COMMUNITY HEALTH NEEDS ASSESSMENT REPORT

JOINT TOWNSHIP DISTRICT MEMORIAL HOSPITAL 2013

INTRODUCTION

Grand Lake Health System is a mission-driven nonprofit healthcare provider serving residents of the Grand Lake Region of West Central Ohio since 1953. From multiple centers of excellence and affiliated practices throughout the region – including Joint Township District Memorial Hospital (JTDMH) in St. Marys – we focus on creating personalized care experiences that emphasize communication, education, wellness and prevention to improve the health and quality of life of our families, friends and neighbors living in the community we serve.

Grand Lake Health System and its affiliated health centers are organized as a charitable, non-profit community health system offering a wide range of primary, acute and rehabilitative services to the residents of the Grand Lake region.

The anchor of the Grand Lake Health System is JTDMH. JTDMH opened its doors on May 5, 1953 and today is the main cog of the Grand Lake Health System. JTDMH has grown to a state-of-the-art community hospital including over 750 medical professionals, 12 affiliates and 10 Centers of Excellence. JTDMH's commitment to providing exceptional quality medical care continues.

JTDMH/Grand Lake Health System is the hub of the local health care delivery system in St. Marys and surrounding communities. The non-profit community health system also has a major economic impact on the local community by providing employment to approximately 750 individuals.

THE MISSION of JTDMH is to optimize the health status of those we serve by providing the highest quality, value and service while remaining financially strong.

THE VISION of JTDMH is to be:

- The region's leader and preferred choice for healthcare;
- The most desired place for employment;
- The recognized source for health and wellness; and
- The coordinator of patient services that exceed the scope of our health system.

THE VALUES of JTDMH are:

- Compassion to serve with dignity, concern, trust and kindness
- Respect for our patients, families, communities, and each other
- Stewardship making the best use of our human and economic resources
- Service Excellence anticipating customer needs, continuously improving and consistently exceeding expectations
- Collaboration to work in partnership, internally and externally, to better serve our communities

• Workforce – to value and respect the talented, committed and diverse people who make up our health system

The Grand Lake Health System was awarded the 2009 Ohio Hospital Association's David Hendershot award for rural healthcare services. The Grand Lake Health System maintains an active community outreach program to improve our community health statistics with numerous screening, educational programs and support groups. The Grand Lake Health System was recognized by the American Heart Association for innovation in community wellness. Grand Lake Health System/JTDMH has received numerous other awards and is recognized as the preferred choice for healthcare in the Grand Lake region.

Grand Lake Health System/JTDMH is pleased to present this Community Health Needs Assessment of our community. We wish to thank our staff and community members who participated in the process of reviewing community conditions, identifying and prioritizing community health needs, and recognizing community resources to address the needs.

PRIORITIZED HEALTH NEEDS

The JTDMH Community Health Needs Assessment Steering Committee met on October 7, 2013, to identify and prioritize all significant health needs of the community. The committee reviewed all data collected and community input received in the assessment of the health needs of the Auglaize and Mercer County communities and identified the following significant health needs of the community. Two primary health needs and two secondary health needs were identified. For each primary and secondary health need, participants identified existing resources and collaborating partners available to address the need.

Primary Health Needs	Potential Measures and Resources to Address the Need	Collaborating Partners to Address the Need JTDMH Local newspaper, The Evening Leader	
Obesity	Grand Health Challenge		
	School health fairs • 5 schools annually • Make Believe Hospital	JTDMH Local school districts	
	Arthritis and physical therapy classes Physician practices and patient centered medical home	Council on Aging JTDMH employed physician practices	
	Seniorcise Program	JTDMH Community Outreach Otterbein Retirement Center	
	Cooperative Extension nutrition classes Senior Supper Hour – Nutrition education	The Ohio State University JTDMH Community Outreach Otterbein Retirement Center	
	Health Smart Walk to school program	JTDMH employee wellness Wapakoneta YMCA	

	STEP Program - pedometers	JTDMH	
	Hospital health fairs	JTDMH	
	Diabetic education	JTDMH	
	Prescription Meal Program	Council on Aging JTDMH JTDMH	
	Telestroke Cooperative		
		The Ohio State University	
	STEMI alert	JTDMH	
		St. Rita's Medical Center	
	Telehealth Home Care	Council on Aging	
		Grand Lake Home Health	
	Breast and cervical cancer Program	JTDMH	
		Allen County Health Department	
	WIC	Auglaize and Mercer Health	
		Departments	
	FAST – Signs and symptoms of stroke	JTDMH	
Wellness/	Blood pressure screenings in the	ACCA	
Prevention/	community	AGAPE	
Screenings	,	YMCA	
3 41 4 411111B2		Wagner's	
	Screening and hearing checks	Council on Aging	
	Soldening with memory constant	Local physicians	
	Prostate screening twice annually	JTDMH	
	Sun safety education and screening	JTDMH	
	Health Fair	JTDMH	
	Blood pressure	V123/22	
	Body fat analysis		
	Peripheral Ortonomerical		
	Osteoporosis		
	Dermascan		
	Skin cancer screening		
	Balance		
	Hearing		
	Glucose screening		
	 Foot screening 		
	Eye screening		
	Discounted mammograms	JTDMH	
	Carotid screening	Allen County Health Department	
	Breast and Cervical Cancer Program		
	Patient Centered Medical Home	JTDMH and employed physician practices	
	Immunization clinics	Auglaize and Mercer Health Departments	
		JTDMH	

Secondary Health Needs	Potential Measures and Resources	Collaborating Partners	
Mental Health	Teen screening for suicide	We Care Center	
	Addiction services	Coleman Professional Services	
	Inpatient services	St. Rita's Medical Center	
	Employee assistance program (EAP)	JTDMH employee wellness	
	Bereavement support	Healing Memories	
	Support for miscarriage or loss of a child in the first year	Honoring Angels	
	Counseling services	Foundations of Mercer County Church Community Alcoholics Anonymous ALANON	
	Support for families of mentally ill	NAMI	
	Alzheimer care giver support	Alzheimer support groups	
	Vet to Vet Support Group	Council on Aging	
	Parkinson's support services	JTDMH	
	Stroke support services	JTDMH	
	Diabetic support services	JTDMH	
Access to Care	JTDMH employed physician practices	JTDMH and employed physician practices	
	Home Care and Hospice	Grand Lake Home Health and Hospice	
	Auglaize County Coordinated Transportation Services Find a Ride PASSPORT	Council on Aging	
	Transportation to health care services	Sources Community Network Capabilities, Inc. Auglaize and Mercer County Health Departments	
	Prescription medication abuse	JTDMH Pain Management Center	
	Prescription Medication Compliance	JTDMH Pharmacists	
	Ambulance services	JTDMH Patient Transport	
	Urgent Care	JTDMH Urgent Care Doctors' Urgent Care	
	Telehealth Homecare Telestroke Cooperative	Grand Lake Home Health The Ohio State University	
	STEMI alert	St. Rita's Medical Center	
	Low income and preschool eye screening	Local Optometrists	
	Breast and Cervical Cancer Program	JTDMH Allen County Health Department	
	Immunizations	Auglaize and Mercer County	

Health Departments

HOSPITAL IDENTIFICATION

Name and primary address: 200 St. Clair Street, St. Marys, Ohio 45885

Tax identification number: 34-1623770

Chief Executive Officer: Kevin W. Harlan, President & CEO

Person responsible for report preparation: Kevin W. Harlan

CHNA report complete: October 18, 2013

CHNA report approved by Board: October 23, 2013

CHNA report posted to web site: October 24, 2013

JTDMH is located at 200 St. Clair Street, St. Marys, Auglaize County, Ohio 45885, a rural small town environment dominated by agriculture and small manufacturing. JTDMH provides a full range of acute and outpatient services including a 24-hour emergency room and obstetrical service. Major services include CT and MRI; physical therapy; occupational medicine; cardiac services, urgent care, home health services, hospice, wound care, and vein clinic. JTDMH also operates the following satellite units:

- Grand Lake Family Practice & Pediatrics
 801 Pro Drive, Celina, Mercer County, Ohio 45822
 Services: General practice
- Grand Lake OB/GYN 1067 Hager Street, St. Marys, Auglaize County, Ohio 45885 Services: OB/GYN
- Grand Lake Primary Care
 1040 Hager Street, St. Marys, Auglaize County, Ohio 45885
 Services: General practice
- Miami & Erie Medical Center
 04463 St. RT. 66, Minster, Auglaize County, Ohio 45865
 Services: General practice

Wapakoneta Primary Care
 812 Redskin Trail, Wapakoneta, Auglaize County, Ohio 45895
 Services: General practice

COMMUNITY SERVED

JTDMH's "community served" has been identified as residents of Auglaize and Mercer

Counties, which include the following areas.

