and reliable transportation services.

23. Richland County Youth and Family Council
   • **Representative:** Teresa Alt, executive director
   • **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves youth and families in Richland County, Ohio. The Richland County Youth and Family Council is an Ohio Family and Children First Council per Ohio Revised Code 121.37.
   • **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   • **Time frame of input:** August 2016 to June 2017
   • **Mission of organization:** “To provide leadership to assure an effective system of collaborative, coordinated and efficient community services, which assist each family and child to meet their individual needs and responsibilities.”
   • **Examples of programs and services** (Richland County Youth and Family Council, n.d.):
     + **Help Me Grow** – Provides early intervention to children who have been diagnosed with a disability or delay in development.
     + **Ongoing visits for children and families** – Provided to those who show risk factors, such as low family income, physical or social isolation, teen mother, lack of healthcare access and unstable housing.
     + **Other services** – Contracts with community agencies in improving children’s wellness and safety, both at home and in community settings.
24. Richland Moves!

- **Representative:** Nelson Shogren, chairman
- **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all people in Richland County.
- **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth, and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs; (e) Identification of available community resources that may potentially address the health needs identified; (f) Member of the Richland County Community Health Improvement Plan (CHIP) Committee.
- **Time frame of input:** August 2016 to June 2017
- **Website:** [https://www.facebook.com/richlandmoves/](https://www.facebook.com/richlandmoves/)
- **Mission of organization:** To enhance mobility and accessibility by improving awareness, safety, convenience, and comfort of walking and biking in urban, suburban, and rural neighborhoods.
- **Examples of programs and services** (Brennan, 2018; Carr, 2016)
  - Events and activities focusing on community health and environmental clean-up.
  - Advocates for Richland County residents to have access to walking and biking paths, bike racks, and bus routes.

25. Richland Public Health

- **Representatives:** Robert Exten, ME, president Board of Health; Martin Tremmel, health commissioner; Amy Schmidt, director of nursing; Tina Picman, director, Women, Infants and Children; Selby Dorgan, director of health promotion and education; Ellen Claiborne, health educator, Communities Preventing Chronic Disease (CPCD); Margaret Lin, health educator, Communities Preventing Chronic Disease (CPCD); Karyl Price, health educator, Creating Healthy Communities (CHC); Emily Leedy, Creating Healthy Communities (CHC) coordinator; Reed Richard, team member; Heather Foley (team member) (all persons have knowledge of and expertise in public health)
- **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all residents of Richland County, Ohio. Richland Public Health, together with the Shelby City Health Department, provides various public health services for residents of Richland County.
- **Inputs:** (a) Participation in planning meeting for survey question development; (b) Review of summaries and trends of primary data from adult, youth, and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs; (e) Identification of available community resources that may potentially address the health needs identified; (f) Member of the Richland County Community Health Improvement Plan (CHIP) Committee.
- **Time frame of input:** August 2016 to June 2017
- **Website:** [https://richlandhealth.org/](https://richlandhealth.org/)
- **Mission of organization:** “Our mission is to assess, maintain and improve the health and safety of the environment and community through quality public health services.”
- **Examples of programs and services** (Richland Public Health, 2018a,b,c):
  - **Environmental Health Division** – Provides prevention, protection, education and advocacy to Richland County residents about potential harmful effects of diseases and toxins in the environment to a person’s health.
  - **Community Health and Prevention Services Division** – Conducts community health needs assessments, and provides community health services and education to assure health promotion and disease prevention.
  - **Public Health Clinic** – Offers nonemergency public healthcare services for all residents of Richland County. Services include immunizations, prenatal care, well-child visit, school-based clinics. The multidisciplinary healthcare team comprises physicians, a health educator, social worker and dietitian.
  - **Public Health Nursing** – Work with local clinics and Ohio Department of Health to control the spread of communicable diseases, link women over age 40 to breast and cervical cancer screening, and emergency preparedness.
  - **Vital Statistics** – Maintains birth and death records in Richland County since 1909, excluding City of Shelby residents; birth and death statistics on cause-of-death data; acknowledgement of paternity
affidavits, which enables child support responsibilities; issuance of burial transit permits to funeral directors.

+ **Women, Infants and Children (WIC)** – Nutrition education program for pregnant women, women who have a baby less than 6 months old, breastfeeding mothers, and infants and children who are 5 or younger.

26. **Shelby City Health Department**
   - **Representative:** Ajay Chawla, MD, medical director and health commissioner; Andrea Barnes, director of environmental health (with knowledge of and expertise in public health)
   - **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all residents of the City of Shelby in Richland County, Ohio.
   - **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   - **Time frame of input:** August 2016 to June 2017
   - **Mission of organization:** To provide public health services to the residents of Shelby, Ohio.
   - **Examples of programs and services** (City of Shelby, n.d.):
     + **Nursing services** – Health screenings, blood pressure screenings, Shelby Task Force for Creating Healthy Communities, Safe Routes to School, nutrition services, communicable disease control, genetic disease control, chronic disease control, health education, nutrition services and prevention services.
     + **Environmental public health services** – Food safety, inspection of public swimming pools, school environment, body art, rabies control, smoke-free workplaces, water and sewage, emergency preparedness and housing safety.
     + **Vital statistics** – Issuance of birth and death certificates and reporting to Ohio Department of Health. The Shelby City Health Department maintains birth and death records in Richland County since 1908, excluding City of Shelby residents; birth and death statistics on cause-of-death data; acknowledgement of paternity affidavits, which enables child support responsibilities; issuance of burial transit permits to funeral directors.

27. **The City of Mansfield Department of Regional Community Advancement (DRCA)**
   - **Representative:** Dale Au, Help Me Grow program manager
   - **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves individuals and families from Richland County, Ohio and neighboring areas.
   - **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   - **Time frame of input:** August 2016 to June 2017
   - **Website:** [http://www.ci.mansfield.oh.us](http://www.ci.mansfield.oh.us)
   - **Mission of organization:** “We are a team dedicated to providing the highest quality of professional service to positively impact the citizens we proudly serve.”
   - **Examples of programs and services** (The City of Mansfield Department of Regional Community Advancement, n.d.).
     + Minority Health Fair
     + Kindergarten screening
     + Community events
     + Immunizations
     + Access to a community room, fitness center and computer laboratory
28. Third Street Family Health Services
   - **Representative:** Nicole Hartage, alcohol and drug counseling; Stacey Nolen, community health worker, Community Health Access Project; Kari Westfield, outreach coordinator
   - **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves low-income and vulnerable residents of Richland County, Ohio. The Third Street Family Health Services has access to home.
   - **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   - **Time frame of input:** August 2016 to June 2017
   - **Website:** http://www.tsfhs.org/
   - **Mission of organization:** “To provide accessible, quality, primary healthcare to the underserved.”
   - **Examples of programs and services** (Third Street Family Health Services, 2015)
     - **Behavioral and mental health services** – Includes clinical social work counseling for children ages 6 and older and adults; diagnosis and treatment of various mental and emotional conditions; group and individual counseling; crisis intervention; advocacy and community liaison; management of stress; development of coping skills; depression and anxiety; and weight and depression group.
     - **Dental** – Offers comprehensive oral exams, X-rays, adult and child cleanings, fluoride applications, sealants, composite fillings, crown and bridge, root canal therapy and extractions.
     - **Medical** – Offers patients with access to patient-centered medical home, which features the following: (a) team approach comprised of physicians, nurse practitioners, care assistants, case managers, dietitians and health coaches, (b) better access to care that features same and next day appointments, telephone contact and secure email communication, (c) access to electronic health records, (d) support services, (e) care coordination, and (f) continuous improvement.
     - **Obstetrics and women’s health** – Offers prenatal and comprehensive women’s health services such as annual exams, Pap tests and cervical cancer screening, breast cancer screening, contraception and family planning, HPV testing, and testing and treatment for sexually transmitted diseases.

29. Village of Bellville
   - **Representative:** Teri Bernkus, mayor, Village of Bellville
   - **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all residents of the Village of Bellville, Ohio.
   - **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.
   - **Time frame of input:** August 2016 to June 2017
   - **Website:** http://www.bellvilleohio.net/
   - **Mission of organization:** No mission available on website.
   - **Examples of programs and services** (Village of Bellville, 2018)
     - **Farmers Market** – Enables local growers and entrepreneurs in the area to sell their produce following the Farmers Market Advisory Committee.

30. Village of Lexington
   - **Representative:** Eugene Parkison, mayor
   - **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all residents of the village of Lexington, Ohio.
   - **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County;

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**OhioHealth Mansfield Hospital Community Health Needs Assessment**
(d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.

- **Time frame of input:** August 2016 to June 2017
- **Website:** [https://lexingtonohio.us/](https://lexingtonohio.us/)
- **Mission of organization:** Not available.
- **Examples of programs and services:** (Village of Lexington, n.d.)
  - Administration, finance, income tax, parks and grounds, police, street, water and sewer.
  - Services for adults age 55 and older to improve socialization, physical activity and healthy eating.

31. **Visiting Nurse Association of Ohio**

- **Representative:** Courtney Swihart, clinical manager
- **Description of the medically underserved, low-income or minority populations represented by the organization:** Serves all residents of Richland County regardless of ability to pay.
- **Inputs:** (a) Participation in planning meeting for survey question development, (b) Review of summaries and trends of primary data from adult, youth and child surveys conducted by the Hospital Council of Northwest Ohio and University of Toledo; (c) Identification of significant health needs affecting Richland County; (d) Prioritization of health needs, (e) Identification of available community resources that may potentially address the health needs identified, (f) member of the Richland County Community Health Improvement Plan (CHIP) Committee.

