Aultman Health Foundation
Aultman Alliance Community Hospital
Aultman Hospital
Aultman Specialty Hospital

Community Health Needs Assessment

2022

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Joint Community Health Needs Assessment 2022

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Executive Summary

Introduction

Aultman Health Foundation has a 130-year history of providing quality healthcare services and compassionate care to the communities it serves in Northeast Ohio. The not-for-profit health system headquartered in Canton, Ohio, serves communities predominately located in Carroll, Holmes, Stark, Tuscarawas and Wayne counties. The health system comprises four hospitals, a freestanding emergency department, four urgent care sites, a college of nursing, a physician-led network, a managed care organization, hospice, palliative care and several community-based outpatient facilities in Alliance, Canton, Carrollton, Dover, Doylestown, Louisville, Massillon, North Canton and Orrville. Aultman Health Foundation provides exceptional, compassionate care to all patients, regardless of their ability to pay.

Aultman Alliance Community Hospital, located at 200 East State St., Alliance, Ohio, 44601, is a non-profit general hospital with 202 registered and/or licensed beds including 55 nursing home/transitional care beds that are found in our attached, long-term care facility, Community Care Center. Aultman Alliance Community Hospital is fully accredited by The Healthcare Facilities Accreditation Program and offers a medical staff of more than 150 active physicians. Affiliates include a home medical supply company, Aultman Home Medical and Alliance Community Medical Foundation, consisting of approximately 30 medical professionals. Aultman Alliance Community Hospital is Ohio's only Planetree Facility. Aultman Alliance Community Hospital was one of only four Ohio hospitals, and one of 66 U.S. hospitals, to make the 2022 Lown Institute list of most socially responsible hospitals as measured across categories of health equity, value, and outcomes.

Aultman Hospital, located at 2600 Sixth St. SW, Canton, Ohio, 44710, is a non-profit, short-term acute care general hospital with 821 registered and/or licensed beds. Aultman Hospital is fully accredited by The Joint Commission and has over 500 active physicians. Aultman Hospital offers a comprehensive mix of inpatient and outpatient services including adult cardiac catheterization and open-heart surgery, level III obstetric and newborn care services, level II trauma services, hospice and palliative care, physical rehabilitation, outpatient psychiatric care and home healthcare.

Aultman Specialty Hospital, located on the fourth floor of 2600 Sixth St. SW, Canton, Ohio, 44710, is a limited liability company, long-term acute care hospital with 30 registered beds. Aultman Specialty Hospital is fully accredited by The Joint Commission. The Aultman Specialty Hospital provides long-term acute care for patients with medically complex respiratory, cardiac and renal conditions, neurological disorders and wounds. The average length of stay is 25 days. Typically, patients are received in transfer from intensive care units, step-down units or other local hospitals.

Aultman Health Foundation Mission, Vision, Values and Diversity

Mission
Our mission is to lead our community to improved health.

Vision
We will be the leading health system in designing products and services for the communities we serve.
- Deliver the highest quality
- Achieve service excellence
- Offer a competitive price
- Innovate toward disease prevention and wellness

Values
- **R**ecognize and respect the unique talents of every Aultman team member
- **E**xceed patient, enrollee and student expectations
- **S**uccess through teamwork
- **P**romote a highly reliable organization
- **E**ducate our community
- **C**ost-effective management of resources
- **T**rust, integrity and compassion in all relationships

Diversity
Trust and integrity in all relationships is a core value of Aultman. By embracing diversity, we understand and appreciate our similarities and differences, allowing us to maximize individual and corporate success by valuing and respecting one another. Each colleague should appreciate the knowledge, perspectives, experience and abilities of other colleagues and the contribution that each colleague makes to Aultman. Differing points of view will be sought and respected from colleagues at all levels of the workforce.

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A message from Rick Haines, President and Chief Executive Officer, Aultman Health Foundation

The Affordable Care Act requires all nonprofit hospitals to complete a community health needs assessment process every three years. This systematic process involving the community identifies and analyzes community health needs and assets, prioritizes those needs and guides implementation of a plan to address the significant priority health needs (Community Health Improvement Plan for the county and Implementation Strategy for the hospitals). Evaluation of the impact of the implementation strategies and progress toward achieving goals is conducted throughout the process. The onset of the COVID-19 pandemic impacted this process.

In 2020, with the arrival of the COVID-19 pandemic, hospitals across the world faced one of the biggest challenges of the century. As the year ended, Aultman saw the first ray of hope as the Canton campus became one of the first hospitals in Ohio to administer the COVID-19 vaccine. However, as the 2021 flu season began and people gathered for indoor get-togethers and holiday celebrations amid vaccine hesitancy, we faced perhaps one of the darkest periods of the pandemic as cases surged, hospitals reached capacity and colleagues tested the limits of what they could endure. I was proud of how Aultman responded to the pandemic in 2020. I am prouder still of how our colleagues supported each other, remained vigilant and exercised caution and professionalism in the face of unrelenting odds throughout the most recent surge. Today, it would seem the surge is behind us, and the world is learning to manage an endemic disease rather than trying to contain a pandemic one. We're finally able to resume all elective procedures, normal visitation and more in 2022. Aultman met the challenge of effectively managing population health with strategies that provide safe, high-quality, efficient care in the right care setting during the COVID-19 pandemic.
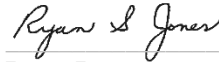
We are acutely aware that years of economic, political, educational and health access disparities have placed African American and other vulnerable communities at disproportionate risk for health equity issues including COVID-19. As we all know, changes cannot be achieved individually. We hope to create a culture where safe, open dialogue can be held to inspire awareness in how we interact with our workforce, our customers/patients and our community. Aultman continues to work collaboratively with other community partners, including the health departments, to both address the urgent community needs and to commit to long-term strategies to reduce health disparities as we lead our community to improved health. Aultman population health strategies will continue to align with county and state action steps to mitigate health disparities and advance health equity.

Since the spring of 2021, we've held weekly mobile vaccine clinics throughout our region, going out into the community and underserved areas to help people get vaccinated at businesses, fitness centers, churches, community centers, libraries, residential areas, schools and universities throughout the region, including Alliance, Canal Fulton, Canton, East Canton, Louisville, Magnolia, Massillon, Navarre, North Canton, Uniontown, Waynesburg and much more. Community engagement will continue to guide strategies while planning for the post-acute phase of the COVID-19 pandemic. Strategies will include value-based care models, use of population-level data, and care management. Population health will contribute to the health system's mission of leading our community to improved health.

We welcome comments on ways to improve this document and related implementation strategies in future editions. These comments provide additional information to hospital facilities regarding the broad interests of the community and help to inform future CHNA reports and implementation strategies documents. A copy of this report may be obtained at no charge by contacting us. To offer comments or request a copy of this report, please contact Liz Edmunds in writing at Aultman Health Foundation 2600 Sixth St. SW, Canton, Ohio, 44710 or via email at finance@Aultman.com or via phone at 330.363.3439.