County Municipalities	County ZIP Codes	Fiscal Year 2012 Admissions
Auglaize County		1,268
Buckland	45819	
Minster	45865	
New Bremen	45869	
New Hampshire	45870	
New Knoxville	45871	
Saint Johns	45884	
Saint Marys	45885	
Uniopolis	45888	
Wapakoneta	45895	
Waynesfield	45896	
Mercer County		603
Celina	45822	
Chickasaw	45826	
Coldwater	45828	
Fort Recovery	45846	
Maria Stein	45860	
Mendon	45862	
Montezuma	45866	
Rockford	45882	
Saint Henry	45883	
Total Admissions from Service Area		1,871

Source: Zip Code Data Base, July 30, 2013, http://www.zip-codes.com/search.asp

¹Source: Annual Hospital Registration and Planning Report January 1, 2012 – December 31, 2012

The Ohio Department of Health requires each hospital that is registered in Ohio to file an Annual Hospital Registration and Planning Report by March 1 of each calendar year. A review of the patient origin data from the Annual Hospital Registration and Planning Report for JTDMH for 2012 supports the definition of the "community served" as being the community and residents of Auglaize and Mercer Counties, Ohio. Of the 2,430 total admissions to JTDMH in 2012, 1,871, or 77%, reside in Auglaize and Mercer Counties at the time of admission.

Community demographics

Population

Census year 2010 Auglaize County population by age

Age	Male	Female	Total Population	Percent of Total Population
≤19	6,655	6,179	12,834	28%
20-39	5,128	4,995	10,123	22%
40-59	6,734	6,622	13,356	29%
60-79	3,426	3,911	7,337	16%
80+	844	1,455	2,299	5%
All ages	22,787	23,162	45,949	100%

Source: U.S. Census Bureau, 2010 Census

Census year 2010 Mercer County population by age

Age	Male	Female	Total Population	Percent of Total Population
≤19	6,085	5,765	11,850	29%
20-39	4,593	4,275	8,868	22%
40-59	5,893	5,666	11,559	28%
60-79	3,106	3,412	6,518	16%
80+	742	1,277	2,019	5%
All ages	20,419	20,395	40,814	100%

Source: U.S. Census Bureau, 2010 Census

Total population for the community served for census year 2010

County	Total Population	Percent of Total Population
Auglaize	45,949	53%
Mercer	40,814	47%
Total	86,763	100%

Source: U.S. Census Bureau, 2010 Census

Race

Census year 2010 Auglaize County population by race

Race	Percent of Total Population
White	97.8%
Black	.3%
Hispanic/Latino	1.2%
Other	,7%
Total	100%

Source: U.S. Census Bureau, 2010 Census

Census year 2010 Mercer County population by race

Race	Percent of Total Population	
White	97.4%	

Black	.2%
Hispanic/Latino	1.5%
Other	,9%
Total	100%

Source: U.S. Census Bureau, 2010 Census

Projected Population

Projected Auglaize County population change by age

Age	Year:2015		Year:2020	
	Total pop	% change ¹	Total pop	% change ¹
≤ 19	12,130	-5.5%	12,470	-2.8%
20-39	10,340	2.1%	9.850	-2.7%
40-59	12,600	-5.7%	11,430	-14.4%
60-79	8,640	17.8%	9,820	33.8%
80+	2,070	-10.0%	2,040	-11.3%
All ages	45,780	4%	45,610	7%

Source: Ohio Department of Commerce, Office of Strategic Research, http://development.ohio.gov/files/research.

Projected Mercer County population change by age

Age	Year:2015		Year:2020	
	Total pop	% change ¹	Total pop	% change ¹
≤19	11,180	-5.7%	11,140	-3.7%
20-39	9,430	6.3%	9,130	3.0%
40-59	10,720	-7.3%	9,710	-16.0%
60-79	7,570	16.0%	8,790	34.9%
8 0+	2,060	2.0%	1,990	-1.4%
All ages	40,960	.4%	41,030	.5%

Source: Ohio Department of Commerce, Office of Strategic Research, http://development.ohio.gov/files/research.

Socioeconomic Conditions

Socioeconomic measures

Measure	Auglaize County	Mercer County	
Median household income	\$52,018	\$49,719	
Families below poverty level	752	768	

^{1%} change from 2010 census population.

^{1%} change from 2010 census population.

Female head of household with children	867	646
<18		
Birth rate per 1,000 women aged 15-44	556/69.0	535/77.1
Teen birth rate per 1,000 females 15-19	46/29.8	29/19.6
Deaths per 100,000 population	470/1,022.9	400/980.1
Marriages per 1,000 population	266/5.8	276/6.8
Divorces per 1,000 population	159/3.5	116/2.8
Educational attainment (age ≥25)		
No high school diploma	2,980/9.7%	2,938/10.9%
High school graduate or equivalency	13,790/44.8%	13,152/48.7%
Some college – no degree	6,307/20.5%	4,607/17.1%
Associate's degree	2,755/8.9%	2,374/8.8%
Bachelor's degree	3,018/9.8%	2,354/8.7%
Master's degree or higher	1,946/6.3%	1,555/5.8%
Adults with employer-based insurance	67.2%	65.9%
Children with employer-based insurance	81.8%	82.5%

Source: Ohio Department of Development 2010 census data, http://development.ohio.gov/files/research.

PROCESS AND METHODS USED TO CONDUCT THE COMMUNITY HEALTH NEEDS ASSESSMENT

<u>Information and data</u> was collected by the consultant from web sources, national sources as well as state and local governmental public health departments, from July, 2013 through August, 2013. The data sources, dates, and specific data reviewed during the needs assessment process are provided in this report.

Auglaize County Health Assessment 2012 was conducted by the Healthy Communities Foundation of the Hospital Council of Northwest Ohio with funding provided by the Auglaize County Health Department. Data for the assessment was collected through surveys of health status and health behavior of community residents. The report provides a "snap shot" of county residents' current health and health behaviors. Secondary data, data collection, and report development was provided by Healthy Communities Foundation of the Hospital Council of Northwest Ohio. Data collection and analysis was provided through the University of Toledo. The Assessment was commissioned by the Auglaize County Health Assessment Steering Committee. The Auglaize County Health Assessment Steering Committee met in January, 2012 to identify survey questions. The adult survey contained 142 items and the adolescent survey contained 75 items. The survey was conducted by the Hospital Council of Northwest Ohio during the spring of 2012. Surveys were distributed in the spring of 2012 to community members randomly selected, determined by a random sample of mailing addresses of adults in Auglaize County. A sample size of at least 380 was needed to ensure a 95% confidence level. A response rate of 50% was achieved with 383 surveys returned completed.

Adolescents (ages 12 through 18) were surveyed through a random selection of schools and grades. Passive permissions slips were mailed home to parents of any student whose class was

selected. The adolescent survey was conducted during the spring of 2012. A response rate of 90% was achieved with 447 surveys completed.

The Auglaize County Health Assessment Steering Committee met again during the summer of 2012 to review the draft report and discuss the survey findings. A community presentation of the Auglaize County Health Assessment 2012 was held on September 25, 2012 and the report was released throughout the county.

Organizations participating on the Steering Committee as well as the populations the organization represents are identified later in this report. Information and health needs identified in the Auglaize County Health Assessment 2012 were considered in assessing the community health needs for this Community Health Needs Assessment.

