Southwest General Health Center
CHNA Executive Summary

Introduction
Southwest General Health Center, a 358-bed hospital located in Middleburg Heights, Ohio, contracted with Tripp Umbach to facilitate a comprehensive Community Health Needs Assessment (CHNA) beginning in the winter of 2016. Southwest General Health Center is a non-profit hospital serving southwestern Cuyahoga, northern Medina and eastern Lorain counties. Founded in 1920 by residents of the surrounding communities, Southwest General has a rich history of community partnership and a deep commitment to the health and wellbeing of its residents.

The CHNA process began February 18, 2016 with a kick-off meeting to an internal working group of hospital leaders. The internal working group was comprised of Southwest General Health Center leadership charged with working collaboratively with Tripp Umbach to assist in the completion of the CHNA.

The CHNA process undertaken by Southwest General, with project management and consultation by Tripp Umbach, included extensive input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of public health issues, data related to underserved, and vulnerable populations, and representatives of vulnerable populations served by the hospital. Tripp Umbach worked with leadership from Southwest General Health Center to oversee and accomplish the assessment with the goal of gaining a better understanding of the health needs of the region. Southwest General Health Center will make use of CHNA findings to address local health care concerns, as well as to function as a collaborator, working with regional agencies to help provide solutions to broader socioeconomic and education issues in the service area.

Community Health Needs Assessment (CHNA) Process

- Community Leader Interviews/Public Commentary
- Evaluation Process
- Secondary Data Analysis
- Health Provider Survey
- Community Forum
- Provider Resource Inventory
- CHNA Report
- Implementation Planning Phase
2016 Community Health Needs Identified

As a result of extensive primary and secondary research, community members, community leaders, and project leadership identified three regional priorities. The research illustrated that there is a need for additional information and services that promote and provide access to chronic disease management, obesity and healthy choices, and behavioral health.

1) Chronic Disease Management

Chronic diseases are typically defined as long term diseases or conditions that require ongoing medical attention and have the ability to limit an individual’s daily activities. As stated by the Centers for Disease Control and Prevention (CDC), chronic diseases and conditions—such as heart disease, risk of stroke, cancer, type 2 diabetes, obesity, and arthritis—are among the most common, costly, and preventable of all health problems.

Socioeconomics play a large role in contributing to an individual’s ability to receive health care and understand his or her health needs. As it relates to chronic health disease management, which requires ongoing care and many preventative measures, socioeconomic barriers can pose a challenge to taking the steps necessary to managing health conditions. In addition to education, other social and economic factors that can play a role in managing one’s health are employment, income, poverty, and crime.

Socioeconomic conditions and an individual’s ability to receive health care and manage health conditions are oftentimes interrelated. For example, an individual employed with a steady income has a greater ability to obtain insurance and receive health care screenings that, in turn, allow for the management of chronic conditions.

2) Obesity and Healthy Choices

Obesity is a major health issue that affects residents in communities across the U.S. Adult obesity rates are on the rise in the U.S. and the rate of obesity has more than doubled since the 1970s. Adults are not the only ones affected by obesity, as one in six children and adolescents in the U.S. are obese. Obesity is a particularly concerning issue because of the health problems and chronic diseases that often stem from obesity. The high rates of obesity in Ohio translate into high rates of obesity-related health problems, as the state ranked ninth in the nation for diabetes and 17th in the nation for hypertension.

Community residents should prioritize not only accessing care, but finding a consistent source of care in order to properly manage obesity issues and other health conditions. Health providers must recognize that beyond shortages of providers, socioeconomic issues, public transportation limitations, insurance, and high cost of care also serve as barriers that prevent residents from receiving the care and education they need to overcome this top community health concern. It is essential to reinforce the importance of engaging in healthy choices such as eating healthy, exercising, limiting alcohol beverages, and maintaining a healthy weight as part of a healthy lifestyle.
3) **Behavioral Health**

Behavioral health affects families and individuals throughout the United States, and the illness is not immune to the Northeast Ohio region; as the number and cases of those diagnosed with the condition continue to rise. The growing national and local need for mental health services and substance abuse programs have not diminished. Genetics and socioeconomic factors play key roles in individuals who are diagnosed with a mental health problem and oftentimes-societal factors increase the likelihood for one to engage in unhealthy life choices such as alcohol and drug use.

According to the American Hospital Association, one in four Americans experiences a mental illness or substance abuse disorder each year, and the majority of those also have comorbid physical health conditions.

Accessibility issues compacted with limited mental health providers and inadequate insurance coverage are challenges and roadblocks to those seeking and needing behavioral health services. With a growing population, specifically in Lorain and Medina counties the demand for behavioral services will continue to grow.

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**Primary Research Key Data**

Tripp Umbach worked closely with Southwest General’s working group to ensure that data and information were taken from individuals and organizations that represented the underserved, low-income, and vulnerable populations.

**Community Stakeholder Interviews**

Tripp Umbach completed twenty-two (22) interviews with community stakeholders to gain a deeper understanding of community health needs from organizations, agencies and government officials that are knowledgeable of health issues from their day-to-day interactions with populations in greatest need.

During the stakeholder interviews, community leaders discussed health needs of the region as well as community themes and concerns. Below are the top three themes community stakeholders discussed, in order of most discussed to the least discussed (in descending order) across the entire health system.