- **Time frame of input:** August 2016 to June 2017
- **Website:** [http://www.vnaohio.org/](http://www.vnaohio.org/)
- **Mission of organization:** “To provide high-quality, comprehensive home health and hospice care to promote the independence and dignity of those living in the communities we serve.”
- **Examples of programs and services:** (Visiting Nurse Association of Ohio, 2016)
  - Home healthcare including medical-surgical nursing, mental health, TeleHealth and rehabilitation services.
  - Hospice and special care.
  - Personal care and private duty nursing.
Appendix D

Documentation of Program Impacts from the Community Health Needs Assessment and Implementation Strategy Adopted in 2016 by OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital

**Need #1: Mental Health**

**(MH 1.1)** Increase the number of psychoeducational groups led by recreational therapists that will be made available to patients and community members. Examples of group activities include leisure time development, self-esteem education, development of coping skills, community resource awareness and knowledge of illness.

**FY 2017 and FY 2018**

During FY 2017, the OhioHealth Mansfield Psychiatric Unit facilitated 4,789 psychoeducational groups for 272 patients served. During FY 2018, 2,601 psychoeducational groups were conducted for 774 patients served. In general, patients who are admitted in the Psychiatric Unit participate in two to three groups per day, with a total of 12 to 14 groups throughout their hospital stay.

Some persons attended more than one session. The group activities were directed towards understanding illness, incorporating rest and relaxation, self-esteem and self-confidence, coping, participation in self-help groups, goal setting, socialization and awareness of the services provided by various community resources. The most common community resources discussed were Catalyst Life Services, Family Life Counseling and Psychiatric Services, and the Third Street Family Life Services.

Catalyst Life Services provides holistic rehabilitation, crisis intervention and prevention, transitional and residential programs, communication services and vocational rehabilitation and training (Catalyst Life Services, 2018). Family Life Counseling and Psychiatric Services focuses on helping the patient build and rebuild connections with family, friends and the community as a means of reuniting the natural family structure so the troubled individual can return to a healthy family and community life (Family Life Counseling and Psychiatric Services, 2017). Third Street Family Health Services provides services such as: (a) clinical social work and counseling for children ages six and older, (b) clinical social work and counseling for adults, (c) diagnosis and treatment of mental and emotional disorders, (d) individual, group and family counseling, (e) crisis intervention, (f) assistance with managing stress, (g) development of coping skills, (h) care for depressive disorders, (i) care for anxiety disorders, (j) anger management skill development (Third Street Family Health Services, 2015a).

**(MH 1.2)** Enroll all adolescent patients in the educational program provided by Mansfield City Schools to keep them on track in school while they are dealing with acute mental health issues.

**FY 2017 and FY 2018**

The adolescent psychiatric unit was closed in FY 2017. It reopened in FY 2018 (October 2017). OhioHealth Mansfield works closely with Mansfield City Schools to ensure that adolescent patients stay on track with their school activities during hospitalization. During FY 2018, 109 adolescents were provided with educational programs in collaboration with Mansfield City Schools so they were able to fulfill school requirements.

**(MH 1.3)** Refer patients to Third Street Family Health Services, Catalyst Life Services, Family Life Counseling and other mental health services providers.

**FY 2017**

The psychiatric unit served 766 patients with a mental health diagnosis. Dispositions of these patients may include: (a) Catalyst Life Services (42 percent), (b) miscellaneous counseling centers, such as Family Life Counseling and Psychiatric Services, and New Directions Counseling Center (25 percent), (c) psychiatrist (9 percent), (d) agencies providing services for persons with dual diagnosis, which is a combination of mental...
illness and substance use disorder (6 percent), (e) Third Street Family Health Services (5 percent), (f) intensive outpatient programs (4 percent), and (g) Alcoholic Anonymous meetings, nursing home, crisis unit, medical-surgical unit (4 percent). Approximately 5 percent of the patients were provided with a mental and behavioral health resources list. The OhioHealth Mansfield Psychiatric Unit refers an average of 69 patients per month to community mental and behavioral health agencies for follow-up care. After referral of these patients, OhioHealth Mansfield Hospital did not contact these patients to determine if they followed through with the referrals made. However, the healthcare team regularly assists patients and families if they have questions about the referral process.

FY 2018

The psychiatric unit served 774 patients with mental health diagnosis. Similar to FY 2017, these patients were referred to Catalyst Life Services, Family Life Counseling and Psychiatric Services, New Directions Counseling Center, a psychiatrist, agencies providing services for persons with dual diagnosis, such as Third Street Family Health Services, intensive outpatient programs, Alcoholic Anonymous meetings, a nursing home, crisis unit, or medical surgical unit.

(MH 1.4) Refer patients to the National Alliance on Mental Illness for family support group services.

FY 2017 and FY 2018

Approximately 182 patients were referred to the National Alliance on Mental Illness (NAMI) during FY 2017. Approximately 230 patients were referred to the National Alliance on Mental Illness (NAMI) during FY 2018. All patients in the Behavioral Health Unit are educated about the family support group services offered through NAMI. Additionally, a NAMI representative is in the unit once a week to provide information on their services to all patients. NAMI services include: (a) education and support of individuals and families of mental illness, (b) advocate to produce public policy for individuals living with mental illness, (c) toll-free NAMI HelpLine, and (d) public awareness events and activities, such as Mental Illness Awareness Week and NAMIWalks (National Alliance on Mental Illness, 2017).

Need #2: Substance Abuse

( SA 2.1) Provide referrals to substance abuse treatment programs at appropriate agencies, such as Third Street Family Health Services, Catalyst Life Services, Family Life Counseling, and other mental health and substance abuse services providers.

FY 2017

Alcohol or substance abuse-related medical diagnoses were based from the Vermont Department of Health’s list of approved ICD-10 codes for alcohol and drug abuse programs (Vermont Department of Health, 2014). During FY 2017, the number of patients served in the emergency department and inpatient who have medical diagnoses of alcohol or substance abuse listed in their electronic medical records were determined.

Emergency Department (ED). During FY 2017, the OhioHealth Mansfield Hospital Emergency Department (ED) served 12,755 unduplicated patients with alcohol or substance abuse diagnoses listed as one of their medical diagnoses, which represents 38.9 percent of total unduplicated patients seen in Mansfield Hospital’s ED during the time period. On the other hand, OhioHealth Shelby Hospital’s ED served 3,305 unduplicated patients with alcohol or substance abuse diagnoses, which represents 36.7 percent of total unduplicated patients seen in Shelby Hospital’s ED during the time period. Approximately 30 percent of ED patients from Mansfield and Shelby Hospitals were referred to Third Street Family Health Services and 5 percent of the patients were referred to Catalyst Life Services and New Beginnings Recovery Services.

Inpatient. During FY 2017, Mansfield Hospital’s inpatient departments served 6,117 unduplicated patients with alcohol or substance abuse diagnoses listed as one of their medical diagnoses, which represents 59.2 percent of total unduplicated patients seen at the hospital’s inpatient departments during the time period. On the other hand, Shelby Hospital’s inpatient departments served 456 unduplicated patients with alcohol or substance abuse diagnoses listed as one of their medical diagnoses, which represents 40 percent of total unduplicated patients seen in Shelby Hospital’s inpatient departments during the time period.

FY 2018

Emergency Department (ED). During FY 2018, Mansfield Hospital’s ED served 12,196 unduplicated patients with alcohol or substance abuse diagnoses listed as one of their medical diagnoses, which represents 35.8 percent of total unduplicated patients seen in Mansfield Hospital’s ED during the time period. On the other hand, Shelby
Hospital’s ED served 2,308 patients with alcohol or substance abuse diagnoses, which represents 32.5 percent of total unduplicated patients seen in Shelby Hospital’s ED during the time period. Approximately 30 percent of ED patients from Mansfield Hospital and Shelby Hospital were referred to Third Street Family Health Services and 5 percent of the patients were referred to Catalyst Life Services and New Beginnings Recovery Services.

**Inpatient.** During FY 2018, Mansfield Hospital’s inpatient departments served 7,649 unduplicated patients with alcohol or substance abuse diagnoses listed as one of their medical diagnoses, which represents 73.1 percent of total unduplicated patients seen in the hospital’s inpatient departments during the time period. On the other hand, Shelby Hospital’s inpatient departments served 490 unduplicated patients with alcohol or substance abuse diagnoses listed as one of their medical diagnoses, which represents 50.2 percent of total unduplicated patients seen in Shelby Hospital’s inpatient departments during the time period.

(SA 2.2) Provide referrals to Mansfield Urban Minority Alcoholism and Drug Addiction Outreach Program (UMADAOP) for assessments, counseling and medication-assisted treatment. UMADAOP serves predominantly African American and Hispanic populations.

**FY 2017 and FY 2018**
UMADAOP opened the Community Wellness Center in February 2017 to combat opioid addiction. The Community Wellness Center has five examination rooms, two doctor’s offices, a laboratory and an ambulatory detoxification room. The addicts sign a contract stating that they will submit urine tests and screenings during the entire treatment duration. The Community Wellness Center follows the harm reduction model, which focuses on weaning patients off more potent substances. Approximately 50 percent of patients reach full recovery. During FY 2017 and FY 2018, none of the patients chose to be referred to UMADAOP.

(SA 2.3) Assessment, intervention and referral of patients with substance abuse diagnoses seen at the Emergency Department (ED).

**FY 2017 and FY 2018**
Patients in the ED are assessed for substance abuse disorders by a physician, nurse practitioner, physician assistant and registered nurse. The social worker from the Utilization Management and Care Coordination team is notified of the need for community resources and follow-up care. When the social worker is not available, the medical staff has access to the mental and behavioral health resources list to give to patients.

In FY 2017 and FY 2018, approximately 5 percent of ED patients at OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital were referred to Catalyst Life Services and New Beginnings Recovery Services. Approximately 30 percent of ED patients were referred to Third Street Family Health Services. Catalyst Life Services and New Beginning Recovery Services provide individual, group and inpatient treatments. Third Street Family Health Services has a behavioral health and mental health department that is staffed by licensed independent social workers that provide diagnostic assessments and psychotherapy or talk therapy.

(SA 2.4) Hospital admission of patients with substance abuse diagnoses to OhioHealth Mansfield Hospital Psychiatric Department.