Mercer County 2012 Community Health Assessment was conducted by the Mercer County – Community Organizations Linking Together (COLT) and funded by the Mercer County – Celina City Health Department, Mercer Health Community Hospital and Gateway Outreach Center. Project Management, secondary data, data collection, and report development was provided by Healthy Communities Foundation of the Hospital Council of Northwest Ohio. Data collection and analysis was provided by the University of Toledo. The Assessment provides a "snap shot" of the health-related data for Mercer County adults (age 19 and older) who participated in a county-wide health assessment survey.

During the summer of 2012, the Project coordinator from the Hospital Council of NW Ohio conducted a series of meetings with the planning committee from Mercer County to develop a bank of potential survey questions. Based on input from the Mercer County planning committee, a draft of 91 survey items was prepared and approved. The surveys were randomly distributed to Mercer County residents age 19 and over during the summer of 2012. A sample size of at least 375 adults was needed to ensure a 95% confidence level. A response rate of 51% was achieved with 496 surveys completed. COLT reviewed the survey findings during the summer of 2012. A final report was prepared and presented in the fall of 2012 and distributed throughout the county.

Organizations participating in COLT as well as the populations the organization represents are identified later in this report. Information and health needs identified by the Mercer County 2012 Community Health Assessment were considered in assessing the community health needs for this Community Health Needs Assessment.

Grand Lake Health System/Joint Township District Memorial Hospital Community Health Assessment 2010-2011 (JTDMH Assessment 2010-2011) was developed as a summary of the Auglaize County Health Assessment, a comprehensive overview of the health status of the county residents, to aid in development of JTDMH's strategic plan. The JTDMH Assessment 2010-2011 was adopted by the JTDMH Board of Directors on December 20, 2010. While no external organizations participated in development of the JTDMH Assessment 2010-2011, many community partners contributed to the Auglaize County Health Assessment, from which this document was based. Organizations participating in the Auglaize County Health Assessment are identified later in this report. Information and health needs identified by the JTDMH

Assessment 2010-2011 were considered in assessing the community health needs for this Community Health Needs Assessment.

JTDMH Community Health Needs Assessment Steering Committee met on October 7, 2103, to assess the significant health needs of the community, prioritize those significant health needs, and identify potential measures and resources and collaborating partners available to address the significant health needs identified. Meeting participants represented the broad interests of the community, including those with special knowledge of and expertise in public health.

Participants reviewed all data and information identified in this report, including the three previous health assessments identified in this report, in order to assess the health needs of the community. Participants identified the health needs of the community by considering those requisites for the improvement or maintenance of health status in the community using all facts and circumstances presented. Participants considered the severity of the need, effectiveness of intervention, health disparities associated with the need, and importance the community places on addressing the need. From this list of health needs, four overarching significant health needs were identified that encompassed the other needs. Each health need was listed under the appropriate significant health need. By addressing the significant health need, it was noted that each of the health needs listed in each category would also be addressed. The four significant health needs were then prioritized into "primary" and "secondary" significant health needs. Two of the significant health needs, obesity and wellness/prevention/screenings, were identified as primary health needs. The two remaining significant health needs, mental health and access to care, were identified as secondary health needs. The final step was to identify existing resources and collaborating partners available in the community to address the significant health needs identified.

Information gaps

No informational gaps were identified during the preparing to this Community Health Needs Assessment.

Information and data sources

Zip Code Data Base, July 30, 2013, http://www.zip-codes.com/search.asp

U.S. Census Bureau, 2010 Census

Ohio Department of Commerce, Office of Strategic Research,

http://development.ohio.gov/files/research.

Ohio Department of Development 2010 census data,

http://development.ohio.gov/files/research/C1006.pdf.

Ohio Department of Health Annual Hospital Registration and Planning Report Statistical Information January 1, 2012 – December 31, 2012

Ohio Department of Health, Health Care Facilities in Auglaize and Mercer Counties, July 30, 2013, http://publicapps.odh.ohio.gov/eid/Provider_Search.aspx.

Ohio Association of Community Health Centers, July 30, 2013,

https://m360.ohiochc.org/frontend/search.aspx?cs=635

<u>Health Resources and Services Administration</u>, Health Professional Shortage and Medically Underserved Areas, July 30, 2013, http://hpsa.find.hrsa.gov.

New England Journal of Medicine: Recruiting Physicians Today Vol.8 No.6 Nov./Dec. 2000

County Health Rankings & Roadmaps, Robert Wood Johnson Foundation,

http://www.countyhealthrankings.org/app#/ohio/2013.

Ohio Department of Health, Primary Care Office, Bureau of Community Health Services Ohio Primary Care Workforce Profile 2008 Area Resource File, September 2010

Ohio State Medical Board, July 31, 2013, Physician disciplines in Auglaize and Mercer Counties Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008. http://www.healthyohioprogram.org/comprofiles.pdf.

Ohio Department of Mental Health, August 15, 2013,

http://mha.ohio.gov/Default.aspx?tabid=347

The Annie E. Casey Foundation, Kids Count Data Center, July 30, 2013,

http://datacenter.kidscount.org/data/bystate/chooseindicator.aspx?state=OH&cat=1540

Auglaize County Health Assessment 2012

Mercer County 2012 Community Health Assessment

Grand Lake health System Joint Township District Memorial Hospital Community Health Assessment 2010-2011

Community input sources representing the broad interests of the community

Auglaize County Health Assessment 2012

Participating Organization	Groups Represented		
Auglaize County Health Department	Minority		
(Expertise in public health)	Low-income		
	Medically underserved		
	• Women		
	Children		
	Uninsured/underinsured		
	Geographic – rural communities		
Auglaize County Commissioners	Minority		
	Low-income		
	Medically underserved		
	• Women		
	Children		
	Uninsured/underinsured		
	 Geographic – rural communities 		
JTDMH	Residents of Auglaize and Mercer Counties		
Auglaize County Development	Residents with Developmental disabilities		
Disabilities – Early Intervention	Children		
Auglaize County Head Start	Low-income		
	Children		

United Way of Auglaize County	Minority
	Low-income
	Medically underserved
	Women
	Children
	Uninsured/underinsured
Auglaize County Family & Children	Low-income
First	Women
	Children
	Uninsured/underinsured
Brain Injury Association of Ohio	Disabled
YW Child Care Connection	Children
Auglaize County Juvenile Court	Children
Auglaize County Educational Service	Children
Center	
Auglaize County We Care	Residents with mental health needs
Wapakoneta City Schools	Children
Auglaize County Council on Aging	Aged
Auglaize County Job and Family	Low income
Services (Expertise in public health)	Uninsured/underinsured
Mental Health and Recovery Services	Residents with mental health needs
Board	
Auglaize County Council on Aging	Aged
Auglaize County DD	Residents with developmental disabilities
Girl Scouts of Western Ohio	Children
Adult and adolescent Auglaize	All adult and adolescent residents of Auglaize
County Residents – randomly selected	County

Mercer County 2012 Community Health Assessment

Participating Organization	Groups Represented		
Mercer County-Celina City Health	Minority		
District (Expertise in public health)	Low-income		
	Medically underserved		
	• Women		
	Children		
	Uninsured/underinsured		
	 Geographic – rural communities 		
Mercer County Board of	Residents with developmental disabilities		
Developmental Disabilities			
Foundations Behavioral Health	Residents with mental health needs		
Services			
Veterans Representative; One Stop	Veterans		
Mercer County Job and Family	Low-income		
Services – Children's Services	Children		

(Expertise in public health)	Uninsured/underinsured		
Mercer County Commissioners	Minority		
	Low-income		
	Medically underserved		
	Women		
	Children		
	Uninsured/underinsured		
	Geographic – rural communities		
Help Me Grow	Low-income		
	Children		
Serving Friends and Family	Low-income		
City of Celina	Minority		
	Low-income		
	Medically underserved		
	Women		
	Children		
	Uninsured/underinsured		
	Geographic – rural communities		
Head Start	Low-income children		
Ohio State University Extension	Low-income		
· ·	Women		
	Children		
Mercer County Council on Aging	Aged		
Our Home Family Resource Center	Low-income		
	Women		
	Children		
Workforce Investment Act	Low-income		
Regional Office of Department of	Children		
Youth Services			
Mercer County Educational Service	Children		
Center			
YWCA Child Care Resource	Children		
Community Mental Health Advocate	Residents with mental health needs		
Tri-County ADAMH Board	Residents with mental health needs		
Mercer County Judge	Residents experiencing the judicial system		
Mercer Health Community Hospital	Mercer County residents		
Mercer County Council on Aging	Aged		
Mercer County Sheriff Office	Mercer County residents		
Mercer County Pastoral Association	Mercer County residents		
Adult Mercer County Residents –	All Mercer County adult residents		
randomly selected			