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CHNA report approved by the boards:
Aultman Health Foundation Board – Oct. 26, 2022
Aultman Alliance Community Hospital Board – Nov. 16, 2022
Aultman Hospital Board – Nov. 16, 2022
Aultman Specialty Hospital Board – Oct. 13, 2022

CHNA report initially posted to the website: Dec. 1, 2022
Aultman Health Foundation tax identification number: 34-1445390
Aultman Alliance Community Hospital tax identification number: 34-0714581
Aultman Hospital tax identification number: 34-0714538
Aultman Specialty Hospital tax identification number: 13-4246188

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Description of the Service Area and Community Served

Community Definition

Aultman Hospital, Aultman Alliance Community Hospital and Aultman Specialty Hospital define the "community served" as Stark County Ohio communities (Figure 1 Communities within Stark County). Aultman's wider service area encompasses the surrounding Northeastern Ohio counties and beyond. Aultman Hospital, Aultman Alliance Community Hospital and Aultman Specialty Hospital file an Annual Hospital Registration and Planning Report with The Ohio Department of Health as required for hospitals registered in Ohio. A review of the 2020 and 2021 patient origin data for each hospital supports the definition of the "community served" as residents of Stark County, Ohio. Stark County accounts for a vast majority of admissions to Aultman Hospital, Aultman Alliance Community Hospital and Aultman Specialty Hospital. In 2021, Stark County residents comprised 76% of total admissions to Aultman Hospital and 76.5% of total admissions in 2020. In 2021, Stark County residents comprised 68% of total admissions to Aultman Alliance Community Hospital and 70.8% of total admissions in 2020. In 2021, Stark County residents comprised 72.7% of total admissions to Aultman Specialty Hospital and 62.7% of total admissions in 2020. While it is appropriate to identify the "community served" as Stark County, each hospital serves Ohio counties surrounding Stark County as well. Stark County community members accounted for more than 76% of 2020 and 75.4% of 2021 inpatient discharges from all three hospitals. The 2022 Stark County Community Health Assessment (CHA) includes additional information on community profile characteristics.

Figure 1 Communities within Stark County, Ohio

City	Zip Code
Alliance	44601
Beach City	44608
Brewster	44613
Canal Fulton	44614
East Sparta	44626
Greentown	44630
Hartville	44632
Limaville	44640
Louisville	44641
Magnolia	44643
Massillon	44646-44648
Maximo	44650
Middlebranch	44652
Minerva	44657
Navarre	44662
North Lawrence	44666
Paris	44669
Robertsville	44670
Uniontown	44685
Waynesburg	44688
Wilmot	44689
Canton	44701-44711, 44714, 44718, 44721, 44735, 44750, 44767, 44799
North Canton	44720
East Canton	44730

Source: Datasheer, L.L.C. (2018). STARK County, OH ZIP Codes. Zip-codes.com. Retrieved March 2022 from https://www.zip-codes.com/county/oh-stark.asp.

Community Demographics

The following data represents a summary of the Stark County community profile characteristics. Please refer to the 2022 Stark County Community Health Assessment for additional information on the community profile.

Population. Stark County is the eighth most populated county in Ohio with a current population of 368,210. Stark County's population is projected to decrease by nearly 4% between now and 2050. The state's population, on the other hand, is projected to remain stable over that same time.

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Race/Ethnicity. Stark County is slightly less diverse than the state of Ohio with 13% of the population being non-white compared to 19% in the state. Over the past five years, the number of white and African American residents has changed less than 3% while the number of Native Americans, Asians and those of two or more races has significantly increased (Figure 2, Figure 3).

Figure 2 Stark County Ohio Population by Race

| Stark County Ohio Population by Race, 2020							
	White	African American	Native American	Asian	Pacific Islander	Other Race	Two or more races
State of Ohio	80.5%	12.4%	0.2%	2.3%	0.0%	1.1%	3.6%
Stark County	87.1%	7.4%	0.1%	0.9%	0.0%	0.7%	3.8%
Source: U.S. Census Bureau 2020 American Community Survey, 5-year estimates							

Figure 3 Stark County Ohio Population Estimates by Race

Stark County Ohio Population Estimates by Race						
	2016	2017	2018	2019	2020	% Change
White	331,467	330,293	328,522	326,891	323,349	-2.4%
African American	27,197	26,706	27,492	27,880	27,511	+1.1%
Native American	390	403	512	473	479	+22.8%
Asian	2,896	3,055	3,200	3,432	3,284	+13.4%
Pacific Islander	82	67	66	21	12	-85.3%
Other race	1,196	1,399	2,069	2,339	2,510	+109.9%
Two or more races	11,534	12,350	11,614	11,513	14,167	+22.8%
Source: U.S. Census Bureau American Community Survey, 5-year estimates						

Age. Stark County has a slightly higher percentage of the population ages 65 and over compared to both Ohio and the country as a whole. The median age in the county, 42.1, is higher than the median age of 39.4 for the state (Figure 4).

Figure 4 Percentage of Population ages 65+; Stark County, Ohio, United States 2020

Percentage of Stark County Ohio Population ages 65+, 2020

Stark County: 19%
Ohio: 16%
U.S.A.: 16%
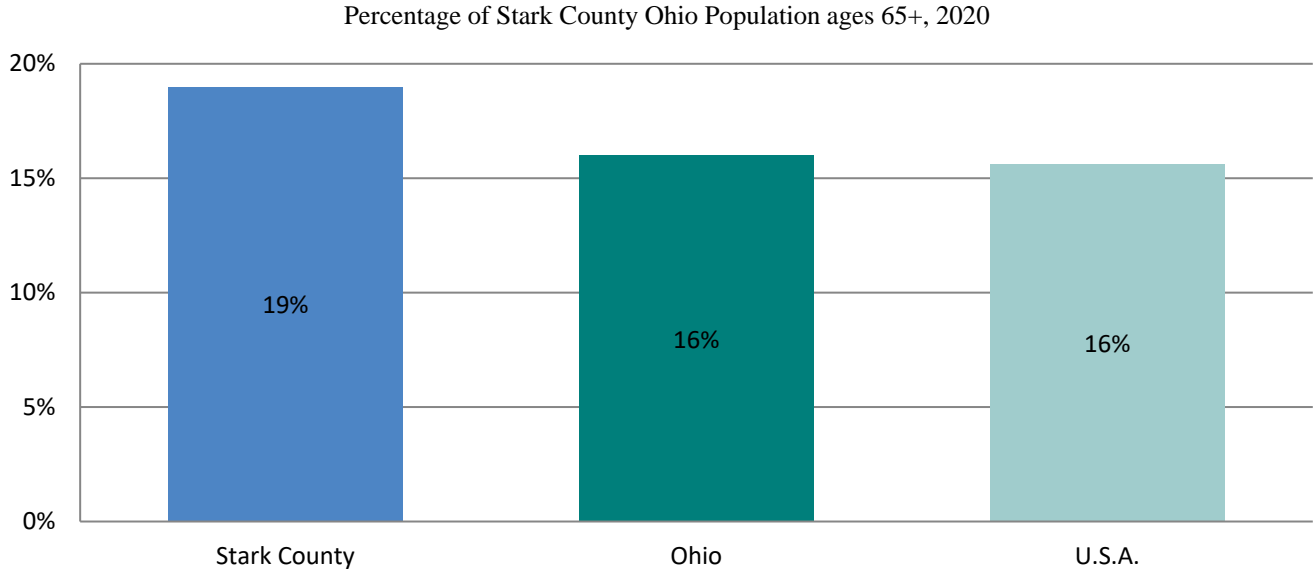
Source: U.S. Census Bureau 2020 American Community Survey, 5-year estimates

Community Resources

Aultman Health Foundation operates the following satellite units:
- Aultman Carrollton, located at 1020 Trump Road, Carrollton, Carroll County, Ohio, 44615, providing imaging services, physical and occupational therapies, outpatient laboratory services, family medicine, cardiology, obstetrics and gynecology, orthopedics, podiatry and fitness services.
- Aultman Louisville, located at 1925 Williamsburg Way, Louisville, Stark County, Ohio, 44641, providing physical therapy services and laboratory services.
- Aultman North, located at 6100 Whipple Ave. NW, Canton, Stark County, Ohio, 44720, providing imaging services, physical and occupational therapy, speech therapy, massage therapy, Reiki, pelvic floor therapy, occupational rehabilitation, cardiac

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rehabilitation, sleep medicine, anticoagulation clinic, orthopedics and sports medicine, aquatic therapy, outpatient laboratory services and a limited fitness program.