**FY 2017 and FY 2018**
In FY 2017, a total of 583 unduplicated patients were admitted to Mansfield Hospital’s Psychiatric Unit. Among these patients, 34 patients (5.8 percent) had a diagnosis of alcohol or substance abuse in addition to a behavioral diagnoses (dual diagnosis). In FY 2018, a total of 887 unduplicated patients were admitted to the Psychiatric Unit, where 65 patients (7.3 percent) had dual diagnosis.

Mansfield Hospital’s Psychiatric Unit is a behavioral health unit and not licensed to treat patients with substance abuse. If patients were willing to engage in substance abuse treatment post hospitalization, Mansfield Hospital healthcare providers educated them about the benefits of participating in the Alcoholic Anonymous and Narcotics Anonymous meetings in Richland County and neighboring areas. The patients were provided with a list of meetings in the area. In addition, the case management team arranged outpatient counseling for substance abuse issues at the agency of their preference. Some agencies where patients were referred include Catalyst, New Beginnings Recovery Services, and Third Street Family Services.
Drug screening and education provided by OhioHealth Employer Services.

**FY 2017 and FY 2018**
A total of 515 employers in Richland County utilized the drug-screening program provided by OhioHealth Employer Services in Mansfield. During FY 2017, a total of 4,526 persons received drug screening of which 4.6 percent (210/4,526) tested positive for illicit drugs. During FY 2018, Mansfield WorkHealth performed 4808 total drug screens with 217 positives (4.5 percent positive rate). Drug screenings were done as part of: (a) pre-employment, (b) post-accident, (c) random check, and (d) reasonable suspicion.

Collaborate with community partners and law enforcement to improve access to safe and legal medication disposal and to educate community members about safe medication disposal.

**FY 2017 and FY 2018**
OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital supported the efforts of the Richland County Sheriff’s Office, Butler Police Department, Mansfield Police Department and Shelby Police Department in their efforts to collect unwanted, expired or unused medications during the National Prescription Drug Take Back Day on April 2017 (Richland Public Health, 2017). Mansfield Hospital and Shelby Hospital supported the National Prescription Drug Take Back Day, OPERATION Medicine Cabinet™ in October 2017 and April 2018. Items collected were primarily expired or unused prescription medications and over the counter drugs. Mansfield Hospital and Shelby Hospital are also aware of the permanent medication drop box at the Mansfield Police Department, 30 North Diamond Street, Mansfield, OH 44902 (Richland Public Health, 2017). During FY 2017 and FY 2018, approximately 10 patients and family members per year contacted the Mansfield Hospital Pharmacy Department regarding where and how to properly dispose medications. These persons were assisted by answering questions on safe and proper disposal of medications. In addition, these persons were also informed about the permanent medication drop box that is available at the Mansfield Police Department. According to the Richland County Sheriff’s Office (Steve Sheldon, personal communications, August 9, 2018), 313 lbs. of medications were collected in April 2017 (FY 2017), whereas 669 lbs. of medications were collected in October 2017 and April 2018 combined (FY 2018).

Emergency Department (ED) physicians will use state database for narcotic use (Ohio Automated Rx Reporting System [OARRS]) to limit opiate doses per patient.

**FY 2017 and FY 2018**
**Consistent use of the Ohio Automated Rx Reporting System (OARRS).** Since January 1, 2015, Ohio law requires that each doctor or doctor’s representative who prescribes or personally furnishes opioid analgesics or benzodiazepines, as well as pharmacists who dispense or plan to dispense controlled substances in the state of Ohio certify to their licensing board that they have registered for an OARRS account upon renewing their license. The requirements for healthcare providers are: (a) the prescriber must request patient information from OARRS, and (b) the prescriber must make periodic requests for patient information from OARRS, if the treatment lasts for more than 90 days.

OhioHealth has a policy entitled “Chronic Controlled Substance Prescribing” (OPG-1550.010) approved by the Ambulatory Quality Management Council on May 22, 2015. This policy covers all controlled substances (Schedule II through V): (a) A prescriber will initiate a controlled substance agreement with a patient when or if a patient will be receiving controlled substances for longer than six weeks; (b) Prescribers should check a patient’s OARRS report at least annually when a patient is receiving controlled substances other than opioid analgesics (including tramadol) or benzodiazepines; (c) Random urine drug screens are recommended to be used as part of a patient’s treatment plan; (d) Use of diagnosis-related screening tools such as the DIRE pain scale, depression scale, attention deficit hyperactivity disorder (ADHD) questionnaire or anxiety scale is recommended as a means to assess a patient’s treatment; (e) When prescribing opioids to minors, prescribers will complete the “Start Talking! Prescribing Opioids to Minors Consent Form” or a Controlled Substance Agreement (unless the use of opioids meets one of the exceptions included in House Bill 314); (f) The NARxCheck program automatically queries OARRS on behalf of a prescriber or pharmacist, satisfying the mandatory use requirements in the Ohio Revised Code and Ohio Administrative Code. Prescribing and/or dispensing of these controlled substances necessitated the use of NarxCheck or OARRS. OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital use OARRS to review the use of narcotics in order to appropriately provide pain medication to patients and limit opiate doses.

OhioHealth initiatives across the system to limit opioid prescribing. Since FY 2017, the OhioHealth Opioid Steering Committee has been working with the OhioHealth Clinical Guidance Councils to identify a process of reducing opioid prescribing among doctors, nurse practitioners and physician assistants. The OhioHealth Pharmacy team launched a pharmacologic pain management workgroup to support this initiative across the system.
Need #3: Chronic Disease

(CD 3.1) Offer health and wellness programs at the OhioHealth Ontario Health and Fitness Center, including Delay the Disease, exercise programs, SilverSneakers®, discounted or free access for seniors, Community Best Loser, the Healthy Chef Series and grocery tours at grocery stores.

FY 2017 and FY 2018
The OhioHealth Ontario Health and Fitness Center features cardiovascular equipment, weight training equipment (Cybex machines and free weights), a full-court gymnasium, indoor track, power cycling studio, aerobics studio, warm-water group exercise pool, social lounge, spacious locker rooms, massage therapy and a warm-water group exercise pool (OhioHealth 2017; Ontario Health and Fitness Center). Members get a free fitness assessment, which measures resting heart rate, cardiovascular fitness, percentage of body fat, muscular strength and endurance, height and weight, blood pressure, and flexibility. Members are also given a free individual exercise program based on their fitness assessment and fitness goals. Fitness professionals give members three personal training sessions to teach them about equipment use and monitor their workout. In FY 2017, the average monthly census of the Ontario Health and Fitness Center was comprised of 4,028 total members, 3,682 Silver Sneakers® members and 77 guests. In FY 2018, there were 2,943 total members, of which 1,947 were Silver Sneakers® members and 201 were guests. There were 4,630 average monthly visits by SilverSneakers® members and 4,047 visits by non-SilverSneakers® members.

OhioHealth Delay the Disease is an exercise program designed to help people with Parkinson’s disease move more easily in a crowd, independently rise from chairs and beds, improve handwriting, dress independently, diminish obvious symptoms and regain physical abilities (OhioHealth, 2017). At least 82 Delay the Disease classes were provided in FY 2017, with average attendance ranging from five to 20 people per class. These classes were held two to three times a week, and included both mixed and advanced level programming. At least 90 persons were served by OhioHealth Delay the Disease during FY 2017. Approximately 150 Delay the Disease classes were held in FY 2018 (three classes per week) ranging from four to 18 participants per class. Delay the Disease served at least 30 persons in FY 2018.

Exercise classes were focused on: (a) balance training, (b) ball conditioning, (c) cross-fit training targeted on cardio and strength, (d) fitness intervals and Tabata training (F.I.T.T.), (e) high intensity interval training (H.I.T.T.), (f) H.I.T.T. and M.I.X.X., (g) kettlebell blast, (h) low impact aerobics, (i) strengthen and stretch, and (j) walk-fit (OhioHealth 2017; Ontario Health and Fitness Center). Approximately 60 group exercise classes were offered in FY 2017, with attendance ranging from two to 21 people per class. In FY 2018, approximately 60 group exercise classes were held per week, with attendance averaging one to 35 participants per class.

Exercise classes were focused on: (a) balance training, (b) ball conditioning, (c) cross-fit training targeted on cardio and strength, (d) fitness intervals and Tabata training (F.I.T.T.), (e) high intensity interval training (H.I.T.T.), (f) H.I.T.T. and M.I.X.X., (g) kettlebell blast, (h) low impact aerobics, (i) strengthen and stretch, and (j) walk-fit (OhioHealth 2017; Ontario Health and Fitness Center). Approximately 60 group exercise classes were offered in FY 2017, with attendance ranging from two to 21 people per class. In FY 2018, approximately 60 group exercise classes were held per week, with attendance averaging one to 35 participants per class.

The OhioHealth Ontario Health and Fitness Center offers Silver Sneakers®, a free fitness program for adults 65 years and older as part of qualifying health plans (Tivity Health, Inc., 2017). Silver Sneakers® encourages older adults to be physically and socially active. Silver Sneakers® includes: (a) SilverSneakers® Circuit, (b) SilverSneakers® Classic, and (c) SilverSneakers® Yoga (OhioHealth 2017; Ontario Health and Fitness Center). In FY 2017, a total of 1,779 persons availed of the SilverSneakers classes. In FY 2017, approximately 202 persons visited one to five times per month, and 439 persons visited six or more times per month. In addition to members, a total of 497 seniors availed of the 10 percent discount for various exercise classes, including Zumba, walk-fit, and tai chi. In FY 2018, approximately 278 persons visited one to five times per month and 355 persons visited more than six times per month.

OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital did not offer the Community Best Loser program in FY 2017 due to low participation rates. Mansfield Hospital and Shelby Hospital intended to offer “Why Weight?” at the OhioHealth Ontario Health and Fitness Center. The “Why Weight?” program provides education, support and exercise classes to individuals struggling with weight. Due to low participation rates, “Why Weight” was not offered in FY 2017 and FY 2018.