Auglaize County Health Assessment from which the JTDMH Assessment 2010-2011 is based

Participating Organization Groups Represented	
Auglaize County Health Department	Minority
(Expertise in public health)	Low-income
	Medically underserved
	Women
	Children
	Uninsured/underinsured
	Geographic – rural communities
Ohio State University Extension	Low-income
Auglaize Office	Women
	Children
JTDMH	Auglaize County residents
Auglaize County MR/DD – Early	Residents with developmental disabilities
Intervention	Children
Auglaize County Head Start	Low-income
	Children
Auglaize County Family and Children	Low-income
First Council	Women
	Children
	Uninsured/underinsured
United Way of Auglaize County	Minority
	Low-income
	Medically underserved
	Women
	Children
	Uninsured/underinsured
	Geographic – rural communities
Wapakoneta City Schools	Children
Auglaize County Juvenile Court	Children
Wapakoneta City Council	Residents of Wapakoneta
Wapakoneta Family YMCA	Low-income
	Children
Auglaize County We Care Center	Residents with mental health needs
First English Lutheran Church	Church members
Auglaize County Educational Service	Children
Center	
Auglaize County Council on Aging	Aged
Auglaize County Department of Job	Low-income
and Family Services (Expertise in	Children
public health)	Uninsured/underinsured
Mental Health and Recovery Services	Residents with mental health needs
Board	
Auglaize County Sheriff	Auglaize County residents

Auglaize County Commissioner	Minority Low-income Medically underserved Women Children Uninsured/underinsured Geographic – rural communities		
YW Child Care Connection	Children		
Auglaize County Board of MR/DD	Residents with developmental disabilities		

Written Comments

No written comments regarding assessment of the health needs of Auglaize and Mercer County residents were received by JTDMH at the time of writing of this report.

The JTDMH Community Health Needs Assessment Steering Committee identified significant

health needs and prioritized those needs during a meeting held October 7, 2013.

Participating Organization	Groups Represented	
Auglaize County Health Department	Local government public health departme Minority Low-income Medically underserved Uninsured/underinsured/financial Geographic – rural communities Language barriers	
Mercer County Health Department	Local government public health department Minority Low-income Medically underserved • Uninsured/underinsured/financial • Geographic – rural communities • Language barriers	
Auglaize County Council on Aging	Elderly population of Auglaize County	
JTDMH	All residents of Auglaize and Mercer	
 Patient care services Hospital Foundation and Grand Lake Home Health / Hospice Employed physician practices Community Outreach Administration 	Counties	

INFORMATION AND DATA CONSIDERED IN IDENTIFYING POTENTIAL NEEDS

Information and data review

JTDMH Inpatient Services

Service	Admits	Patient Days	
Adult med/surg	1,326	4,060	
Adult special care	142	398	
Obstetrics level 1	262	588	
Newborn level 1	245	499	
Pediatric general	38	62	
Physical rehabilitation	47	592	
Special skilled nursing	370	3,314	
Total	2,430	9,512	

Source: Ohio Department of Health Annual Hospital Registration and Planning Report Statistical Information January 1, 2012 through December 31, 2012

JTDMH Outpatient Facilities

Outpatient Facility

- Grand Lake Family Practice & Pediatrics
 801 Pro Drive, Celina, Mercer County, Ohio 45822
 Services: General practice
- Grand Lake OB/GYN 1067 Hager Street, St. Marys, Auglaize County, Ohio 45885 Services: OB/GYN
- Grand Lake Primary Care
 1040 Hager Street, St. Marys, Auglaize County, Ohio 45885
 Services: General practice
- Miami & Erie Medical Center
 04463 St. RT. 66, Minster, Auglaize County, Ohio 45865
 Services: General practice
- Wapakoneta Primary Care
 812 Redskin Trail, Wapakoneta, Auglaize County, Ohio 45895
 Services: General practice

Source: Ohio Department of Health Annual Hospital Registration and Planning Report Statistical Information January 1, 2012 – December 31, 2012

Other health care facilities within Auglaize and Mercer Counties

Service	Auglaize County Number of Providers	Mercer County Number of Providers	
Ambulatory surgery facility	0	0	
Freestanding birthing center	0	0	
Community mental health center ¹	2	2	
Outpatient rehabilitation center	0	0	
Freestanding dialysis center	0	1	
End stage renal disease	0	111	
Exempt family birthing center	0	0	
Health maintenance organization	0	0 1 0 1	
Home health agency	4 + 1 pending		
Hospice	1		
Hospitals	1		
Maternity unit	1	1	
MR/DD facility	1	1 + 1 pending	
Nursing home	9	6	
Outpatient physical therapy center / speech pathology	0	0	
Portable x-ray supplier	0	0	
Rehabilitation center	0	0	
Residential care facility	7	6	
Rural health clinic	0	0	

Source: Ohio Department of Health, July 30, 2013, http://publicapps.odh.ohio.gov/eid/Provider_Search.aspx. Source: Ohio Department of Mental Health, August 15, 2013, http://mha.ohio.gov

Federally Qualified Health Centers – There are no Federally Qualified Health Centers in Auglaize or Mercer Counties

Source: Ohio Association of Community Health Centers, July 30, 2013, https://m360.ohiochc.org/frontend/search.aspx?cs=635

Health Professional Shortage Areas and Medically Underserved Areas

Discipline	Auglaize County Current FTE	Auglaize County FTE Shortage	Mercer County Current FTE	Mercer County FTE Shortage
Medical professional shortage area:				
None				
Dental professional shortage area:				
None				
Mental health professional shortage area:				
Catchment area 62 – Auglaize County	2	1		
Catchment area 61 – Mercer County			2	3

Medically Underserved Areas:		
None		

Source: Health Resources and Services Administration, July 30, 2013, http://hpsa.find.hrsa.gov.

Physician Disciplines

Discipline	Physicians practicing in Auglaize County	#/100,000 pop. in Auglaize County	Physicians practicing in Mercer County	#/100,000 pop. In Mercer County	#/100,000 pop. in Ohio
Practicing Primary care	36	78	26	63	106
Practicing Non-primary care	17	37	11	27	158.7
Active family/general practice	24	52	15	36	109.4
Active general internal	6	13	4	9	100.5
Active pediatrics	3	6	4	9	50.3
Active ob/gyn	3	6	3	7	35.5

Source: Ohio Department of Health, Primary Care Office, Bureau of Community Health Services Ohio Primary Care Workforce Profile 2008 Area Resource File, September 2010

Discipline	Physicians practicing in Auglaize County	Phys/100,000 in Auglaize County	Physicians practicing in Mercer County	Phys/100,000 in Mercer County	Recommended Phys/100,000 ²
Addiction					
Allergy/immunology					1.31
Anatomic / clinical pathology			1	2	
Anesthesiology	3	6	3	7	
Cardiovascular disease	2	4	2	5	
Dermatology					3.30
Diagnostic radiology					
Emergency med / critical care	3	6			4.55
Family medicine / family practice	15	32	19	47	
Gastroenterology					4.27
General practice	2	4	2	5	
General surgery	3	6			
Geriatrics					
Hematology / oncology					2.02

Internal Medicine	2	4	4	9	
Manipulative medicine					
Nephrology					1.02
Neurology			1	2	2.47
OB/GYN	2	4	3	7	
Occupational medicine	2	4	1	2	
Ophthalmology	1	2			4.83
Orthopedic	1	2	4	9	6.63
Otolaryngology					3.04
Palliative					
Pediatrics	4	8	2	5	
Pediatric cardiology			1	2	
Podiatry	2	4	3	7	
Psychiatry					
Pulmonary			1	2	1.37
Radiology			1	2	
Rheumatology					.79
Urology			1	2	3.15