- Aultman Tusc Therapy Services, located at 2615 Tuscarawas St. W, Canton, Stark County, Ohio, 44710, providing physical, occupational and speech therapy services, occupational rehabilitation, aquatic therapy, LSVT LOUD and LSVT BIG behavioral treatment programs, vestibular rehab for dizziness and balance disorders, fitness program and Weight Management Program.
- Aultman Navarre Therapy Services, located at 1228 Market St. NE, Navarre, providing physical, occupational and speech therapy services, occupational rehabilitation, aquatic therapy, LSVT LOUD and LSVT BIG behavioral treatment programs, vestibular rehab for dizziness and balance disorders, limited fitness program and Weight Management Program.
- Aultman Massillon, located at 2051 Wales Ave. NW, Massillon, Stark County, Ohio, 44646, providing emergency services, imaging services, physical, occupational and speech therapy, outpatient laboratory services, pain management, aquatic therapy, occupational rehabilitation and cardiac rehabilitation.
- Aultman Woodlawn, located at 2821 Woodlawn Ave. NW, Canton, Stark County, Ohio, 44708, providing skilled nursing, short-term inpatient rehabilitation and transitional care to patients who need additional treatment after a hospital stay, hospice & palliative care, compassionate care, grief services and home healthcare.
- AultmanNow Urgent Care in Louisville, located at 506 W. Main Street, Louisville, Stark County, Ohio, 44641, providing walk-in medical services for minor injuries and illness that require immediate attention but are not life threatening.
- AultmanNow Urgent Care in Jackson, located at 7066 Fulton Drive NW, providing walk-in medical services for minor injuries and illness that require immediate attention but are not life threatening.
- AultmanNow Urgent Care at Aultman North, located at 6100 Whipple Ave. NW, providing walk-in medical services for minor injuries and illness that require immediate attention but are not life threatening.
- AultmanNow Urgent Care at Washington Square, located at 2203 E. Maple St., providing walk-in medical services for minor injuries and illness that require immediate attention but are not life threatening.
- Aultman Home Medical, located at 2820 W. Tuscarawas St., providing aerosol nebulizers, ambulation aids, bath safety equipment, bedside commodes, breast pumps and supplies, CPAP and BIPAP, hospital beds and accessories, lifts, oxygen concentrators, phototherapy equipment, portable oxygen systems, pressure pads and pumps, traction equipment and wheelchairs.

The following identifies the number of available healthcare facilities in Stark County (Figure 5).

Figure 5 Stark County Ohio Healthcare Facilities by Type

Stark County Ohio Healthcare Facilities by Type	
Facility Type	Number of Active Facilities
Ambulatory Surgical Facilities and Centers	11
Dialysis Center	10
Home Health Agency	17
Hospice	4
Hospital	7
Nursing Home	36
Outpatient Physical/Speech Pathology	1
Residential Care/Assisted Living	31
Federally Qualified Health Center	9
Source: Ohio Department of Health. (2022). Long-term care, non-long-term care, and CLIA Health Care Provider. Accessed March 2022 from https://publicapps.odh.ohio.gov/eid/Provider_Search.aspx.	

Description of the CHNA Processes and Methods

Stark County Community Health Assessment Advisory Committee (CHA Advisory Committee)
Aultman Health Foundation leaders serve on the CHA Advisory Committee and use the Stark County CHA for primary data about county health needs. Since 2010, the Stark County Health Department has facilitated a collaborative community health assessment process to meet Affordable Care Act requirements for nonprofit hospitals and Public Health Accreditation Board standards for health departments. Local public health departments, healthcare systems, mental health, social service agencies and non-profit organizations support and guide this process. The assessment process is an ongoing cycle that includes building partnerships; coordinating a consortium; assessing data, community needs and capacity; and planning, prioritization, action development, implementation and evaluation. The CHA Advisory Committee selected Center for Marketing and Opinion Research (CMOR) to conduct the 2022 Community Health Assessment as they did for previous assessment cycles.
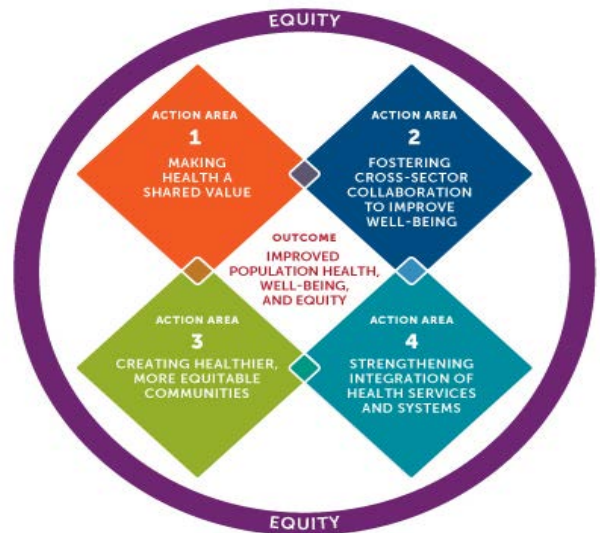
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The CHA Advisory Committee uses the Mobilizing for Action through Planning and Partnerships (MAPP) Model (Figure 6). MAPP is an evidence-based, community-wide strategic planning process that assists communities with prioritizing public health issues, identifying resources for addressing those issues and developing a Community Health Improvement Plan. In 2022, the CHA Advisory Committee began using the Building a Culture of Health Action Framework, developed by the Robert Wood Johnson Foundation (Figure 7). This evidence-based community-wide strategic action framework assists communities with prioritizing public health issues, identifying resources for addressing those issues and developing a Community Health Improvement Plan. The framework identifies priorities, organized under distinct Action Areas, for driving measurable, sustainable progress to improve the health and well-being of all. The Culture of Health Action Framework focuses on four areas:
1. Making Health a Shared Value
2. Fostering Cross-Sector Collaboration
3. Creating Healthier, More Equitable Communities
4. Strengthen Integration of Health Services and Systems

Aultman Health Foundation Community Health Needs Assessment Advisory Committee (CHNA Advisory Committee)
In 2022, the Aultman Health Foundation formed a Community Health Needs Assessment Advisory Committee (CHNA Advisory Committee). The CHNA Advisory Committee collaborates to provide strategic guidance on efficient, integrated and sustainable conduct of the community health needs assessment cycle for the Joint Aultman Health Foundation hospitals serving Stark County including Aultman Alliance Community Hospital, Aultman Hospital and Aultman Specialty Hospital. The Advisory Committee uses the steps detailed in the American Hospital Association Community Health Assessment Toolkit (Association for Community Health Improvement, 2017). The assessment process is an ongoing cycle that includes building partnerships; assessing data, community needs and capacity; and conducting planning, prioritization, interventions, implementation and evaluation of impact. The Vice President of Population Health chairs the Advisory Committee and coordinates and facilitates the population health cycle with Advisory Committee membership comprised of leadership from across Aultman Health Foundation including Aultman Alliance Community Hospital, Aultman Hospital and Aultman Specialty Hospital, and leadership from community agencies (Appendix 2). The 2022 Joint Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital & Aultman Specialty Hospital Community Health Needs Assessment (CHNA) uses primary data from the 2022 Stark County Community Health Assessment.

Figure 6 Mobilizing for Action through Planning and Partnerships Model

Figure 7 Building a Culture of Health Action Framework

Third Party Contractors

CMOR provides public opinion research services to colleges and universities, hospitals and healthcare organizations, businesses and community-based organizations and government agencies. They have expertise in asking the right questions to the right people the right way using telephone, web and mail surveys, field, intercept and key informant interviews and focus group administration, as well as a wide range of consulting services.