Throughout FY 2017, 48 people participated in one of 10 guided Grocery Tours and classes on the following dates: July 19, 2016, August 16, 2016, September 12, 2016, October 18, 2016, November 3, 2016, January 24, 2017, February 16, 2017, March 28, 2017, April 26, 2017 and June 22, 2017. A total of 46 of these participants completed a survey on the program to: (a) determine how well they learned to read food labels, make healthy food choices, reduce sodium intake, control portion sizes, eat more whole grains, and (b) track motivation to implement healthy, nutrition-related practices in their lives. After participating in the grocery tour, 91 percent of participants reported learning a lot about how to read food labels, make healthy food choices, reduce sodium intake and control portion sizes. A total of 96 percent of the participants reported learning a lot about how to choose whole grains. A total of 85 percent of the participants were motivated to follow healthy nutrition practices in their lives. The participants
reported that the instructors were knowledgeable and the class was very informative and interesting. The participants suggested discussions on carbohydrate counting for persons with diabetes, soft drinks, on-the-go snacks, and facts versus myths about the health food section of the store. In FY 2018, 39 people participated in one of 10 guided grocery tours on the following dates and locations in Richland County: July 31, 2017 at Kroger (Ashland Road); August 17, 2017 at Kroger (Lexington Avenue); September 26, 2017 at Kroger (Ashland Road); October 11, 2017 at Kroger (Lexington Avenue); November 14, 2017 at Kroger (Ashland Road); January 24 at Walmart (Lexington-Springmill Road); February 20, 2018 at Kroger (Ashland Road); April 24, 2018 at Kroger (Ashland Road); May 9, 2018 at WalMart (Lexington-Springmill Road); and June 20, 2018 at Kroger (Ashland Road) A total of 38 of these participants completed a survey on the program to: (a) determine how well they learned to read food labels, make healthy food choices, reduce sodium intake, control portion sizes, eat more whole grains, and (b) track motivation to implement healthy, nutrition-related practices in their lives. The participants reported that the instructors were outstanding, wonderful, extremely knowledgeable, thorough, well-organized, answered all questions and did a wonderful job of explaining everything; the tours were presented well, were helpful, very informative, interesting and met their needs. One attendee suggested carrying baskets around the store and putting items in the basket for them to look at after the tour.

In FY 2017, OhioHealth Mansfield Hospital offered the **Wellness Education Series**, which is a total of 16 education lectures offered to the community that were provided by expert physicians and clinicians at OhioHealth. Topics included: (a) Healthy Chef, (b) hypertension, (c) developing coping skills, (d) current and new treatment for chronic obstructive pulmonary disease (COPD), (e) breast cancer, (f) gastroesophageal reflux disease (GERD), (g) heartburn, and (h) holiday survival tools. Approximately 200 persons attended these presentations. In FY 2018, three education lectures were provided by the registered dietitian and certified diabetes educator. Topics included: (a) Easy Cooking in your Home lecture and cooking demonstration at the Third Street Family Health Services, and (b) Healthy Living Skills class at Richland County Job and Family Services.

**FY 2017 and 2018**

**Diabetes Prevention Program**

OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital offered the Diabetes Prevention program (DPP), a Centers for Disease Control and Prevention (CDC)-recognized lifestyle change program, at 335 Glessner Avenue, Third floor, Mansfield, Ohio 44903. In FY 2017, 68 persons attended the DPP. Twelve persons who attended the program were from the Richland County community and not patients of Mansfield Hospital. Approximately 99 percent were Caucasians and 1 percent were African Americans. 85 percent were females and 15 percent were males. Overall, participants lost 353 lbs., which corresponded to 6.2 percent weight loss. In FY 2018, 19 participants attended the DPP. Approximately 99 percent were Caucasians and 1 percent were African Americans. 18 were females and 1 was male. Overall, participants lost 169 lbs., which corresponds to 8.9 pounds weight loss per participant.

DPP is a one-year program where participants meet weekly for the first sixteen weeks and monthly for the rest of the year. The program offers CDC-approved curriculum and access to a lifestyle coach and support group (CDC, 2016). During the first six months, participants were taught knowledge and skills for: (a) eating healthy without giving up preferred or favorite foods, (b) adding physical activity, despite having a busy schedule, (c) managing stress, (d) developing a coping mechanism during stressful situations, and (e) getting back on track after a failed attempt to adhere to an eating and exercise plan. During the second six months, the participants were taught how to: (a) better track their food intake and physical activity, (b) set realistic goals, (c) motivate themselves, and (d) tackle barriers and challenges (CDC, 2016).

**Diabetes Self-Management Education**

OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital offered Diabetes Self-Management Education (DSME) to the community in FY 2017. The DSME programs at both hospitals are accredited by the American Diabetes Association (American Diabetes Association, n.d.). This is a Medicare reimbursable program. The DSME includes teaching on topics such as: (a) diabetes pathophysiology and treatment options, (b) healthy eating, (c) physical activity, (d) medication usage, (e) monitoring, preventing, detecting, and treating acute and chronic complications, (f) healthy coping with psychosocial issues and concerns, and (g) problem solving.
During the 2016-2017 program year, 214 persons participated in Mansfield Hospital’s program, and 10 persons participated in Shelby Hospital’s program. The age breakdown of participants at Mansfield Hospital was: (a) 0–18 – 1 percent, (b) 19–44 – 54 percent, (c) 45–64 – 21 percent, (d) 65 and older – 24 percent. The age breakdown of participants at Shelby Hospital was: (a) 0–18 – 0 percent, (b) 19–44 – 30 percent, (c) 45–64 – 40 percent, (d) 65 and older – 30 percent. The gender breakdown of participants at Mansfield Hospital was: (a) male – 28 percent, (b) female – 72 percent. Gender breakdown of participants at Shelby Hospital was: (a) male – 60 percent, (b) female – 40 percent. The race breakdown of participants at Mansfield Hospital was: (a) Caucasian – 88.4 percent, (b) African American – 10.2 percent, (c) Biracial – 0.05 percent, and (d) Other Races – 0.05 percent. Participants from Shelby Hospital were 100 percent Caucasians.

Review of patient records of Mansfield Hospital participants (n=84) showed an average decline in hemoglobin A1C of 1.7 percent. Findings from the survey postparticipation among Mansfield Hospital participants showed that: (a) 99 percent of patients enrolled improved their blood glucose control, (b) 100 percent of patients felt better and are more motivated to care for their diabetes, and (c) 100 percent of participants will recommend the program to a friend or relative.

Review of patient records of Shelby Hospital participants (n=4) showed an average decline in hemoglobin A1C of 1.3 percent. Findings from the survey postparticipation among Shelby Hospital participants showed that: (a) 100 percent of patients improved their blood glucose control, (b) 100 percent of patients felt better or more motivated to care for their diabetes, and (c) 100 percent of participants will recommend the program to a friend or relative.

In FY 2018, 190 persons participated in Diabetes Self-Management Education program at Mansfield Hospital. 47 percent had Type 2 diabetes, 6 percent have Type 1 diabetes, and 47 percent have gestational diabetes. The gender breakdown of participants was: (a) male – 25 percent, (b) female – 75 percent. The age breakdown of participants was: (a) 19–44 – 56 percent, (b) 45–64 – 23 percent, (c) 65 and older – 21 percent. The race breakdown of participants was: (a) Caucasian – 84 percent, (b) African American – 13 percent, and (c) Pacific Islander – 1 percent. Findings from the survey postparticipation among the 190 participants showed that: (a) 97 percent improved their blood glucose control, and (b) 100 percent felt better and are more motivated to care for their diabetes after attending the program. All participants reported they will recommend the program to a friend or a relative.

In FY 2018, five persons participated in the Diabetes Self-Management Education at OhioHealth Shelby Hospital. Three persons had Type 2 diabetes, one person had Type 1 diabetes, and one person had gestational diabetes. Three participants were females and two were males. All participants were Caucasian.

(CD 3.3) Provide community- and school-based health and wellness programs such as Health Matters, Speakers Bureau, Asthma-1-2-3 and other programs.

FY 2017

Health and Wellness Education Sessions and “Walk and Talk”
In April 2017, the program coordinator of the Diabetes Prevention program obtained training at Richland Public Health regarding effective strategies for integrating walking and talking about health and wellness issues in educational lectures. OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital representatives provided the educational session at the OhioHealth Ontario Health and Fitness Center and led the one-hour community walk. Mansfield Hospital and Shelby Hospital representatives also attended the community walk that was organized by Richland Public Health at the Oak Hill Cottage, 310 Springmill Street, Mansfield, Ohio 44903. As part of the Walk and Talk classes, Mansfield Hospital and Shelby Hospital served 15 persons from Richland County. In May 2017, the Walk and Talk program was terminated, so the community outreach was not done.

Speaker’s Bureau
In August 2016, a nurse educator and the program coordinator from Mansfield Hospital gave a talk titled “Prediabetes: What is it?” to recruit participants for the Diabetes Prevention program. In October 2016, the Mansfield Hospital’s pharmacist presented “Medicare Part D and your Meds” at the Ohio District 5 Area Agency on Aging, 2131 Park Avenue West, Ontario, Ohio 44906. At least 20 adults attended the presentations. In August and September 2016, the outpatient dietitian gave two presentations at the Farmers Market at the North End Community Improvement Collaborative. Topics presented included healthy recipes for winter squashes, health benefits of a plant-based diet, and recipes that contains legumes, a rich source of protein. These two presentations reached at least 1,000 persons.

In October 2016, the registered dietitian and certified diabetes educator at Mansfield Hospital was interviewed by WMFD TV about diabetes prevention and diabetes management. She discussed Mansfield Hospital’s Diabetes Prevention program and Diabetes Self-Management Education program. In October 2016, she talked about
OhioHealth Mansfield Hospital Community Health Needs Assessment

prediabetes and diabetes to 30 participants as part of the Richland County Employee’s Healthy Living Skills held at Richland County Job and Family Services.