Source: Ohio State Medical Board, July 31, 2013, Physician disciplines in Auglaize and Mercer Counties ²New England Journal of Medicine: Recruiting Physicians Today Vol.8 No.6 Nov./Dec. 2000

Auglaize and Mercer County profiles from ODH county profile report year 2008:

Leading causes of death

		Auglaize	County	O	hio
Cause	Rank	# of Deaths	Age Adj. Rate / 100,000 Pop	# of Deaths	Age Adj. Rate / 100,000 Pop
Diseases of the heart	1	141	223.2	28,617	225.3
Cancer	2	103	185	24,825	198.8
Stroke	3	30	48.3	6,183	48.6
Chronic lower respiratory disease	4	26	43.8	6,170	49.2
Unintentional injury	5	18	32.9	4,473	37.6
Alzheimer's disease	6	17	25.3	3,321	25.6
Diabetes Mellitus	7	16	26.7	3,717	29.7
Influenza and pneumonia	8	12	17.5	2,191	17.2
Nephritis, nephritic	9	8	13.3	1,834	14.5

syndrome and nephrosis					
Septicemia	10	4	8.2	1,399	11.2

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize County 2008. http://www.healthyohioprogram.org/comprofiles/

Leading causes of death

		Mercer	County	Ol	hio
Cause	Rank	# of Deaths	Age Adj. Rate / 100,000 Pop	# of Deaths	Age Adj. Rate / 100,000 Pop
Diseases of the heart	1	127	250.6	28,617	225.3
Cancer	2	90	190.9	24,825	198.8
Stroke	3	31	60.9	6,183	48.6
Unintentional injury	4	21	49.4	4,473	37.6
Chronic lower respiratory disease	5	18	36.3	6,170	49.2
Diabetes mellitus	6	13	26.4	3,717	29.7
Alzheimer's disease	7	11	21.7	3,321	25.6
Nephritis, nephritic syndrome and nephrosis	8	8	16.2	1,834	14.5
Influenza and pneumonia	9	5	9.4	2,191	17.2
Septicemia	10	4	9.2	1,399	11.2

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Mercer County 2008. http://www.healthyohioprogram.org/comprofiles/

Risk factor behaviors

Risk Factor Behavior	Auglaize County	Mercer County	Ohio
Heavy drinking	6.4%	6.4%	5.4%
Cigarette smoking	21.7%	21.6%	23.6%
Smokeless tobacco	2.7%	2.7%	2.7%
<5 fruits/veges/day	80.5%	80.5%	78.4%
Lack of physical activity	24.3%	24.4%	24.2%
Overweight	30.1%	36.6%	35.9%
Obese	27.8%	27.8%	26.3%

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comprofiles/

Heart disease mortality

	Auglaize County Rate / 100,000 Population	Mercer County Rate / 100,000 Population	Ohio Rate / 100,000 Population
Total	223.2	250.6	225.3
Age:			
<24	0.0	0.0	1.9
25-49	21.0	32.3	34.9
50-64	154.4	168.5	188.8
≥ 65	1,810.5	1,862.7	1,526.4

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comprofiles/

Stroke mortality

	Auglaize County Rate / 100,000 Population	Mercer County Rate / 100,000 Population	Ohio Rate / 100,000 Population	
Total	48.3	60.9	48.6	
Age:				
<24	2.1	0.0	0.5	
25-49	2.1	2.5	5.2	
50-64	28.4	33.7	27.2	
≥ 65	391.1	482.5	353.7	

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comprofiles/

Cholesterol and blood pressure awareness

	Auglaize County	Mercer County	Ohio
Had cholesterol checked in past 5 years:			
Male	71.8%	71.8%	71.0%
Female	76.6%	76.6%	75.3%
All	74.3%	74.3%	73.2%
Recognize all 5 symptoms of heart attack:			
Male	31.5%	31.5%	31.0%
Female	43.7%	43.7%	42.6%
All	37.6%	37.6%	37.0%
Recognize all 5 symptoms of a stroke:			
Male	36.7%	36.7%	41.1%
Female	51.4%	51.4%	48.2%
All	44.4%	44.4%	44.6%

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comprofiles/

Cancer incidence and mortality

		Incidence			Mortality		
Cancer Site / Type	Auglaize County Rate / 100,000 pop.	Mercer County Rate / 100,000 pop.	Ohio Rate / 100,000 population	Auglaize County Rate / 100,000 pop.	Mercer County Rate / 100,000 pop.	Ohio Rate / 100,000 population	
All sites	441.4	454.5	465.1	183.0	187.8	203.3	
Breast (female)	120.8	117.9	121.9	28.6	27.6	27.5	
Cervix	4.6	15.0	7.9	N/A	No rate	2.4	
Colon and Rectum	55.7	60.3	52.9	17.7	19.3	20.6	
Lung and Bronchus	64.6	61.5	75.0	49.9	49.7	60.3	
Melanoma	21.6	28.4	17.0	4.0	3.2	2.6	
Prostate	112.7	119.5	145.7	24.2	26.4	27.8	

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comprofiles/

Cancer screening behavior

	Auglaize / Mercer County			Ohio		
	Male	Female	All	Male	Female	All
PAP test in last 3 years (≥ 18)	N/A	79.9% / 79.9%	N/A	N/A	88.8%	N/A
Mammography in past 2 years (≥ 40)	N/A	75.5% / 75.5%	N/A	N/A	79.1%	N/A
Colonoscopy in past 5 years (≥50)	39.3% / 39.5%	40.5% / 40.5%	40.0% / 40.1%	59.2%	52.6%	55.7%
Prostate – specific Antigen in past 5 years (≥50)	58.5% / 50.9%	N/A	N/A	57.5%	N/A	N/A
Digital rectal exam in past year (≥ 50)	45.9% / 45.8%	N/A	N/A	57.5%	N/A	N/A

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comproliles/

Diabetes mortality

	Auglaize / M	ercer County	Ohio		
Diabetes Mortality	# Deaths	Rate/100,000	# Deaths	Rate/100,000	
Age adjusted:					
Male	7/4	31.1 / 19.7	1,812	35.3	
Female	9/9	22.6 / 30.5	1,905	25.6	
All residents	16 / 13	26.7 / 26.4	3,717	29.7	
Age specific:					

23

≤24	0/0	0.0 / 0.0	9	0.2
25-49	<1/0	2.1 / 0.0	222	5.5
50-64	2/2	28.4 / 24.1	687	33.9
≥ 65	13 / 11	193.1 / 190.8	2,799	183.2

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008. http://www.healthyohioprogram.org/comprofiles/

Diabetes management behaviors

Behaviors	Auglaize / Mercer County	Ohio	
Annual dilated-eye exam	71.7% / 71.7%	70.3%	
Daily self-monitoring of blood glucose	64.6% / 64.6%	63.0%	
Annual foot exam	65.5% / 65.5%	67.4%	
Annual doctor visit	90.8% / 90.8%	89.4%	
Daily self-exam of feet	65.6% / 65.6%	66.0%	
2+ A1c tests in past year	71.1% / 71.1%	72.9%	
Attended diabetes self-management class	62.0% / 62.0%	55.0%	
Annual influenza vaccine	53.7% / 53.7%	57.5%	
Ever had pneumococcal vaccine	48.7% / 48.7%	52.0%	

Source: Ohio Department of Health, Healthy Ohio Community Profiles, __ County 2008.

http://www.healthyohioprogram.org/comprofiles/

Arthritis

Estimated Prevalence	Auglaize / Mercer County	Ohio
Male	28.3% / 28.6%	27.3%
Female	37.4% / 37.7%	35.9%
All residents	33.0% / 33.2%	31.3%

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comprofiles/

Unintentional fatal injuries and falls

	Auglaize / M	ercer County	Ohio	
Unintentional Fatal Injuries	# Deaths	Rate/100,000	# Deaths	Rate/100,000
Age adjusted:				
Male	12 / 13	352.1 / 65.7	2,775	51.3
Female	6/8	19.0 / 32.4	1,698	25.2
All residents	18 / 21	32.9 / 49.4	4,473	37.6
Age specific:				
≤ 24	3/6	20.8 / 40.3	714	18.3
25-49	4/5	23.1 / 37.3	1,524	38.0
50-64	1/3	12.2 / 38.5	711	35.0
≥ 65	10 / 8	140.0 / 129.0	1,524	99.8
Unintentional Fatal				