Squire Patton Boggs (US) LLP ("Squire"), located at 2000 Huntington Center, 41 South High Street, Columbus, Ohio 43215, was also engaged to assist with review of this CHNA report. Squire is a full service, global law firm with a deep healthcare practice. The primary Squire personnel who reviewed this report include George Schutzer, a tax-exempt organization expert with over 40 years of experience; John Wyand, a healthcare regulatory and operations expert with 40 years in the healthcare field; and Heather Stutz, a healthcare governance, regulatory and operations expert with 18 years of experience. Squire conducts and reviews community health needs assessments on behalf of hospitals and their parent organizations and assists tax exempt entities with Form 990 tax returns.

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Description of How Community Input was Solicited and Considered

Aultman Health Foundation Joint CHNA uses the Stark County CHA as its source for primary data. For the 2022 Stark County CHA, CMOR conducted data collection and analysis through four project phases: 1) Community Leader Survey, 2) Stark Poll, 3) Voices of Stark County Report and 4) Secondary Data.

Stark County Community Health Assessment

The Stark County Community Health Assessment gathered data from the following sources:

1. **Community Leader Survey**. A web survey of 125 community leaders familiar with health-related issues completed a web survey. The community leaders provided input to reflect the needs of their populations served including medically underserved, low income, and racial and ethnic minority populations (Figure 8, Figure 9, Figure 10).
2. **Stark Poll**. The 2021 Stark County Collaborative Poll was a large-scale, random sampling survey of households in Stark County. This method was used to ensure representativeness of the population and to warrant statistical validity. The final sample size was 600 which resulted in an overall sampling error of +/- 4.0% within a 95% confidence level. The questions on the Stark Poll were funded by StarkMHAR and focused primarily on mental health and addiction.
3. **Voices of Stark County Report.** Compiled by the Behavioral Health Access and Integration Collaborative. From September 2021 through April 2022, six community meetings and fifteen small Focus Groups were hosted in the 17 Stark County school districts to ensure information gathering by locality. Stark County residents were invited to participate through a variety of ways including emailed invites, word of mouth, and social media. Because of the COVID-19 pandemic, most meetings were held virtually. A total of 167 individuals (140 women, 27 men) participated from various community sectors. Facilitators recorded participant responses to group discussion questions: *What do you see as the challenges and/or barriers in your community tied to each of the five social determinants of health that prevent people from accessing behavioral health services? If money were no option, what ideas do you have to address the challenges and/or barriers brought up during our conversation?*
4. **Secondary Data**. A review and analysis of secondary data sources to identify priority areas of concern when compared to survey data. CMOR gathered and compiled health and demographic data from various sources.

Figure 8 Population Served by Community Leaders Completing Survey

Source: 2022 Stark County Community Health Assessment

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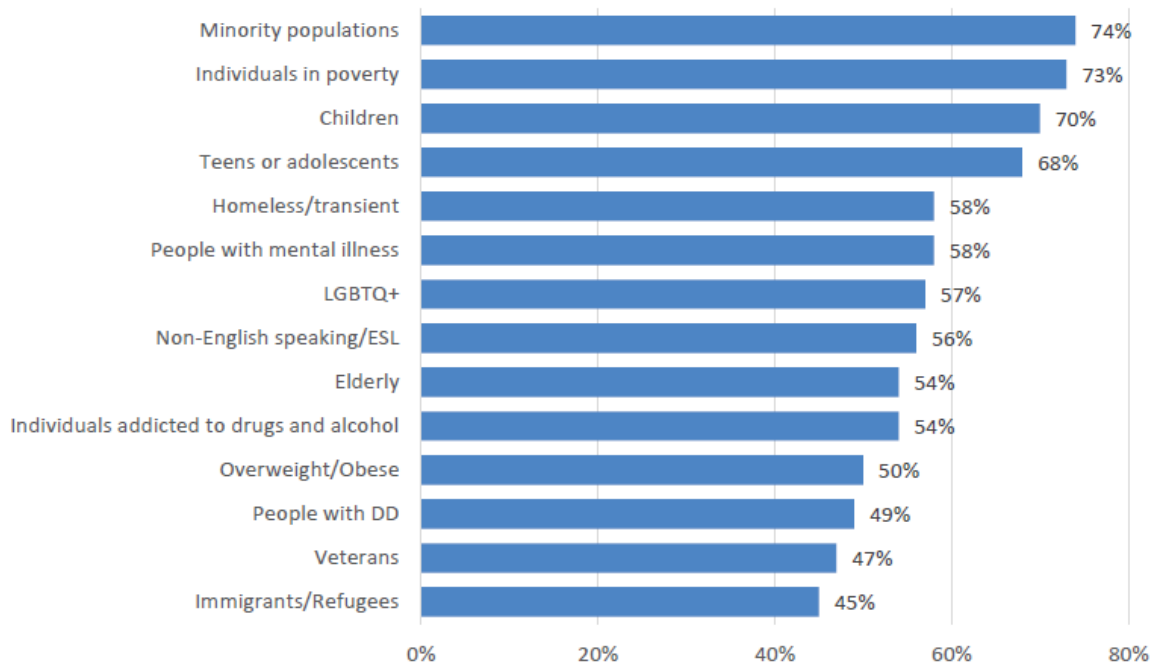
Figure 9 Sector of Community Leaders' Organization

Sector	Number	Percent
Nonprofit	36	29.0%
Healthcare	31	25.0%
Government	29	23.4%
Education	17	13.7%
Business/Private Sector	3	2.4%
Religious	1	0.8%
Other	7	5.7%
Total	124	100%

Source: 2022 Stark County Community Health Assessment

Figure 10 Primary Service Area of Community Leaders' Organization

Primary Service Area	Number	Percent
Stark County	66	57.8%
Multi-county, including Stark County	26	22.8%
Canton	9	7.9%
Massillon	5	4.4%
Alliance	5	4.4%
North Canton	1	0.9%
Alliance, Canton, Massillon	1	0.9%
Hartville	1	0.9%
Total	114	100%

Source: 2022 Stark County Community Health Assessment

2022 Joint Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital and Aultman Specialty Hospital Community Health Needs Assessment

The Aultman Health Foundation CHNA Advisory Committee considered data from the following sources.

1. **2022 Stark County Community Health Assessment.**
2. **Aultman Health Foundation Affiliates**. The following Aultman Health Foundation affiliates assisted in identifying health needs for patterns and trends aligned with the Stark County CHA identified health needs: Aultman Medical Group, AultCare and Integrative Health Collaborative.
3. **Aultman Health Foundation Patient Councils**. Members of the Aultman Hospital Massillon Campus Western Stark Community Council (March 2021), Aultman Alliance Community Hospital Patient Advisory Council for Excellence (PACE) (April 2021) and Aultman Hospital Patient's Voice Council (April 2021) had the opportunity for discussion after a presentation on population health initiatives in Stark County.
4. **Social Determinant of Health Screening Data**. Aultman Alliance Community Hospital, Aultman Hospital and Aultman Specialty Hospital screen each patient on admission for vulnerabilities related to social determinants of health. Patients served represent a sample of the Stark County population.
5. **Written Comments on Previous CHNA.** No written comments were received concerning the previous CHNA for Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital or Aultman Specialty Hospital.