1. Mental Health and Substance Abuse
2. Chronic Health Disease Management
3. Access to Care & Patient Care Coordination

**Health Provider Survey**

A provider health survey was created to collect thoughts and opinions of the health providers’ community regarding the care and services they provide. In total, 22 health provider surveys were collected via Survey Monkey. Southwest General Health Center sent emails to their health providers requesting survey participation.

The health provider survey was available online on Survey Monkey from 5/1/2016 - 5/14/2016.

The top three responses from survey participants reported that out-of-pocket costs/high deductibles (72.73 percent), no insurance coverage (68.18 percent), and no transportation (13.82 percent) tied with not being able to navigate the health care system (13.82 percent) and lack of mental health facilities (13.82 percent) as the biggest barriers for community residents receiving care.
community according to survey respondents are heart disease and stroke (42.9 percent), obesity (38.1 percent) tied with aging problems such as arthritis, hearing/vision loss (38.1 percent), and diabetes (33.3 percent).

According to survey participants, lack of exercise (66.67 percent), poor eating habits (57.14 percent), and alcohol abuse (47.62 percent) are the top risky behaviors in the community where they provide care/services.

The top reasons why survey respondents believe their overall patient population is noncompliant to their treatment plan include: high cost of care/medications (65.0 percent), personal reasons (60.0 percent), and patients believe they will be healthy without a treatment plan (45.0 percent).

Secondary Data Key Findings

Tripp Umbach collected and analyzed secondary data from multiple sources, including but not limited to, Community Needs Index (CNI), County Health Rankings, Healthy People 2020, Ohio Department of Health, Bureau of Health Statistics and Research, Substance Abuse and Mental Health Services Administration, and The Centers for Disease Prevention and Control (CDC). The data resources were related to disease prevalence, socioeconomic factors, and behavioral habits. Tripp Umbach benchmarked data against state and national trends and findings from the 2012 CHNA where applicable.

(Note: The study area refers to data for Cuyahoga, Lorain, and Medina counties.)

Access to primary care within Cuyahoga, Lorain, and Medina counties has improved from 2002 to 2011; growing from 113.04 to 128.31 primary care physicians per 100,000 of the population. Lorain and Medina counties have markedly lower access to PCPs than Cuyahoga County, the state, and the nation. Cuyahoga County has the highest percentage of adults who do not have a regular doctor (19.52 percent) as compared to the state of Ohio and the three county study area.

Lorain and Medina counties have significantly lower rates of dentists per 100,000 population than Cuyahoga County, the study area, the state, and the nation. Lorain County has the highest percentage of adults who had no dental exams within the past year (28.6 percent).

Lorain and Medina counties report lower percentages of residents receiving a sigmoidoscopy or colonoscopy in comparison to the study area. Medina County represents the lowest percentage, with rates below state and national averages.

ZIP Codes 44017 (Berea) and 44130 (Middleburg Heights) in Cuyahoga County have the highest CNI score with a score of 2.8; indicating the highest barriers to accessing health care (on a scale of 1.0 (Low barriers to care) – 5.0 (Highest barriers to care). ZIP code 44028 (Columbia Station) was the only neighborhood that saw a move to more barriers in accessing health care from 2015 to 2016, shifting from a score of 1.4 to a score of 1.8.

Cuyahoga ranks in the bottom 10 for the state of Ohio for Social and Economic Factors in both 2012 and 2016; with the rank unchanged during the trending time period from 2012 to 2016. Cuyahoga ranked in the bottom 10 for the state of Ohio for Physical Environment in 2012, however has significantly improved in 2016.

Lorain County has the highest percent of adults with a BMI over 30.0. Linking obesity to diabetes, Lorain County as well as Cuyahoga County have higher rates of diabetes than the national diagnoses rate (9.1 percent). Cuyahoga County has the highest percentage of adults with high cholesterol (38.2 percent) as compared to the study area. Lorain County has the highest population of adults with high blood pressure (31.2 percent), which is higher than the state (28.8 percent) and the national average (28.16 percent).

Lorain County has the highest rate of mortality due to lung disease in the study area (59.8 per 100,000
population). This is higher than the rate in the state of Ohio (42.2), as well as the nation (42.2).

Cuyahoga County has a higher cancer mortality rate per 100,000 population (188.2) as compared to the study area (185), the state (184.6) and the nation (160.9). Lorain County has a lower cancer mortality rate (166.9) in comparison to the study area and the state of Ohio (184.6).

Cuyahoga County exhibits the highest rate of residents with a lack of social or emotional support at 19.8 percent of the population; this is slightly higher than the report area (19.2 percent) and state (19.5 percent) norms.

Access to mental health providers in Lorain County (61.9) and Medina County (82.9) are both significantly lower levels of access as compared to the report area at 137.2 per 100,000 population, the state (94.4), and the nation (134.1).

Next Steps

With the completion of the 2016 CHNA, Southwest General Health Center will develop an implementation strategy report to leverage their organization’s strengths and resources, in order to best address their communities’ health needs, and improve the overall health and well-being of residents of Northeastern Ohio. For additional information about the CHNA and its specific findings, please contact:

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CHNA FAST FACTS

✓ A comprehensive community health needs assessment was conducted in Cuyahoga, Lorain, and Medina Counties.

✓ The CHNA needs are: Chronic Disease Management, Obesity & Healthy Choices, and Behavioral Health.

✓ The 2016 full CHNA report is available for review on Southwest General Health Center’s website.

✓ The IRS requirement for nonprofit hospitals to conduct a CHNA under the patient protection and affordable care act was fulfilled.