Falls				
Age adjusted:				
Male	1/2	4.7 / 11.7	421	8.6
Female	1/3	2.8 / 8.0	400	5.0
All residents	2/5	3.8 / 9.7	821	6.5
Age specific:				
≤ 24	0/0	0.0 / 0.0	11	0.3
25-49	0/0	0.0 / 0.0	51	1.3
50-64	0/1	0.0 / 9.6	99	4.9
≥ 65	2/4	33.8 / 72.0	661	43.3

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comprofiles/

Unintentional fatal poisonings

	Auglaize / M	Auglaize / Mercer County		nio
	# Deaths	Rate/100,000	# Deaths	Rate/100,000
Age adjusted:				
Male	2/1	9.3 / 5.4	733	13.0
Female	1 / <1	2.5 / 2.0	379	6.5
All residents	3/1	5.4 / 3.8	1,112	9.7
Age specific:				
≤ 24	0/0	0.0 / 0.0	115	3.0
25-49	1/1	8.4 / 9.9	735	18.3
50-64	0/0	0.0 / 0.0	221	10.9
≥ 65	1/0	10.3 / 0.0	41	2.7

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comprofiles/

Unintentional motor vehicle traffic crashes

	Auglaize / M	ercer County	Oh	io
	# Deaths	Rate/100,000	# Deaths	Rate/100,000
Age adjusted:				
Male	5/7	23.5 / 34.1	904	16.2
Female	2/3	9.2 / 15.3	416	6.8
All residents	8 / 10	15.3 / 25.4	1,321	11.4
Age specific:				
≤24	3/5	16.6 / 33.6	370	9.5
25-49	2/3	10.5 / 19.9	506	12.6
50-64	1/2	8.1 / 24.1	217	10.7
≥ 65	3/1	38.6 / 16.8	228	14.9

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comprofiles/

Suicide

	Auglaize / M	Auglaize / Mercer County		iio
	# Deaths	Rate/100,000	# Deaths	Rate/100,000
Age adjusted:				
Male	5/3	19.9 / 12.8	1,053	18.8
Female	0 / <1	0.0 / 1.7	266	4.4
All residents	5/3	9.1 / 7.2	1,319	11.3
Age specific:				
≤ 24	1/1	4.2 / 9.0	192	4.9
25-49	2/1	4.2 / 7.5	616	15.3
50-64	1 / <1	12.2 / 4.8	312	15.4
≥ 65	1 / <1	19.3 / 5.6	200	13.1

Source: Ohio Department of Health, Healthy Ohio Community Profiles, Auglaize and Mercer Counties 2008 http://www.healthyohioprogram.org/comprofiles/

Child health ages 1-19

Rank	Leading Causes of Death for Ohio Residents Aged 1-19	Total # of Deaths	Percent
1	Unintentional injuries	1,154	41.5%
	 Motor vehicle traffic 	• 678	• 58.8%
	Drowning	• 108	• 9.4%
	Poisoning	• 89	• 7.7%
	Fire/Burn	• 78	• 6.8%
	 Suffocation 	• 42	• 3.6%
2	Homicide	267	9.59%
3	Suicide	228	8.19%
4	Cancer	226	8.12%
5	Congenital Anomalies	139	4.99%
6	Heart Disease	103	3.70%
7	Influenza and Pneumonia	36	1.29%
8	Septicemia	28	1.01%
9	Cerebrovascular	19	0.68%
10	Benign Neoplasms	18	0.65%
	All Others	566	20.33%
	All Deaths	2,784	N/A

Source: Ohio Department of Health, Healthy Ohio Community Profiles, __ County 2008 http://www.healthyohioprogram.org/comprofiles/

Kids Count Data Center

Measure	Auglaize County	Mercer County	Ohio
2010 Child population <18	11,666	10,773	
2010 Race:			
White	96.2%	95.8%	

Black	.3%	.3%	
Asian	.5%	.5%	
Hispanic	2.1%	2.6%	
2010 Children in poverty	13.2%	13.2%	
2010 Children receiving free/reduced price lunch	31.9%	24.8%	
2010 Children receiving SNAP (food stamps)	18%	14%	
2010 Children in publically funded childcare	304	334	
2010 Students graduating high school	98%	98%	
2010 Births to adolescents	13	9	
2010 Infants born at low birth weight	5.6%	5.9%	
2008 Uninsured children	4%	2.9%	4%
Children without dental coverage	15.6%	20.9%	
Children without vision coverage	23.3%	41.4%	
Children without mental health coverage	11.4%	24.3%	
Children without prescription drug coverage	5.6%	15.3%	
2008 Children who have never visited a dentist	18.1%	18.7%	12.4%
2010 Third graders overweight and obese	31.6%	32.5%	34.7%
2010 Food insecure children	31.6%	32.5%	34.7%
2009 Mothers not receiving first trimester prenatal	17%	16.1%	30.3%
care			
Children abused and neglected			
2010	120	63	
2011	108	59	
2012	85	72	

Source: The Annie E. Casey Foundation, Kids Count Data Center, July 30, 2013 http://datacenter.kidscount.org/data/bystate/chooseindicator.aspx?state=OH&cat=1540

Auglaize County Health Ranking

	Auglaize County	Error Margin	Ohio	National Benchmark*	Trend	Rank (of 88)
Health Outcomes						15
Mortality						23
Premature death	6,431	5,607-7,255	7,457	5,317	=	
Morbidity						10
Poor or fair health	12%	7-20%	15%	10%		
Poor physical health days	3.0	1.7-4.3	3.6	2.6		
Poor mental health days	3.4	2.0-4.7	3.8	2.3		
Low birthweight	6.5%	5.7-7.2%	8.6%	6.0%		
Health Factors						11
Health Behaviors						20

	Auglaize County	Error Margin	Ohio	National Benchmark*	Trend	Rank (of 88)
Adult smoking	15%	10-23%	22%	13%		
Adult obesity	35%	29-41%	30%	25%	1=	
Physical inactivity	26%	21-32%	27%	21%	 	
Excessive drinking	15%	10-22%	18%	7%		
Motor vehicle crash death rate	17	13-22	11	10		
Sexually transmitted infections	220		422	92		
Teen birth rate	33	30-36	38	21		
Clinical Care						17
Uninsured	13%	12-15%	14%	11%		
Primary care physicians**	1,641:1		1,348:1	1,067:1		
Dentists**	2,905:1		1,928:1	1,516:1		
Preventable hospital stays	61	55-68	79	47	=	
Diabetic screening	87%	79-95%	83%	90%	*	
Mammography screening	58%	50-65%	63%	73%		
Social & Economic Factors						8
High school graduation**	95%		78%			
Some college	59%	54-64%	61%	70%		
Unemployment	7.4%		8.6%	5.0%	**	
Children in poverty	14%	10-17%	24%	14%	=	
Inadequate social support	23%	15-34%	20%	14%		
Children in single-parent households	21%	17-25%	34%	20%		
Violent crime rate	40		332	66		
Physical Environment						27
Daily fine particulate matter	13.4	13.1-13.6	13.4	8.8		
Drinking water safety	0%		2%	0%		
Access to recreational facilities	7		10	16		
Limited access to healthy foods**	1%		6%	1%		
Fast food restaurants	57%		55%	27%		

^{* 90}th percentile, i.e., only 10% are better.

** Data should not be compared with prior years due to changes in definition.

Note: Blank values reflect unreliable or missing data

Source: County Health Rankings & Roadmaps, Robert Wood Johnson Foundation, http://www.countyhealthrankings.org/app#/ohio/2013/athens/county/outcomes/overall/snapshot/by-rank.