Figure 11 Aultman Health Foundation Community Health Needs Assessment & Implementation Strategy Timeline

2010	First Cycle 2011-2013	Second Cycle 2014-2016	Third Cycle 2017-2019	Fourth Cycle 2020-2022	Fifth Cycle 2023-2025
▪ Patient Protection & Affordable Care Act passed	▪ 2011 first Stark County CHA Advisory Committee and Health Improvement Summit ▪ 2013 Aultman Hospital CHNA ▪ 2013 Aultman Specialty Hospital CHNA ▪ *2013 Alliance Community Hospital CHNA**	▪ 2014-2016 Aultman Specialty Hospital Implementation Strategy ▪ 2014-2016 Aultman Hospital Implementation Strategy ▪ 2016 Joint Aultman Hospital/Aultman Specialty Hospital CHNA ▪ *2014-2016 Alliance Community Hospital Implementation Strategy** ▪ *2016 Alliance Community Hospital CHNA**	▪ 2017-2019 Aultman Alliance Community Hospital Implementation Strategy ▪ 2017-2019 Joint Aultman Hospital/Aultman Specialty Hospital Implementation Strategy ▪ 2019 Joint Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital, Aultman Specialty Hospital CHNA	▪ 2020-2022 Joint Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital, Aultman Specialty Hospital Implementation Strategy ▪ 2022 Joint Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital, Aultman Specialty Hospital CHNA	▪ 2023-2025 Joint Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital, Aultman Specialty Hospital Implementation Strategy

Please note: Aultman Health Foundation follows a three-year assessment cycle and will operationalize the updated Implementation Strategy in 2023. The Stark County CHA Advisory Committee implemented a 5-year assessment process during the first cycle (2010), then moved to a 4-year cycle (2015) to better align with the local hospitals, then transitioned to a 3-year cycle (2019) to better align with the state's assessment process. *2013-2016 Alliance Community Hospital was not an Aultman affiliate.
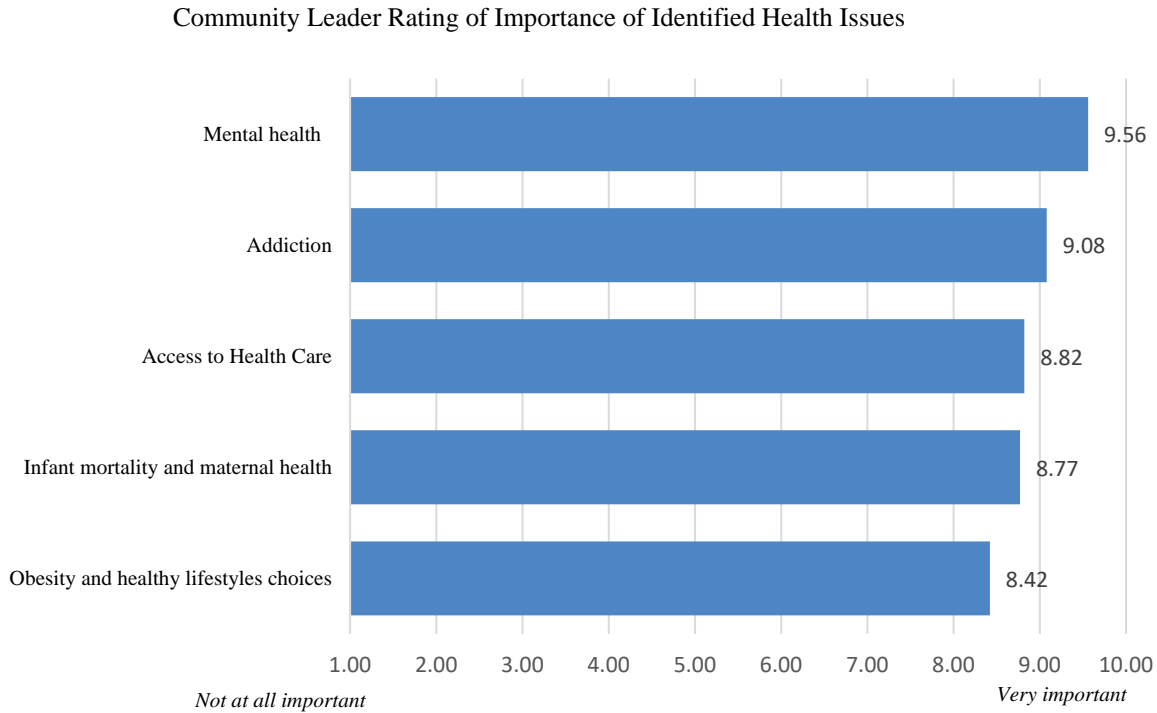
Data Summary

The Aultman Health Foundation CHNA Advisory Committee used the 2022 Stark County CHA Report prepared by CMOR as a primary source of data for the 2022 Joint Aultman Alliance Community Hospital, Aultman Hospital and Aultman Specialty Hospital CHNA. The Stark County priority health needs align with one state health factor, "Access to care," from the Ohio 2019

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State Health Assessment's and with one state priority topic, "Mental health and addiction," from the Ohio 2020-2022 State Health Improvement Plan.
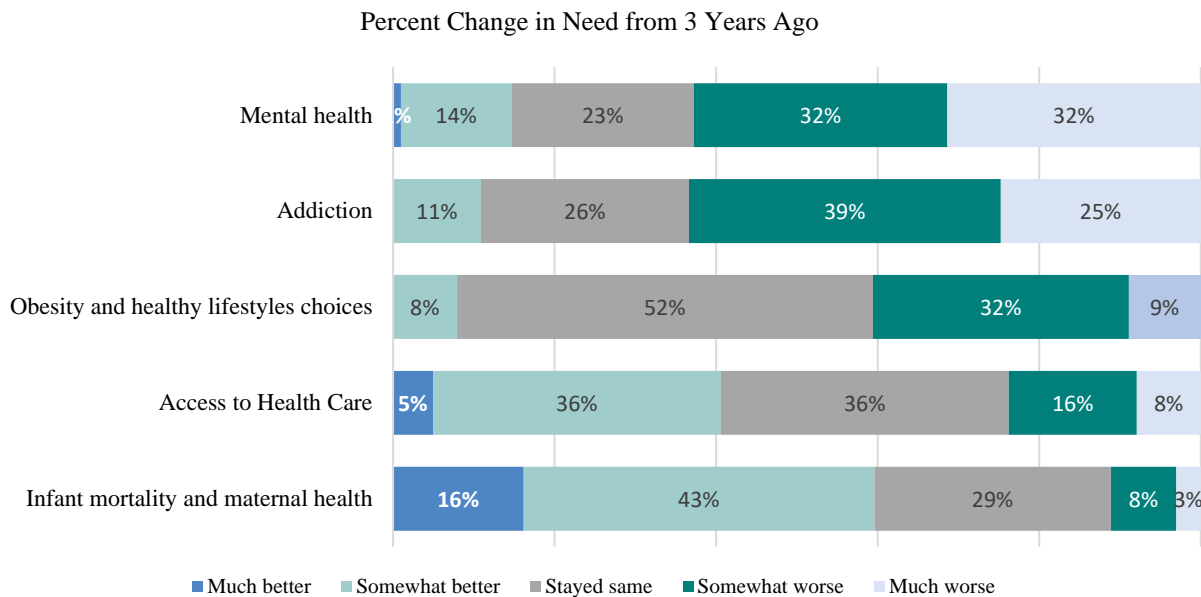
Community Leader Survey Summary
The Community Leader Survey provided a rank of the community needs (Figure 12) and a percent change in need from the previous three-year cycle (Figure 13).