In January 2017, the same registered dietitian and certified diabetes educator presented to 10 persons about prediabetes and diabetes as part of the Worksite Wellness Series hosted by Richland Public Health. In December 2016 and May 2017, Mansfield Hospital’s respiratory therapist offered four health classes to 80–100 eighth-grade students at Ontario Middle School focused on lung health and diseases. Specific topics include: (a) a normal lung and its function, (b) lung diseases, such as chronic obstructive pulmonary disease (COPD), emphysema, bronchitis, asthma, and interstitial lung disease, and (c) hazards and physical effects of smoking tobacco and use of nicotine products, second-hand smoke, and chemicals in tobacco products. The teaching activity made use of lung models, included a demonstration of lung disease by having the students breathe through a straw, and engaged the students in measuring oxygen carbon dioxide levels and their heart rate.

**Health and Wellness Newsletter for OhioHealth Mansfield Hospital Childcare Facility (Marlys Stone, Jill Fulk)**

The child care facility is located at the OhioHealth Carpenter Center, 103 Marion Avenue, Mansfield, Ohio 44903 and serves approximately 75–100 children ages 0–14 years. Mansfield Hospital’s dietitian collaborates with an Ashland University intern student in preparing quarterly newsletters that are sent by email to at least 50 families. In FY 2017, the four newsletters were released seasonally, one each for summer, fall, winter and spring. Examples of topics on health and wellness that were included in the newsletters include: (a) MyPlate (USDA, n.d.), (b) Harvard’s Kid’s Healthy Eating Plate (The President and Fellows of Harvard College, 2017), (c) the importance of breakfast, (d) tips for healthy snacking and packing school lunches, (e) family time activities for home, (f) local physical activity programs, (g) recipe ideas, (h) food allergies, (i) creating a healthy relationship with food, (j) how the media influences children’s food preferences, and (k) benefits of vitamin C with food sources.

**FY 2018**

**Health and Wellness Education Sessions**

**October 19, 2017 (Healthy Eating for Preschoolers) –** Mansfield Hospital’s outpatient dietitian and dietetic students from Ashland University educated parents on healthy eating for preschoolers enrolled at the Pioneer Early Childhood Education Center located at Mansfield Hospital. Sixty-nine persons attended the family-based educational meeting. A healthy meal and age-appropriate snack planning lesson for both parents and preschoolers was conducted. The dietitian educated the parents on: (a) portion control, (b) the benefits of a variety of food groups in meals and snacks, (c) a plant-based diet, (d) the benefits of colors from the earth (plant foods), (e) how to support and encourage children to create and prepare their own snacks, (f) safe food-handling skills, (g) safe knife-handling skills, (h) the steps of creating a healthy snack, (g) ChooseMyPlate, (h) increasing awareness of food allergies, and (i) holiday snack recipes.

**December 16, 2017 (Girl Scouts Elf Fest) –** Mansfield Hospital’s outpatient dietitian taught snack preparation to Girl Scouts of Ohio’s Heartland Council Inc. troop members. Thirty-two members attended the teaching session held at Bucyrus Public Library in Crawford County (200 East Mansfield Street, Bucyrus, Ohio 44820). The educational activity focused on: (a) safely using a knife to cut raw vegetables, (b) trying a new recipe instead of preparing a processed favorite, (b) the importance of probiotics for a healthy immune system and digestion, (c) the benefits of spices and seasonings for health, (d) preparing healthy snacks, (e) creativity in food preparations, (f) the importance of seasonings and spices, (g) the benefits of using plant-based foods for health and wellness with color from the earth, (h) eating colorful foods to obtain natural vitamins, minerals and antioxidants, and (i) alternatives to sweet beverages using recipes for fruit-, vegetable- and herb-enhanced water.

**February 2, 2018 (Third Street Family Health Services Dental Fair) –** Mansfield Hospital’s outpatient dietitian and Ashland University students participated in the Third Street Family Health Services Dental Fair held at Madison South Elementary School, 700 South Illinois Avenue, Mansfield, Ohio 44907. The purpose was to encourage healthy lifestyles with dental care, healthy eating, daily physical activity, and reading instead of screen time. Approximately 500 elementary students, faculty and staff participated in the health fair. The outpatient dietitian and dietetic students educated kindergarten to fourth-grade students about basic nutrition, highlighting the importance of a healthy digestive tract, healthy food groups, portion control, the benefits of “eating the rainbow” through a colorful, plant-based diet, and the importance of fiber. They also suggested snacks like popcorn, and reviewed healthy meal and snack preparation. Children were encouraged to try new foods with hummus samples and were provided a healthy snack.

**March 22, 2018 (National Nutrition Month and Diabetes Awareness Month at the Lexington Senior Center) –** Mansfield Hospital’s outpatient dietitian discussed healthy eating for people with prediabetes, and the availability of
the hospital’s Diabetes Self-Management Education program and Diabetes Prevention program. The hospital outreach was completed in conjunction with the celebration of National Nutrition Month and Diabetes Awareness Month held at the Lexington Senior Center, 67 East Main Street, Lexington, Ohio 44904. The dietitian answered questions about risk factors for prediabetes and diabetes, and provided tips for healthy eating. Approximately 55 persons attended the teaching session.

Speaker's Bureau
In August 2017 and June 2018, Mansfield Hospital's and Shelby Hospital's respiratory therapist and certified tobacco treatment specialist presented to residents of Applewood Place, 1665 Executive Court, Mansfield, OH 44907. Fourteen persons attended the two events. The first event, on August 2, 2017, focused on second-hand smoke, third-hand smoke exposure, chemicals in tobacco products, and the Ohio Smoke Free Workplace Law, which prohibits smoking in public places and in places of employment (Ohio Department of Health, n.d.). Other topics covered included: (a) lung diseases, such as chronic obstructive pulmonary disease (COPD), emphysema, bronchitis, and asthma, and (b) the hazards and physical effects of smoking tobacco and use of nicotine products, second-hand smoke and chemicals in tobacco products. The speakers demonstrated how to perform a pulse oximetry test using a participant's finger.

Diabetes Self-Management Education
In FY 2018, eight diabetes support groups and community talks were offered to residents of Richland County to improve health literacy in diabetes and diabetes-related issues.

Community talks:
(a) August 11, 2017: OhioHealth Mansfield Hospital’s certified diabetes educator and certified nurse practitioner led a talk titled “Overview of Type 1 Diabetes Management and Insulin Administration” at Discover School, 855 Millsboro Road, Mansfield, OH 44903. Five teachers attended the talk.
(b) April 27, 2018: Mansfield Hospital’s certified diabetes educator and certified nurse practitioner helped coordinate the Diabetes Camp Walk fundraiser organized by the members of Masonic Lodge 35, 1250 Middle Bellville Road, Mansfield, Ohio 44904. Thirty participants joined the walking event.
(c) December 12, 2017: Mansfield Hospital’s certified diabetes educator and certified nurse practitioner led a talk titled “The Impact of Diabetes and Prediabetes” to Lucas Lions Club, 252 West Main Street, Lucas, Ohio 44843. Twelve persons attended the talk.
(d) May 17, 2018: Mansfield Hospital’s certified diabetes educator and certified nurse practitioner led a talk about diabetes to the Bellville Lions Club, 470 Main Street, Bellville, Ohio 44813. Fifteen persons attended the talk.

Support groups
(a) August 22, 2017: Mansfield Hospital’s podiatrist and certified diabetes educator and nurse practitioner led a class titled “Foot Care and Footwear Matters” at the hospital’s Medical Office Building. Six participants attended the support group.
(b) November 28, 2017: Mansfield Hospital’s certified diabetes educator and certified nurse practitioner, and a periodontist, led a class titled “Oral Care and Periodontal Disease” at the hospital’s Medical Office Building. Four participants attended the support group.
(c) February 27, 2018: The OhioHealth Mansfield’s certified diabetes educator/certified nurse practitioner taught the class “Diabetes and Your Heart” at the OhioHealth Mansfield Medical Office Building. Ten persons attended the support group.
(d) May 22, 2018: The OhioHealth Mansfield’s certified diabetes educator and registered dietitian intern led a class titled “Key Behaviors to Diabetes Control” at the hospital’s Medical Office Building. Ten persons attended the support group.

Health and Wellness Newsletter for OhioHealth Mansfield Hospital’s Childcare Facility (Marlys Slone, Jill Fulk)
On June 2017, the childcare facility at OhioHealth Mansfield campus was closed, so no report related to the newsletter is provided in FY 2018

Pulmonary Support Group
In FY 2018, 10 pulmonary support groups were held, serving a total of 101 persons.
(a) July 19, 2018 – Mansfield Hospital’s respiratory therapist facilitated a support group titled “Why the doctor wants to do a lot of tests when they know I have chronic obstructive pulmonary disease (COPD).” Nine people attended the support group.
(b) August 16, 2017 – Mansfield Hospital’s respiratory therapist facilitated a support group titled “Stages of COPD.” Fifteen people attended the support group.
(c) September 20, 2017 – Mansfield Hospital’s respiratory therapist facilitated a support group titled “Will a portable oxygen concentrator fill your needs for oxygen?” Seven people attended the support group.
(d) October 18, 2017 – Mansfield Hospital’s respiratory therapist facilitated a support group titled “What does COPD exacerbation mean?” Twelve people attended the support group.
(e) November 15, 2017 – Mansfield Hospital’s respiratory therapist facilitated a support group titled “How do I talk to my doctor to make them understand what I am saying?” Twelve people attended the support group.
(f) December 13, 2017 – Mansfield Hospital’s respiratory therapist hosted a question and answer session about lung health and lung disease. Nine people attended the session.
(g) March 21, 2018 – Mansfield Hospital’s respiratory therapist facilitated a support group titled “New and current medicines for lung disease.” Nine people attended the support group.
(h) April 18, 2018 – Mansfield Hospital’s respiratory therapist facilitated a support group titled “Can I have both idiopathic pulmonary fibrosis and COPD? What is the difference?” Twelve people attended the support group.
(i) May 16, 2018 – Mansfield Hospital’s respiratory therapist facilitated a support group titled “Should I worry about my persistent cough?” Nine people attended the support group.
(j) June 20, 2018 – Mansfield Hospital’s respiratory therapist facilitated a support group titled “What is GERD and will it make my lung disease worse?” Seven people attended the support group.