Mercer County Health Ranking

	Mercer County	Error Margin	Ohio	National Benchmark*	Trend	Rank (of 88)
Health Outcomes						6
Mortality						9
Premature death	5,953	5,084-6,823	7,457	5,317	≈	
Morbidity						2
Poor or fair health			15%	10%		
Poor physical health days	2.1	1.5-2.7	3.6	2.6		
Poor mental health days	2.8	1.4-4.3	3.8	2.3		
Low birthweight	5.0%	4.3-5.7%	8.6%	6.0%		
Health Factors						5
Health Behaviors						6
Adult smoking	15%	9-23%	22%	13%		
Adult obesity	28%	22-34%	30%	25%	*	
Physical inactivity	27%	21-34%	27%	21%	*	
Excessive drinking			18%	7%		
Motor vehicle crash death rate	18	14-24	11	10		
Sexually transmitted infections	113		422	92		
Teen birth rate	27	24-30	38	21		
Clinical Care						39
Uninsured	14%	12-15%	14%	11%		
Primary care physicians**	2,148:1		1,348:1	1,067:1		
Dentists**	3,751:1		1,928:1	1,516:1		
Preventable hospital stays	65	57-72	79	47	≈	
Diabetic screening	78%	70-86%	83%	90%		
Mammography screening	62%	52-71%	63%	73%		
Social & Economic Factors						4

^{* 90}th percentile, i.e., only 10% are better.

^{**} Data should not be compared with prior years due to changes in definition. Note: Blank values reflect unreliable or missing data

	Mercer County	Error Margin	Ohio	National Benchmark*	Trend	Rank (of 88)
High school graduation**	97%		78%			
Some college	54%	50-59%	61%	70%		
Unemployment	5.9%		8.6%	5.0%	*	
Children in poverty	12%	9-16%	24%	14%	 ≈	
Inadequate social support			20%	14%		
Children in single-parent households	17%	13-21%	34%	20%		
Violent crime rate	91		332	66		
Physical Environment						5
Daily fine particulate matter	13.2	13,0-13.4	13.4	8.8		
Drinking water safety	0%		2%	0%		
Access to recreational facilities	10		10	16		
Limited access to healthy foods**	2%		6%	1%		
Fast food restaurants	46%		55%	27%		
* 90th percentile, i.e., only 10% are be ** Data should not be compared with p Note: Blank values reflect unreliable o	rior years		es in defin	ition.		2013

2013

Note: Blank values reflect unreliable or missing data

Source: County Health Rankings & Roadmaps, Robert Wood Johnson Foundation, http://www.countyhealthrankings.org/app#/ohio/2013/athens/county/outcomes/overall/snapshot/by-rank...

Community Input Review

Auglaize County Health Assessment 2012 findings are based on self-administered surveys using a questionnaire modeled after the survey instruments used by the Centers for Disease Control

and Prevention. The health assessment identifies the following data summary:

Measure	2012 Survey Finding for Auglaize County
Health Perceptions	53% of adults rated their health status as excellent or very good. 23% of
•	those with incomes less than \$25,000 described their health as fair or
	poor. 20% of adults rated their mental health as not good on 4 days or
	more in the previous month.
Health Care Coverage	12% of adults were without health care coverage. Those most likely to
	be uninsured were adults with income level <\$25,000. 7.2% of residents
	live below poverty level
Health Care Access	7% of adults were using a hospital emergency room as their usual place

^{* 90}th percentile, i.e., only 10% are better.

^{**} Data should not be compared with prior years due to changes in definition.

	of health care. 16% of adults could not see a doctor when needed at some time in the past year due to cost.
Cardiovascular Health	Heart disease (36%) and stroke (7%) accounted for 43% of all adult deaths from 2006-2008. 7% of adults had a heart attack and 2% had a stroke in their life. 41% of adults have been diagnosed with high blood pressure, 37% have high blood cholesterol, 19% were smokers, and 38% were obese. (Four known risk factors for heart disease and stroke.)
Cancer	13% of adults had been diagnosed with cancer in their life.
Diabetes	11% of adults had been diagnosed with diabetes.
Arthritis	38% of adults were diagnosed with arthritis, compared with 31% of Ohio adults.
Asthma	7% of adults had been diagnosed with asthma.
Adult Weight Status	71% of adults were overweight or obese. 38% of adults were obese, compared with 30% of Ohio adults. 54% of adults were trying to lose weight.
Adult Tobacco Use	19% of adults were current smokers and 23% were former smokers.
Adult Alcohol	9% of adults were frequent drinkers (drank an average of 3 or more days
Consumption	per week). 37% of adults who drank had 5 or more drinks (males) and 4 or more drinks (females) on one occasion.
Adult Marijuana and	6% of adults had used marijuana during the past 6 months. 3% of adults
Other Drug Use	had used medication not prescribed for them or took more than prescribed to feel good and/or more active during the past 6 months.
Women's Health	53% of women over 40 had a mammogram in the past year. 58% of women ages 19 and over had a clinical breast exam and 41% have had a Pap smear in the past year. 37% had high blood pressure, 35% had high blood cholesterol, 34% were obese, and 13% were smokers. (All are known risk factors for cardiovascular diseases.)
Men's Health	44% of males over 50 had a Prostate-Specific Antigen test in the past year. 38% of males over 50 had a digital rectal exam in the past year. 8% of men had a heart attack, and 2% had a stroke during their life. 45% had been diagnosed with high blood pressure, 38% had high blood cholesterol, and 26% were smokers. 40% were obese. (All are known risk factors for cardiovascular diseases.)
Preventive Medicine and Health Screenings	40% of adults had a flu shot during the past 12 months. 58% of adults ages 65 and over had a pneumonia vaccination at some time in their life.
Adult Sexual Behavior & Pregnancy Outcomes	65% of adults had sexual intercourse. 5% of adults had more than one partner. Young people aged 15-24 represent nearly half of all STDs.
Quality of Life	22% of adults were limited because of a physical, mental, or emotional problem.
Social Context	47% of adults kept a firearm in or around their home. 4% were threatened or abused in the past year. 73% always wear a seatbelt while in the car.
Mental Health and Suicide	3% of adults considered attempting suicide. 7% felt so sad or hopeless almost every day for 2 or more weeks that they stopped doing usual

	activities.
Oral Health	65% of adults had visited a dentist or dental clinic in the past year, compared with 72% of Ohio adults. 77% of youth grades 6-12 had
	visited the dentist in the past year.
Parenting	87% of children have received all recommended immunizations. 95%
	of parents with a child under 8 and less than 4 feet, 9 inches used a car or booster seat.
Youth Weight Status	13% of youth were obese. 28% of youth reported that they were slightly or very overweight. 74% of youth were exercising for 60 minutes on 3 or more days per week.
Youth Tobacco Use	14% of youth were smokers, increasing to 24% of those who were over 17. 7% of youth had used chewing tobacco in the past month. Of those youth who currently smoked, 47% had tried to quit.
Youth Alcohol Consumption	58% of youth in grades 6-12 had drank at least 1 drink of alcohol in their life, increasing to 80% of youth 17 and older. 31% of those who drank, took their first drink at 12 years old or younger. 28% of youth and 50% of those over 17 had at least one drink in the past 30 days. 65% of the 6 th -12 th graders who reported drinking in the past 30 days had at least one episode of binge drinking. 5% of all youth drivers had driven in the past month after they had been drinking alcohol.
Youth Marijuana and Other Drug Use	11% of youth had used marijuana at least one in the past 30 days, increasing to 17% of those ages 17 and older. 10% of youth used medications that were not prescribed for them or took more than prescribed to get high, increasing to 16% of those over 17.
Youth Sexual	25% of youth have had sexual intercourse, increasing to 40% of those
Behavior & Pregnancy Outcomes	ages 17 and over. 24% of youth had participated in oral sex and 18% had participated in sexting. Of those who were sexually active, 56% had multiple sexual partners.
Youth Mental Health	10% of youth had seriously considered attempting suicide in the past
and Suicide	year and 4% actually attempted suicide in the past year.
Youth Safety	39% of youth always wore a seat belt when riding in a car. 60% of youth drivers texted while driving.
Youth Violence	10% of youth had carried a weapon in the past month. 5% of youth had been threatened or injured with a weapon on school property in the past year. 24% of youth had purposefully hurt themselves. 45% of youth had been bullied in the past year.
Disaster	7% of residents have a written disaster evacuation plan for their
Preparedness:	household.
Communication	
Disaster	66% of residents thought that their household would be somewhat or
Preparedness:	well prepared to handle a large-scale disaster or emergency. 23%
Knowledge of	reported their household was not prepared
Utilization	
Disaster	73% of residents were worried that high winds, tornadoes, or storm
Preparedness:	damage may affect their family or property. In the event of a tornado,
Hazards	64% would seek shelter in a basement.