Figure 12 Community Leader Rating of Importance of Identified Health Issues

Community Leader Rating of Importance of Identified Health Issues

Health Issue	Rating
Mental health	9.56
Addiction	9.08
Access to Health Care	8.82
Infant mortality and maternal health	8.77
Obesity and healthy lifestyles choices	8.42

Not at all important   *Very important*

Source: Stark County Community Health Assessment

Figure 13 Community Leader Rating of Percent Change in Need from 3 Years Ago

Percent Change in Need from 3 Years Ago

Health Issue	Much better	Somewhat better	Stayed same	Somewhat worse	Much worse
Mental health	%	14%	23%	32%	32%
Addiction		11%	26%	39%	25%
Obesity and healthy lifestyles choices		8%	52%	32%	9%
Access to Health Care	5%	36%	36%	16%	8%
Infant mortality and maternal health	16%	43%	29%	8%	3%

■ Much better ■ Somewhat better ■ Stayed same ■ Somewhat worse ■ Much worse

Source: Stark County Community Health Assessment

Stark Poll Community Survey Suicide and Mental Health Summary

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- When asked where they would most likely go if they or a family member needed mental health services, respondents were most likely to say a doctor (26.2% of answering respondents) or hospital (16.1%).
- Over half (52.7%) reported having discussed mental health issues with their healthcare provider, an increase from 46.8% in 2020. Of those, most (82.9%), found the discussion to be very or somewhat valuable.
- Respondents were asked to rate the seriousness of suicide in Stark County. Nearly a third (31.0%) said it was a very serious problem, while nearly half (45.4%) said it was moderately serious.
- When read a list of five barriers and asked if any would prevent them from helping someone close to them who was thinking about suicide, the most common barrier cited was not knowing what to say or do (29.5%).
- Two thirds of respondents (66.6%) indicated they know where to go if a friend or family member was thinking about suicide. More than a third (38.0%) are most likely to go to a suicide prevention hotline.
- When asked what might increase the risk of a suicide attempt, the most commonly given responses were social isolation (16.2%), major life loss (15.2%) and no support system (14.0%).
- About a third (33.8%) reported a negative change in day-to-day mood, mentality or general outlook in the past year, while about a quarter (24.5%) reported new feelings of isolation, disconnection or loneliness.

Figure 14 Stark Poll Community Survey Summary: Suicide and Mental Health		2017	2019	2020	2021
Where go for Mental Health (open end - top 3)	Doctor	41.4%	27.4%	NA	26.2%
	Hospital	11.7%	17.2%	NA	16.1%
	Counselor	9.3%	5.6%	NA	9.0%
Health Care Provider Discuss Mental Health / Value of Discussion	Yes	32.7%	45.3%	46.8%	52.7%
	No	67.3%	54.7%	53.2%	47.3%
	Very valuable	42.6%	49.2%	42.7%	41.0%
	Somewhat valuable	45.1%	33.5%	42.7%	41.9%
	Not at all valuable	12.4%	17.3%	14.6%	17.1%
Seriousness of Suicide in Stark County	Very serious	31.7%	46.0%	NA	31.0%
	Moderately serious	50.2%	39.2%	NA	45.4%
	Not too serious/Not really a problem	18.1%	14.8%	NA	23.6%
Barriers to Helping Someone Considering Suicide	Not knowing what to say or do	34.0%	26.2%	27.6%	29.5%
	Being afraid that there is nothing you can do to help them	26.2%	18.9%	15.3%	17.7%
	Being afraid that you may make them feel worse	23.0%	18.6%	15.3%	16.5%
	Being afraid that talking about it would make them attempt	21.2%	16.9%	11.2%	15.7%
	Not wanting to get involved	13.7%	6.5%	5.6%	7.0%
Know Where to Go if Friend/ Family Thinking about Suicide	Yes	NA	67.7%	NA	66.6%
	No	NA	32.3%	NA	33.4%
	Suicide prevention hotline	NA	40.2%	NA	38.0%
	Crisis Center	NA	15.8%	NA	15.7%
	Hospital ER	NA	12.1%	NA	11.3%
What Would Increase Risk of Suicide Attempt	Social isolation	NA	9.3%	NA	16.2%
	A major loss in their life	NA	9.1%	NA	15.2%
	No support system	NA	8.3%	NA	14.0%
Experienced in past year	A negative change in your day-to-day mood	NA	NA	NA	33.8%
	New feelings of isolation, disconnection, or loneliness	NA	NA	NA	24.5%
	The desire to seek counseling/therapy for the first-time	NA	NA	NA	11.0%
	An increased use of legal or illegal substances	NA	NA	NA	10.8%
	Suicidal thoughts or thoughts about harming yourself	NA	NA	NA	9.7%

Agreement with Statements (% agree)	2017	2018	2019	2020	2021
I am comfortable talking about suicide with my medical provider	80.1%	75.2%	69.3%	61.7%	66.3%
Most people who die by suicide show some signs beforehand	74.2%	67.1%	60.2%	60.8%	64.4%

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I am comfortable talking about suicide with my family/friends	N/A	N/A	68.0%	58.9%	59.1%
I would recognize if someone I cared about was thinking suicide	N/A	N/A	47.8%	47.0%	50.2%
If someone wants to die by suicide, nothing can do to help them	12.5%	11.5%	11.9%	11.5%	10.7%
Source: 2022 Stark County Community Health Assessment					

Voices of Stark County Report Summary

Common themes of the identified "Challenges" associated with each domain emerged from all conversations. In addition, participants shared suggestions for a multitude of "Strategies" with the most common themes being access to healthcare through mobile teams and having physical health and behavioral health services located in one place; more community navigators and mentors to assist with addressing individual needs/crisis situations and bringing services to communities; and improving the quality of our built environment (e.g., safe affordable housing, transportation, access to healthy foods and healthy workplaces (Figure 15).

Figure 15 Behavioral Health Access and Integration Collaborative Community Meetings and Focus Groups: Themes of Identified Challenges Associated with the Social Determinants of Health Report Highlights	
DOMAIN	*Economic Stability*
Key Issues	Poverty, employment, food security & housing stability.
Themes of Identified Challenges	1. Poverty and lack of economic stability are the root causes of inequities. 2. More people are experiencing the "benefit cliff," contributing to workforce shortage. 3. Food insecurity due to lack of accessible and affordable food sources. 4. Inflation and rising costs of basic needs. 5. Employment, transportation and childcare are all tied together. 6. High administrative burden and low ceiling of eligibility for governmental programs. 7. Minimum wage vs. living wage discrepancy.
DOMAIN	*Access & Quality of Education*
Key Issues	High school graduation, enrollment in higher education, educational attainment in general, language & literacy and early childhood education and development.
Themes of Identified Challenges	1. Expectations of schools and teachers exceed primary role of educating youth. 2. Lack of workforce to deal with students' struggles both academically and emotionally. 3. Lack of affordable, accessible and high-quality childcare and preschools. 4. Resource allocations to the neediest of students; what are supports for others? 5. Do people understand the value of an education and how it ties into their well-being? 6. Difficult to obtain adult education in terms of locality and costs.
DOMAIN	*Social & Community Context*
Key Issues	Cohesion of a community, civic participation, discrimination, workplace conditions and incarceration.
Themes of Identified Challenges	1. Lack of collective collaboration and allocation of equitable resources. 2. Lack of community centers/local programming which contributes to lack of cohesion. 3. Political polarization contributes to discrimination of marginalized populations. 4. Pandemic has prompted continued self-imposed isolation and loss of community cohesiveness.
DOMAIN	*Access & Quality of Healthcare*
Key Issues	Access to healthcare, access to primary care, health insurance coverage and health literacy.
Themes of Identified Challenges	1. Difficult to access providers (workforce, insurance, availability, proximity and costs). 2. Extremely difficult system to navigate. 3. Lack of awareness about options in own community. 4. Cultural bias and stigma. 5. Insurance complexities and disparity of reimbursement (services, locations, etc.). 6. Lack of understanding in the importance of prevention and overall health literacy.
DOMAIN	*Neighborhood & Built Environment*
Key Issues	Quality of housing, transportation access, healthy foods access, air & water quality and neighborhood crime & violence.
Themes of Identified Challenges	1. Lack of or difficulty with broadband internet connectivity. 2. Lack of affordable, accessible and flexible public transportation and ride share services. 3. Lack of safe and reliable housing. 4. Lack of safe green spaces with sidewalks to encourage healthy living. 5. Lack of resources in own communities. 6. Increasing crime and violence. 7. Lack of access to healthy foods.
Source: 2022 Voices of Stark County: Talking About the Social Determinants of Health	

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Secondary Data Summary

CMOR gathered and compiled health and demographic data from various sources (outlined below). After gathering the data, CMOR compiled the information by category. In addition to the report narrative, data was visually displayed with charts and tables. When available, data was compared to previous five year's information as well as other geographic areas such as Ohio. Analysis included survey data in conjunction with health and demographic data. Secondary sources of data include the following sources.