(CD 3.4) Partner in “Creating Healthy Communities Coalition” led by Richland Public Health, which focuses on healthy eating, physical activity and tobacco-free living. Creating Healthy Communities Coalition partners include Community Action for Capable Youth, North End Community Improvement Collaborative, Mansfield YMCA, Mansfield City Schools, OhioHealth Mansfield Hospital, OhioHealth Shelby Hospital, City of Shelby, Shelby YMCA and Richland County Regional Planning Commission.

FY 2017
Creating Healthy Communities Coalition (CHC) is a statewide innovation managed by the Ohio Department of Health, (2017), with a vision of “making the healthy choice the easy choice” and mission of “preventing and reducing chronic disease statewide through cross-sector collaboration.” The Richland County Creating Healthy Communities program is managed by Richland Public Health (Richland Public Health, 2018b).

In Richland County, there are two multisector coalitions: (a) Mansfield Creating Healthy Communities (CHC), and (b) Shelby Creating Healthy Communities. OhioHealth Mansfield Hospital’s administrative physician and OhioHealth Shelby Hospital’s Medical Staff Services represented OhioHealth in the Richland County CHC. CHC’s 2018 project goals include: (a) healthy eating, (b) physical activity, and (c) tobacco-free living. To address healthy eating, CHC aims to increase access to fresh produce by enabling farmer’s markets to participate in the WIC farmer’s market coupon program, and assisting employers in adopting healthy food and drink guidelines. To address physical activity, CHC aims to promote “Complete Streets,” which encourages shared use of streets by walkers, bicyclists and transits, and further improvement of parks to encourage physical activity. The CHC supports tobacco-free living at multifunit housing complexes in Richland County (Richland Public Health, 2018b).

In FY 2017, the OhioHealth representative for both Mansfield Hospital and Shelby Hospital attended CHC coalition meetings on April 6, 2017, April 20, 2017, May 11, 2017, and June 8, 2017. Each meeting lasted 2 hours. The CHC coalitions participated in developing the Richland County Community Health Assessment and Community Health Improvement Plan, and mission and vision statements.

Mansfield Hospital and Shelby Hospital have actively participated in the development of the Blust Avenue Teaching Garden, located at the north end of Mansfield, Ohio. The goals of the teaching garden include: (a) teaching Richland County residents how to grow food for own consumption, share it with community and market surplus, (b) using the garden as a source of extra income, (c) providing access to fresh produce in a USDA-designated fresh food desert, (d) promoting healthy lifestyles and physical activity, (e) creating new community spaces from vacant lots, (f) promoting sustainability of the environment, and (g) promoting socialization and relationships among residents (North End Community Improvement Collaborative, 2018).

In support of the Mansfield and Shelby Creating Healthy Communities coalitions, Mansfield Hospital and Shelby Hospital implemented numerous programs during FY 2017. These include: (a) cosponsoring a Diabetes Prevention program with the Mansfield Area YMCA, (b) offering the Diabetes Self-Management Education program, (c) partnering with the Third Street Family Health Services on “Easy Cooking in Your Home” and “Health Matters,” (d) partnering with Kroger on “Healthy Grocery Shopping Tours,” (e) offering “Get Fit Mansfield” and weight loss challenges at the OhioHealth Ontario Health and Fitness Center, (f) offering a “Healthy Chef” series, and (g) health...
and wellness programs for OhioHealth employees through the OhioHealthy health insurance plan, wellness incentives, and healthy menus and snacks at the hospital cafeteria and vending machines.

**FY 2018**

The Mansfield Creating Healthy Communities (CHC) coalition had five CHC meetings at Richland Public Health, 555 Lexington Avenue, Mansfield, Ohio 44907. The Shelby Creating Healthy Communities Coalition meetings were held at the City Hall Conference Room, 43 W. Main St, Shelby, Ohio 44875. The projects and initiatives focused on healthy eating, physical activity, and tobacco-free living.

**(CD 3.5)** Partner with the American Heart Association’s HeartChase community adventure game to promote community engagement in physical activity.

**FY 2017 and FY 2018**

OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital sponsored the American Heart Association’s HeartChase™, which was held at the Central Park Gazebo on Park Avenue West and Park Street, Mansfield, Ohio 44902. The activity promoted community awareness of heart disease and the importance of physical activity, at the same time raising funds for various American Heart Association programs for Richland County residents. HeartChase™ is a community adventure game where teams of two to five people compete against other teams in a chase though the community. Each team tackles multiple checkpoint challenges and finds “Power Ups.” Specific American Heart Association “Game Advantage Cards” went to the first 10 teams that fundraised $100. Game Advantage Cards allows teams to skip to the front of a checkpoint line or completely skip a checkpoint and still get the points (American Heart Association, 2017). The director of Clinical Operations chaired the HeartChase™ event in FY 2017. Other OhioHealth employees from the heart and vascular team assisted with planning and coordination of the event, which include activities such as hands-only CPR training, nutrition education and physical challenges. Approximately 103 persons participated in the HeartChase™ event held on May 13, 2017. Approximately 108 participants attended the May 12, 2018 HeartChase™ event. The American Heart Association raised a total of $34,000 in FY 2017 and $32,000 in FY 2018.

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**Need # 4: Infant Mortality**

**(IM 4.1)** Provide low-cost childbirth education and breastfeeding classes.

**FY 2017**

**Childbirth Education**

Childbirth education classes offered at OhioHealth Mansfield Hospital and Shelby Hospital discuss the following topics: (a) support roles, (b) labor stages, (c) pain relief, and (d) postpartum and infant care.

At Mansfield Hospital, no formal childbirth education classes were offered in FY 2017. Three obstetrics department nurses from Mansfield Hospital completed formal training to implement childbirth education classes that align with the other OhioHealth hospitals in central Ohio. Formal childbirth education classes were offered twice a month starting in February 2018.

At Shelby Hospital, five classes were offered on the following dates: (a) September 12, 2016, (b) November 14, 2016, (c) January 9, 2017), (d) March 13, 2017, and (e) May 8, 2017. These classes were held in the Shelby Hospital Obstetrics department. On average, approximately 10 couples (20 persons) attended the childbirth education classes.

**Breastfeeding Classes**

In FY 2017, Mansfield Hospital and Shelby Hospitals offered breastfeeding classes to help mothers and support persons become aware of the benefits of breastfeeding to the health of the mother and baby.

Mansfield Hospital offered four breastfeeding classes in September 2016, January 2017, March 2017, and May 2017. Approximately 12 persons attended the breastfeeding classes in FY 2017. Shelby Hospital offered five breastfeeding classes on: (a) September 26, 2016, (b) November 28, 2016, (c) January 23, 2017, (d) March 20, 2017, and (e) May 22, 2017. Approximately 40 persons attended the breastfeeding classes in FY 2017. Topics discussed in the classes include: (a) the natural process of breastfeeding, (b) lactation and physiology of the breast, and (c) positioning and identification of feeding cues. The classes are taught by certified lactation consultants who provide: (a) a prenatal breast assessment of the mother’s breast and nipples with nipple and breast care instructions, (b) instructions for
attachment and positioning techniques the mother can use to attach her baby to her breast to feed, (c) instructions for performing a milk quantity assessment, which helps determines how much milk the baby is getting by monitoring the baby's weight, and (d) tips to prevent nipple soreness and discomfort using proper attachment techniques.

Mansfield Hospital also offers monthly support groups that aim to empower breastfeeding mothers and motivate them to continue breastfeeding until the baby reaches six months of age. The breastfeeding support groups for pregnant and breastfeeding women provide new and experienced mothers with a place to share and discuss breastfeeding information. The support groups are offered at Mansfield Hospital, but serve patients and families of Shelby Hospital as well. In FY 2017, the breastfeeding support groups at Mansfield Hospital were offered on the second Wednesday of each month. Forty persons attended the breastfeeding support groups.

FY 2018

Childbirth Education
At OhioHealth Mansfield Hospital, childbirth education classes were offered in FY 2018. Three obstetrics department nurses from Mansfield Hospital completed formal training to implement childbirth education classes that align with the other OhioHealth hospitals in central Ohio. Formal childbirth education classes were offered twice a month starting in February 2018. The classes were a new offering to the community and class information was distributed to the community and physician offices. The classes were offered: (a) March 7, 2018, (b) March 24, 2018, (c) April 4, 2018, (d) April 21, (e) May 9, 2018, (f) May 26, 2018, (g) June 15, 2018, and (h) June 23, 2018. Ten couples (20 persons) attended the childbirth education classes.


Breastfeeding Classes

Mansfield Hospital also offers a weekly support group that aims to empower breastfeeding mothers and motivate them to continue breastfeeding until the baby reaches six months of age. The breastfeeding support groups for pregnant and breastfeeding women provide new and experienced mothers with a place to share and discuss breastfeeding information. In FY 2018, the breastfeeding support groups at Mansfield Hospital were offered every Wednesday. Approximately 90 persons attended the breastfeeding support groups at Mansfield Hospital. Approximately 20 persons attended the breastfeeding support groups at Shelby Hospital.

Collaborate with Daddy Boot Camp, provided by the Richland County Youth and Family Council, to provide expectant fathers education and instruction on how to care for their newborn.