Mercer County 2012 Community Health Assessment findings are based on a self-administered survey using a structured questionnaire to adults ages 19 and older. The questions were modeled after the survey instrument used by the Centers for Disease Control and Prevention for their national and state Behavioral Risk Factor Surveillance System. The health assessment identifies

the following data summary:

Measure	2012 Survey Finding for Mercer County
Health Perceptions	58% of adults rated their health status as excellent or very good. 26% of those with incomes less than \$25,000 described their health as fair or poor.
Health Care	14% of adults were without health care coverage. Those most likely to
Coverage	be uninsured were adults under age 30 and those with income under \$25,000. 7.5% of residents level below the poverty level.
Health Care Access	50% of adults visited a doctor for a routine checkup and 71% chose to go outside of Mercer County for health services in the past year. 14% of adults could not see a doctor when needed in the past year due to cost.
Cardiovascular Health	Heart disease (31%) and stroke (7%) accounted for 38% of all adult deaths from 2006-2008. 6% of adults had a heart attack and 2% had a stroke at some time in their life. 26% of adults have been diagnosed with high blood pressure, 33% had high blood cholesterol, 33% were obese, and 14% smoked. (Four known risk factors for heart disease and stroke.)
Cancer	13% of adults had been diagnosed with cancer in their life.
Diabetes	10% of adults had been diagnosed with diabetes. (A major risk factor is obesity.)
Arthritis	28% of adults were diagnosed with arthritis, compared with 29% of Ohio adults.
Asthma	8% of adults had been diagnosed with asthma.
Adult Weight Status	69% of adults were overweight or obese. 33% of adults were obese compared with 30% of Ohio adults. 51% of adults were trying to lose weight.
Adult Tobacco Use	14% of adults were current smokers and 23% were considered former smokers.
Adult Alcohol Consumption	8% of adults were considered frequent drinkers (drank an average of 3 or more days per week). 47% of adults who drank had 5 or more drinks (males) and 4 or more drinks (females) on one occasion in the past month. 9% of adult drinkers drove after having too much to drink in the past month.
Adult Marijuana and Other Drug Use	2% of adults had used marijuana during the past 6 months. 10% of adults had used medication not prescribed for them or took more than prescribed to feel good and/or more active during the past 6 months.
Women's Health	59% of women over 40 had a mammogram in the past year. 61% ages 19 and over have had a clinical breast exam and 52% have had a Pap smear in the past year. 23% had high blood pressure, 24% had high blood cholesterol, 32% were obese, and 9% were smokers. (Known risk factors for cardiovascular disease.)

Men's Health	50% of males over 50 had a Prostate-Specific Antigen test in the past year. 34% of males over 50 had a digital rectal exam in the past year. Major cardiovascular diseases (heart disease and stroke) accounted for 38% and cancers accounted for 25% of all male deaths from 2006-2008. 8% of men had a heart attack, and 3% had a stroke at some time in their life. 26% of men had been diagnosed with high blood pressure, 40% had high blood cholesterol, 20% were identified as smokers, and 345 were obese. (Known risk factors for cardiovascular diseases.)
Preventive Medicine and Health	36% of adults had a flu shot during the past 12 months. 41% of adults ages 65 and older had a pneumonia vaccination at some time in their life.
Screenings	
Adult Sexual	71% of adults had sexual intercourse. 6% of adults had more than one
Behavior &	partner. Young people aged 15-24 account for nearly half of all STDs.
Pregnancy	
Outcomes	
Quality of Life	15% of adults were limited in some way because of a physical, mental, or emotional problem.
Social Context	7% of adults were abused in the past year. 95% of adults wear their seatbelt while driving.
Mental Health and	3% of adults considered attempting suicide. 9% of adults had a period of
Suicide	2 or more weeks when they felt so sad and hopeless nearly every day that they stopped doing usual activities.
Oral Health	71% of adults had visited a dentist or dental clinic in the past year, compared with 72% of Ohio adults.

Grand Lake Health System Joint Township District Memorial Hospital Community Health
Assessment 2010-2011 is a response to the Auglaize County Health Department's health
assessment survey on the health status of the county's residents. JTDMH / Grand Lake Health
System responded to the survey by developing programs and working with organizations
throughout the community to address the issues highlighted in the community needs assessment.

- Became a smoke free hospital (one of the first in Ohio). 2008
- Developed a certified diabetic program at the hospital to address the growing epidemic of diabetes. 2009
- Developed the Grand Lake Health Challenge to encourage a family approach to address obesity, diabetes, and other health issues. 2011
- Grand Lake Health System was recognized by the American Heart Association as one of only 15 organizations in the United States for innovation in community fitness with programs such as the Road to Fitness. 2009 and 2010
- The Community Outreach program at Grand Lake Health System provides a wide range of community health education, screenings and health fairs, and programs to address the needs outlined in the community assessment. Ongoing

• JTDMH / Grand Lake Health System was recognized as a Platinum level Fit-Friendly Company by the American Heart Association for the employee fitness program. The program provides a role model to local businesses. 2001 and 2010.

Written comments

No written comments were received by JTDMH at the time of writing of this report.

<u>JTDMH Community Health needs assessment Steering Committee</u> met to identify and prioritize the significant health needs of the community for this Community Health Needs Assessment. Participants identified four significant health needs of the community and related health needs that would also be impacted by addressing the four significant health needs.

Significant Health Need	Related Health Needs
Obesity	Nutrition
	Stroke
	Heart Disease
	Diabetes
	Cancer
Wellness/Prevention/Screenings	Immunizations
	Breast Cancer
	Colon Cancer
	Melanoma
	Dermatologist
	Pediatric dental care
	Dental and vision wellness
	Tobacco use
	Health education
Mental Health	Suicide
	Heavy drinking
	Drug abuse
	Lack of detoxification facility
	Motor vehicle safety
Access to Care	Custodial care
	Pediatric dental care
	Medication compliance
	Primary care

COLLABORATING PARTNERS TO CONDUCT THE COMMUNITY HEALTH NEEDS ASSESSMENT

JTDMH collaborated with Bricker & Eckler LLP and their affiliate, the Quality Management Consulting Group, located at 100 South Third Street, Columbus, Ohio 43215, to conduct the Community Health Needs Assessment and prepare the Community Health Needs Assessment report. Jim Flynn is a partner in the Bricker & Eckler Health Care group where he has practiced for 23 years. His general health care practice focuses on transactional, reimbursement-related and health planning matters, including experience in Medicare and Medicaid reimbursement, certificate of need, non-profit and tax-exempt health care providers, federal and state administrative appeals, federal and state regulatory issues, fraud and abuse, False Claims Act, physician recruitment, corporate compliance, corporate organization and structure, public hospitals, and long term care issues. Mr. Flynn has provided consultation to health care providers, including non-profit and tax-exempt health care providers and public hospitals, on community health needs assessment.

Chris Kenney is the Director of Regulatory Services with the Quality Management Consulting Group of Bricker & Eckler LLP. Ms. Kenney has over 30 years' experience in health care planning and policy development, federal and state regulations, certificate of need regulations, state licensure, and Medicare and Medicaid certification. Since 2010, Ms. Kenney has been actively involved in conducting, reviewing, and consulting on Community Health Needs Assessments. She provides expert testimony on community need and offers presentations and educational sessions regarding Community Health Needs Assessments. As Director of Ohio's Certificate of Need Program from 1997- 2009, she prepared legislation and developed policy directives to address community needs including the development and introduction of the long-term care bed need methodology currently in use in Ohio. Ms. Kenney works with provider associations, industry groups, state agencies and providers on various health care delivery related issues. She has provided consultation to various state agencies on health care matters, health care providers on planning and regulatory matters, and Ohio's Executive Branch on state long-term care policy matters.