- 2021 Northeast Ohio Youth Health Survey
- Behavioral Risk Factor Surveillance System (BRFSS)
- Canton Regional Chamber of Commerce, Economic Scorecard
- County Health Rankings & Roadmaps
- Feeding America, Map The Meal Gap
- Health Resources & Services Administration (HRSA) Area Resource File
- Maternal Health Focus Group
- National Center for Health Statistics/Census Bureau
- Ohio Behavioral Risk Factor Surveillance System
- Ohio Department of Education
- Ohio Department of Health
- Ohio Department of Health, Data Warehouse
- Ohio Department of Health, STD Surveillance
- Ohio Department of Job and Family Services, Office of Workforce Development
- Ohio Department of Job and Family Services, Bureau of Labor Market Information
- Ohio Department of Job and Family Services, Statewide Automated Child Welfare Information System
- Ohio Development Services Agency, Ohio County Profiles
- Ohio Housing Finance Agency, Ohio Housing Needs Assessment
- Ohio Mental Health and Addiction Services
- Public Children Services Association of Ohio (PCSAO)
- Stark County Health Department
- Stark County Mental Health & Addiction Recovery (Stark MHAR)
- The Annie E. Casey Foundation, Kids Count Data Center
- U.S. Census Bureau - American Fact Finder, American Community Survey
- U.S. EPA - Air Data Air Quality Index Report

County Health Rankings & Roadmaps

The County Health Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play. The County Health Rankings help communities understand what influences how healthy residents are and how long they will live. The Rankings use more than 30 measures that help communities understand how healthy their residents are today (health outcomes) and what will impact their health in the future (health factors). The indicators allow for identification of health inequities by geography, age, race/ethnicity and socioeconomic status. Ranks inform progress measurement, not drive it. As part of the Joint CHNA process, the ongoing cycle includes periodic reflection and course correction. Comparing the 2022 and 2018 Health Indicators, the following indicators appear to be most problematic and potentially contributing to a lack of improvement in Health Outcomes and Health Factors ranking. The COVID-19 pandemic impacted both Health Indicators (Figure 16).

- Health Outcomes - Quality of Life
- Health Factors – Clinical Care

Figure 16 Stark County Ohio Health Rankings 2022									
	Rank (of 88) (1 = best rank, 88 = worst rank)								
Category (Indicators)	2015	2016	2017	2018	2019	2020	2021	2022	+/-
Health Outcomes	**41**	**45**	**45**	**42**	**49**	**45**	**50**	**46**	**-**
Length of Life (Premature death)	39	34	38	30	43	48	43	39	-
Quality of Life (Poor or fair health, Poor physical health days, Poor mental health day, Low birthweight)	52	57	59	55	54	44	57	51	+
Health Factors	**37**	**36**	**40**	**39**	**44**	**46**	**44**	**39**	-
Health Behaviors (Adult smoking, Adult obesity, Food environment index, Physical inactivity, Access to exercise opportunities,	40	36	42	36	41	39	46	32	+

Excessive drinking, Alcohol-impaired driving deaths, Sexually transmitted infections, Teen births)									
Clinical Care (Uninsured, Primary care physicians, Dentists, Mental health providers, Preventable hospital stays, Diabetes monitoring, Mammography screening)	10	10	6	9	9	13	16	15	-
Social & Economic Factors (High school graduation, Some college, Unemployment, Children in poverty, Income inequality, Children in single-parent households, Social associations, Violent crime, Injury deaths)	47	43	46	44	49	53	45	44	+
Physical Environment (Air pollution - particulate matter, Drinking water violations, Severe housing problems, Driving alone to work, Long commute - driving alone)	80	81	82	84	80	82	80	86	-

*Source: 2022 County Health Rankings & Roadmaps*

2022 Community Need Index

Dignity Health, a California-based hospital system, developed and published a Community Need Index™ (CNI) that measures barriers to healthcare access. The index is based on five social and economic indicators:

- Percentage of elders, children and single parents living in poverty.
- Percentage of adults over the age of 25 with limited English proficiency, and the percentage of the population that is non-White.
- Percentage of the population without a high school diploma.
- Percentage of uninsured and unemployed residents.
- Percentage of the population renting houses.

A CNI score is calculated for each ZIP code. Scores range from "Lowest Need" (1.0-1.7) to "Highest Need" (4.2-5.0). The Stark County weighted average CNI score was 3.0 and Median CNI Score was 2.8 – slightly higher than the national median of 2.6. Six Canton ZIP codes (44705, 44702, 44703, 44704, 44707, 44710) scored in the "highest need" category. Three Canton ZIP codes (44706, 44709, 44714) and one Alliance ZIP code (44601) scored in the "2nd highest need" category (Figure 17).

Figure 17 Map of Community Need Index Scores for Stark County
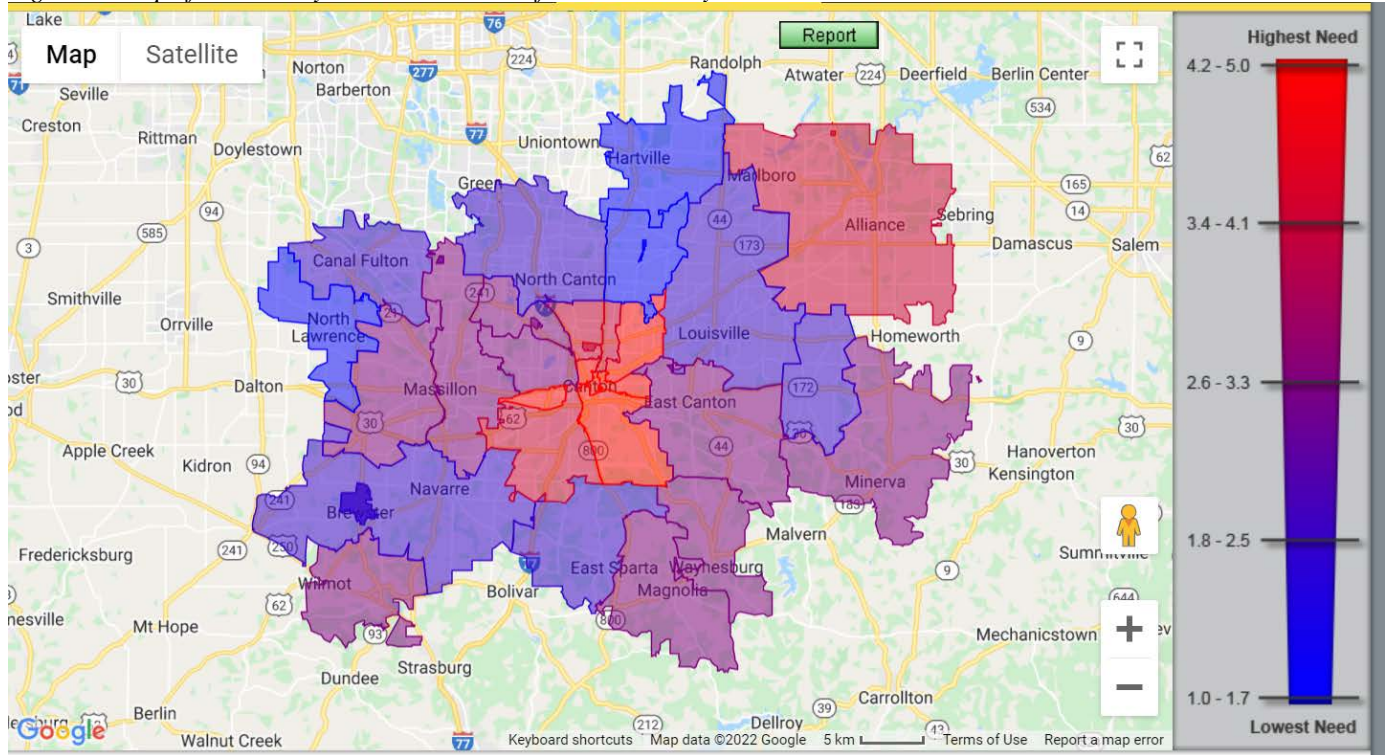
Source: Dignity Health. (2019). Community Need Index™