FY 2017 and FY 2018

Boot Camp for New Dads® (aka Daddy Boot Camp®) is provided by the Richland County Youth and Family Council through a pool of male volunteers from the community. In FY 2017, Boot Camp for New Dads was offered four times in Richland County. Boot Camp for New Dads is an evidence-based program that offers father-to-father workshops to the community to inspire men to be involved and engaged with their infants, support their partners and become fathers (Boot Camp for New Dads, n.d.). Boot Camp for New Dads is hosted by male volunteer facilitators and experienced fathers providing practical information and guidance to new fathers. In FY 2017 and FY 2018, Mansfield Hospital and Shelby Hospital only referred five fathers to participate in Boot Camp for New Dads due to low interest from fathers.

Both Mansfield Hospital and Shelby Hospital nurses include the father of the baby (whenever available) in patient teaching, including concepts such as: (a) breastfeeding, (b) use of car seats, (c) circumcision care for male babies, (d) kangaroo care, (e) the purpose of vitamin K, (f) use of erythromycin ointment, (g) hearing tests, (h) preparing formula milk, (i) immunization schedules, (j) bathing the baby, (k) signs of jaundice, (l) blood tests to detect phenylketonuria, (m) prevention of shaken baby syndrome, (n) safe sleep, and (o) signs and symptoms of the newborn requiring emergency care.
In FY 2017, these topics were taught to 940 mothers at Mansfield Hospital and 146 mothers at Shelby Hospital. Whenever the father of the baby is present in the mother’s room, the nurses includes the father of the baby in the education. In FY 2018, 933 mothers at Mansfield Hospital and 148 mothers at Shelby Hospital were taught these topics.

(IM 4.3) In 2016, OhioHealth offered prenatal care and women’s health services to the broader community through a partnership with OhioHealth Community Health and Wellness and March of Dimes. Care was provided on the Mom and Baby Mobile Unit, regardless of ability to pay.

FY 2017 & FY 2018
The March of Dimes’ Mom and Baby Mobile Unit started providing services in January 2017. There were no patients served during FY 2017. In FY 2018, the mobile unit served 33 patients – eight patients for recurring prenatal visits, two for well-woman visits, 19 for preconception education, and four for pregnancy and other laboratory tests. The mobile unit stopped its service in November 2017 due to resignation of the attending physician.

(IM 4.4) Participation in the Richland County Infant Mortality Task Force

FY 2017 and FY 2018
The Richland County Infant Mortality Task Force is a community collaborative led by Richland Public Health. OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital actively participate in this task force. As a means of addressing infant mortality, Richland Public Health provides services for pregnant and new mothers, including:

(a) **Newborn home nurse visit for all new Richland County mothers** – The registered public health nurse conducts an assessment of the newborn baby up to two months old, and provides information and support to the family. Topics discussed include (a) healthy eating, (b) smoking cessation, (c) stopping alcohol consumption, and (d) safe sleep education.

(b) **Women, Infants and Children (WIC)** – Provides coupons for nutritious supplemental foods to women who are pregnant, have delivered their baby, are breastfeeding, or have infants and children.

(c) **Free car seat education class** – A hands-on discussion about Ohio’s Child Passenger Safety laws, kinds of child restraint, and mistakes in using or securing the car seat.

(d) **Safe sleep education** – Distributes a checklist to educate families receiving a crib that is signed and dated by the parent and provider.

The director of Nursing at Mansfield Hospital and Shelby Hospital attends the regular meetings of the Richland County Infant Mortality Task Force. The high rates of infant mortality in Richland County (7.3 infant deaths per 1,000 live births) has been attributed to socioeconomic problems (high unemployment and public assistance rates), and economic and racial disparities. The Richland County Infant Mortality Task Force hosts town hall meetings to promote awareness on the racial and economic disparities affecting high infant mortality rates in Richland County.

In FY 2017, the director of nursing, the medical director of medical staff services, and the nurse manager for obstetrics at Mansfield Hospital was part of the Richland County Infant Mortality Task Force facilitated by Richland Public Health. In FY 2017, Richland Public Health hosted the annual Richland County Task Force meeting on February 24, 2017. Discussions focused on: (a) increasing community awareness about the My Baby and Me Mobile Unit funded by the March of Dimes Foundation, (b) creation of an app that enables patients to access education and resources available in the community, (c) community outreach to pregnant moms with opioid addiction, and (d) updates from workgroups on interventions for reducing infant mortality rates by lowering preterm birth rates, and preventing birth defects and sleep-related infant mortalities (Schock, 2017).

During FY 2018, Mansfield Hospital was active in the Richland County community-sponsored baby shower. The goal was to bring awareness and support to families about the initiatives to decrease infant mortality. The community baby shower is planned to occur on September 2019.
Provide referrals to Third Street Family Health Services OB-GYN clinic for services regardless of income.

FY 2017

There are three OhioHealth Mansfield Hospital board-certified, OB-GYN physicians (James M. Alford, MD; Carolyn A. Chambers, MD; and Edward P. Zarczynski, MD) who also provide care at Third Street Family Health Services. In FY 2017, Drs. Alford, Chambers and Zarczynski served 350 patients. Another board-certified OB-GYN physician who worked at OhioHealth Shelby Hospital served 67 patients. Approximately 18.9 percent of these patients were either uninsured or have Medicaid insurance. In FY 2017, three patients who did not have health insurance and a primary care provider were referred to Third Street Family Health Services.

Third Street Family Health Services provides various gynecology services, including: (a) annual women exams, (b) Pap tests and screening for cervical cancer, (c) screening for breast cancer, (d) family planning methods, (e) placement and removal of intrauterine device (IUD) or Implanon, (f) sterilization, (g) screening for human papilloma virus (HPV), (h) colposcopy, (i) loop electrosurgical excision procedure, (j) testing for sexually transmitted infections (STIs), (k) menstrual cycle problems, (l) management of menopause, (m) screening and treatment of osteoporosis, and (n) fibroids (Third Street Family Health Services, 2015).

FY 2018

There are three OhioHealth board-certified, OB-GYN physicians (James M. Alford, MD; Carolyn A. Chambers, MD; and Edward P. Zarczynski, MD) who also provide care at Third Street Family Health Services. In FY 2018, Drs. Alford, Chambers and Zarczynski served 361 patients at OhioHealth Mansfield Hospital and 17 patients at OhioHealth Shelby Hospital. Approximately 73.7 percent of the Mansfield Hospital patients were either uninsured or have Medicaid insurance and 76.5 percent of the Shelby Hospital patients were either uninsured or have Medicaid insurance.

Provide referrals to the Community Health Access Project (CHAP), an evidence-based process of coordination for high-risk individuals, evaluating and reducing risk factors. Identified risk factors are addressed with appropriate pathways that connect individuals in need to primary care, prevention programs, mental and behavioral health agencies, housing, food, clothing, adult education and employment. CHAP has demonstrated that home visiting care coordination in an urban community in Ohio led to greater than 60 percent reduction in low birth weight.

FY 2017 and FY 2018

The Community Health Access Project (CHAP) serves as the certified pathways community hub for Richland County. CHAP facilitates access to community care coordinators, such as community health workers, nurses and social workers, who are well-connected in the local community (Community Health Access Project, 2016). These care coordinators identify patients’ risk factors and ensure ways and means of addressing these risks through specific pathways. Patients are connected to primary care, prevention services, behavioral health services and other healthcare needs. The coordinators address social determinants of health issues, such as lack of housing, food, clothing, education and job training (Community Health Access Project, 2016).

Three leaders from Mansfield Hospital and Shelby Hospital serve as board members of CHAP. During FY 2017, board meetings were held on August 31, 2016, November 30, 2016, and March 13, 2017. During FY 2017, major projects or initiatives by CHAP to further enhance the care coordination and referral process include (a) Level 1 Certification Designation from Rockville Institute’s Pathways Community Hub Certification Program (The Rockville Institute, 2017), (b) partnership with African American churches to strengthen available support for pregnant women, and (c) strengthening partnerships with community partners who employ community health workers, such as Third Street Family Health Services, Mansfield Urban Minority Alcoholism and Drug Abuse Outreach Program Inc. During FY 2018, the leaders from OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital attended the board meetings on August 31, 2017, November 30, 2017, and April 18, 2018. The board meetings focused on strategic initiatives and status of current CHAP projects.

During FY 2017 and 2018, OhioHealth Mansfield Hospital referred approximately five to 10 patients to CHAP. OhioHealth Shelby Hospital did not refer patients to CHAP during FY 2017 and 2018. The top reasons for referral to CHAP include substance abuse, prenatal care and housing needs.
provide referrals to Richland Public Health’s home visiting program for babies up to 8 weeks old.

FY 2017
Richland Public Health offers a home visiting program for newborns up to 8 weeks old. Public health nurses provide the home visits to the family of the newborn baby. The service is made possible through a collaboration between Richland Public Health and the Richland County Youth and Family Council (Richland Public Health, n.d.). The nurses conduct an assessment of the newborn, provide support and education, and answer parents’ questions about growth and development, emotional status, feeding and nutrition, parental roles, health and safety issues, and other aspects of the baby’s well-being (Richland Public Health, n.d.). The nurses also educate parents on the availability of various community resources that help parents cope and adjust with their growing family. For example, the nurses inform parents about the availability of Cribette®, which is a safe-sleep environment for babies up to 30 pounds and 35 inches that can be converted from a full-size bassinet to a portable crib (Cribs for Kids, n.d.).

In FY 2017 and FY 2018, information about Richland Public Health’s home visiting program for newborn was given to all patients of the labor and delivery and postpartum units. Primary reasons for referral to the home visiting program were: (a) breastfeeding, (b) postpartum depression, and (c) guidance for first-time mothers. In FY 2017 and FY 2018, Mansfield Hospital and Shelby Hospital did not track the number of patients who availed of Richland Public Health’s home visiting program.

provide referrals to Cribs for Kids® which aims to prevent infant deaths through parental and caregiver education on the significance of practicing safe sleep for babies and providing Graco® Pack ‘n Play® portable cribs to low-income families.

FY 2017 and FY 2018.

In FY 2017, OhioHealth Mansfield Hospital had 846 deliveries and OhioHealth Shelby Hospital had 146 deliveries. In FY 2018, OhioHealth Mansfield Hospital had 948 deliveries and OhioHealth Shelby Hospital had 158 deliveries. The mothers who delivered their babies, and their families, were educated on safe-sleep environments for the baby. Parents who were identified to need safe cribs based on the Patient Access to Safe Sleep Environment Screening (Ohio Department of Health, 2017) were referred to Richland Public Health.

The Ohio Department of Health has ongoing partnerships with Cribs for Kids® and Richland Public Health to provide free Graco® Pack ‘n’ Play® to families who are income eligible. The Graco® Pack ‘n’ Play® complies with the standards of the Consumer Product Safety Commission, and is safe for baby’s nap and overnight sleep up to age 1 (Ohio Department of Health, 2017).

In FY 2017, OhioHealth Mansfield Hospital referred approximately two patients or families to Richland Public Health to avail of the Graco® Pack ‘n’ Play®, and other items as part of the safe-sleep kit. OhioHealth Shelby Hospital did not refer patients or families to Richland Public Health to avail of these items. The safe-sleep kit is available to income-eligible families if they attend an educational class focused on safe-sleep practices and proper assembly and usage of the Graco® Pack ‘n’ Play® (Ohio Department of Health, 2017).

provide referrals to Women, Infants and Children (WIC), a nutrition education program that provides coupons for nutritious foods that promote health of pregnant and postpartum women, breastfeeding mothers, infants and children.

FY 2017 and FY 2018
Richland Public Health administers the Women, Infants and Children (WIC) services to women who have a baby up to 6 months old, mothers who are breastfeeding, and women with infants and children up to age 5. The women, infants and children served by WIC have to be residents of Richland County or Ashland County, identified to be at-risk nutritionally and medically, and are at or below WIC income guidelines (Richland Public Health, 2018). WIC services include, (a) personalized counseling on nutrition, (b) teaching about nutritious foods, (c) linkage to healthcare, (d) support and education on breastfeeding and (e) coupons for fresh fruits and vegetables from the farmers market in the summer. (Richland Public Health, 2018).

In FY 2017 and FY 2018, approximately 25 women and families were referred to WIC for needed services, such as infant formula, breastfeeding support, and continued or additional nutritional support.
Need #5: Child and Family Health

(CFH 5.1) Referrals of children and families to community agencies such as Richland County Children’s Services, Richland County Youth and Family Council, Salvation Army and other food pantries, Third Street OB-GYN, Community Health Access Project (CHAP) and strengthening collaboration with these agencies to ensure success of referrals.

FY 2017 and FY 2018

Richland County Children’s Services
On November 1, 2016, OhioHealth Mansfield Hospital opened the expanded Forensics Department to enable victims of sexual assault to have a dedicated safe area for interviews (Schock, 2016). The Forensics Department expansion was made possible by a grant from the Office of the Attorney General, and will enable interviews by the medical and legal teams while taking time with families (Schock, 2016). OhioHealth Mansfield Hospital partnered with the Richland County Children’s Services in the expansion efforts, which enabled three interview rooms to have audio and video recording capabilities. Law enforcement can use recordings of children who were abused to assist with prosecuting the suspects, without the need for children to testify in court (Schock, 2016).

In FY 2017, a total of 89 women and children received care from the expanded Forensics Department of OhioHealth Mansfield Hospital, of which 56 persons were referred to the Richland County Children Services. Similarly, 94 women and children received care from the OhioHealth Mansfield Hospital Forensics Department in FY 2018, of which 63 persons were referred to Richland County Children Services. Referrals to Richland County Children Services were made for the following reasons: a) report signs of abuse as mandated by the Ohio Revised Code, (b) safety issues that necessitate the child to be in a safe place, and (c) need for further investigation of the situation.

Collaboration with Richland County Youth and Family Council
According to the Ohio Revised Code 121.37, the Richland County Youth and Family Council is an Ohio Family and Children First Council that facilitates an effective delivery, collaboration and coordination of community services to assist families in meeting their needs and fulfilling their responsibilities (Richland County Youth and Family Council, n.d.).

Richland Public Health’s home visiting program, provided to newborns up to 8 weeks of age, was funded by the Richland County Youth and Family Council. OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital provide information to patients and families about the home visiting program of Richland Public Health. The home visiting program is funded by the Richland County Youth and Family Council.

The Richland County Youth and Family Council is an affiliate agency of the Mental Health and Recovery Services Board of Richland County, an agency that helps distribute local funds to organizations that help children, adults and families experiencing mental health issues or emotional crises (Richland County Mental Health and Recovery Services Board, 2018). A leader from Mansfield Hospital and Shelby Hospital serves as a board member of the Mental Health and Recovery Services of Richland County.

Collaboration with Salvation Army
The Salvation Army is involved with fighting against human trafficking. OhioHealth Mansfield Hospital's expanded Forensic Department enables audio and video recording of women and girls who are victims of sexual slavery to be used by law enforcement officials to prosecute criminal perpetrators. OhioHealth Mansfield Hospital's and OhioHealth Shelby Hospital's Sexual Assault Nurse Examiners (SAND) will stay up to date on programs implemented by Salvation Army that benefit patients.

Collaboration with food pantries
OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital give patients information about various food pantries serving Richland County, including:

(a) Food pantries serving countywide
- Abundant Life Tabernacle – Located at 1085 Bedford Boulevard, Ontario, Ohio 44906.
- Catholic Charities (H.O.P.D. Pantry) – Located at 523 Park Ave East, Mansfield, Ohio 44905.
- Gateway Resource Center – Located at 486 Springmill Street, Mansfield, Ohio 44903.
- Grace Episcopal Church – Located at 41 Bowman Street, Mansfield, Ohio 44903.
- Main Street United Methodist Church – Located at 230 South Main Street, Mansfield, Ohio 44902.
- Mosaic Church – Located at 296 Park Ave West, Mansfield, Ohio 44906.
Mt. Sinai Baptist Church – Located at 275 Grace Street, Mansfield, Ohio 44905.
New Liberty Baptist Church – Located at 2705 Lexington Avenue, Lexington, Ohio 44904.
Salvation Army – Located at 47 South Main Street, Mansfield, Ohio 44902.
Street Timothy Lutheran Church – Located at 1262 Ashland Road, Mansfield, Ohio 44905.
The Salvation Army of Mansfield – Located at 47 South Main Street, Mansfield, Ohio 44902
Volunteers of America – Located at 280 North Main Street, Mansfield, Ohio 44902.

(b) Food pantries serving Shelby and northern Richland County
First Lutheran Church – Located at 33 Broadway Avenue, Shelby, Ohio 44875.
FISH – Located at 29 Walnut Street, Shelby, Ohio 44875.
Shiloh Village Community Center – 26 Mechanics Street, Shiloh, Ohio 44878.
Faith United Methodist Church – 1574 OH-96, Ashland, Ohio 44805.

(c) Food pantries serving central Richland County
Diamond Hills Baptist Church – Located at 647 South Diamond Street, Mansfield, Ohio 44907.
Ridgeway First Church of God – Located at 1380 Park Avenue East, Mansfield, Ohio 44905.
Woodville Grace Brethren Church – Located at 580 Woodville Road, Mansfield, Ohio 44907.

(d) Food pantries serving southern Richland County
Bellville Neighborhood Outreach Center (BNOC) – Located at 84 Main Street, Bellville, Ohio 44813.
First Baptist Church of Bellville – Located at 4534 State Route 13, Bellville, Ohio 44813.
Lucas Community Center – Located at 252 West Main Street, Lucas, Ohio 44843.
Lexington Church of the Cross – Located at 236 Otterbein Drive, Lexington, Ohio 44904.

Collaboration with Third Street Family Health Services
OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital refer patients with mental health and substance abuse issues to Third Street Family Health Services. In addition, three OhioHealth board-certified OB-GYN physicians (James M. Alford, MD; Carolyn A. Chambers, MD; and Edward P. Zarczynski, MD) provide care at Third Street Family Health Services.

Collaboration with Community Health Access Project (CHAP)
The Community Health Access Project (CHAP) is the nationally certified pathways community hub for Richland County. CHAP serves as the central networking center for various community care coordination agencies, which identifies and addresses various social and behavioral health risks using specific pathways. Community health workers help at-risk patients breakdown health-related barriers (Schock, 2016). At-risk individuals are connected by community health workers to primary care, prevention programs, behavioral health and social determinants of health needs, such as housing, food, clothing, skills learning and job opportunities (Community Health Access Project, 2016). OhioHealth, is one of CHAP’s affiliate agency partners (Community Health Access Project, 2016). Two OhioHealth affiliated physicians and two administrative leaders from OhioHealth Mansfield Hospital and OhioHealth Shelby Hospital serve as board members of CHAP.

(CFH 5.2) Strengthen partnership with Mansfield City Schools and other school districts to enable hospitalized students to avail of a tutor or mentor and an individualized education program

FY 2017 and FY 2018
OhioHealth Mansfield Hospital has been fostering active partnerships with Mansfield City Schools for nearly 20 years to ensure that hospitalized students are able to keep up with academic requirements and activities. OhioHealth Mansfield Hospital and Mansfield City Schools deal with student academic problems and issues as they arise. Since the psychiatric unit for adolescents was closed in FY 2017, no students were assisted. In FY 2018, the partnership provided academic assistance to 109 students from the Behavioral Health Unit.

(CFH 5.3) Provide family meetings for all child and youth psychiatric admissions to ensure understanding of medical diagnoses, awareness of risk factors, triggering behaviors, availability of a reliable support system and education on available community agencies, to provide ongoing support and crisis intervention.

FY 2017 and FY 2018
The OhioHealth Mansfield Adolescent Psychiatric Unit was closed during FY 2017. Hence, CFH 5.3 was not implemented during FY 2017. The Unit reopened in October 2017. A total of 109 family meetings were held for each of the patients admitted in the Adolescent Psychiatric Unit.