Aultman Health Foundation Social Determinants of Health Screening

According to Healthy People 2030, Social Determinants of Health have a major impact on people's health, well-being and quality of life. Examples of social determinants of health include safe housing, transportation and neighborhoods; racism, discrimination and violence; education, job opportunities and income; access to nutritious foods and physical activity opportunities; polluted air and water; and language and literacy skills. Aultman Hospital and Aultman Alliance Community Hospital social workers, Aultman Specialty Hospital discharge case managers and Aultman Medical Group (an Aultman affiliate) providers screen patients using the Centers for Medicare & Medicaid Services Accountable Health Communities Health-Related Social Needs Screening Tool. The screening tool identifies social needs in five core domains that community services can help with: 1) housing instability, 2) food insecurity, 3) transportation problems, 4) utility help needs and 5) interpersonal safety. Based on the screening results, patients can be referred to the Access Health Stark County for linkage to appropriate community services and resources. Access Health Stark County, a free service to Stark County residents, serves as the link between provider, community and participant by connecting referred patients to the community resources needed so they may focus on reaching their full health potential. In the first 21 months of the program, 38.94% (125/321) of referred patients enrolled in Access Health Stark County program. Access Health Stark County staff connect enrolled participants to community resources to help mitigate identified needs such as health insurance, primary care services, transportation, legal aid, food, safe housing, medication and employment. They provide a summary of the top client needs, the percent of enrolled clients experiencing the need by timeframe and the community agency that provides services to meet the needs (Figure 18). Access Health Stark County community health workers also educate on a variety of topics including pregnancy care, managing chronic illness, medication adherence and interactions with their primary care provider.

Figure 18 Top Needs of Access Health Stark County Program Enrolled Clients (October 2020 to June 2022)

Need	Year 1: Oct to Dec 2020	Year 2: Jan to Dec 2021	Year 3: Jan to June 2022	Community Agency Resources
Primary Care Provider	46%	42%	26%	Federally Qualified Health Centers, Primary Care Providers accepting new Medicaid clients
Medication Assistance	46%	38%	23%	Beacon Charitable Pharmacy
High ReAdmit	46%	14%	3%	CHW client education
High ED User	38%	7%	3%	CHW clients education
Behavioral Health Services	31%	15%	25%	Coleman, CommQuest, Phoenix Rising, AVO Behavioral Health and Addiction Recovery
Food	23%	22%	14%	Akron Canton Food Bank, Hope Outreach
Transportation	15%	26%	32%	Access Health Stark County bus passes, Insurance benefit rides
Health Insurance	8%	46%	18%	Medicaid via Ohio Department of Job & Family Services, Marketplace
Housing	8%	22%	23%	ICAN, SMHA, Canton Towers
Health Education	15%	60%	21%	CHW client education
Financial	8%	44%	25%	Salvation Army, Ohio Department of Job & Family Services, Catholic Charities
Healthcare Appointment Adherence	23%	38%	6%	CHW client education & reminders

Source: Access Health Stark County

Process for Identifying and Prioritizing Needs

Identifying priority health needs is an important element of a CHNA that informs strategies to address the needs. In June 2022, the CHA Advisory Committee (see Appendix 1 Organizations that Collaborated or Assisted as an Advisory Committee member) hosted a Stark County Health Improvement Summit with CMOR reporting on the Stark County CHA results. Hospitals and community stakeholders completed the process to distinguish the most pressing community health needs and selected two priority health needs based on continued magnitude of the need, severity of the need, involvement of vulnerable populations, existing interventions focused on the issue, issues that are root causes of other needs and trending health concerns in the community. Additional prioritization criteria included the importance of each need to community members, evidence that an intervention can change the problem and alignment with community organizations' existing priorities. Health Improvement Summit participants prioritized Mental Health Services (access, addiction, suicide) and Access to Healthcare as Stark County identified priority health needs for 2023-2025.

The Aultman Health Foundation CHNA Advisory Committee (Appendix 2) used group discussion to achieve consensus on identification of priority health needs to address. In making the selection, the CHNA Advisory Committee considered the continued magnitude of the need, severity of the need, involvement of vulnerable populations, existing interventions focused on the issue, issues that are root causes of other needs, importance of each need to community members, evidence that an intervention can change the problem and alignment with existing priorities. Additionally, members considered the ability of Aultman Alliance Community Hospital, Aultman Hospital and Aultman Specialty Hospital to contribute resources to address the health concern.

Prioritized List of Health Needs

The following summary and synthesis of these data develops a picture of overall community health highlighting priority health needs of Stark County populations. The identified priority health needs will be addressed through interventions detailed in the 2023 – 2025 Joint Aultman Alliance Community Hospital, Aultman Hospital, Aultman Specialty Hospital Implementation Strategy.

Significant health needs for Aultman Alliance Community Hospital, in priority order:
1. Mental Health Services – access, addiction, suicide
2. Access to Healthcare – primary care

Significant health needs for Aultman Hospital, in priority order:
1. Mental Health Services – access, addiction, suicide
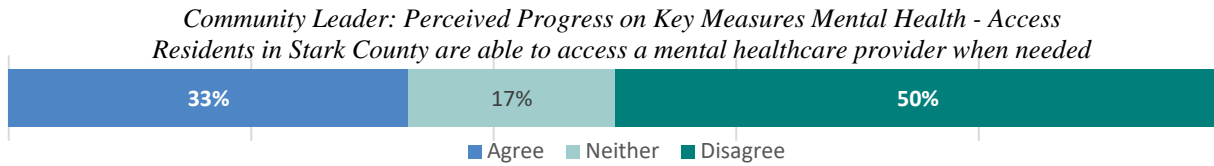2. Access to Healthcare – primary care

Significant health need for Aultman Specialty Hospital, in priority order:
1. Mental Health Services – access, addiction

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Description of Priority Health Need 1 Mental Health (Access, Addiction, Suicide)

The mental health priority health need encompasses access to mental health services, addiction and suicide. Access to mental health care focuses on the integration of mental health services in primary care and reduction of wait times for mental health services. Addiction is a treatable, chronic medical disease involving complex interactions among brain circuits, genetics, the environment and an individual's life experiences. People with addiction use substances or engage in behaviors that become compulsive and often continue despite harmful consequences. Prevention efforts and treatment approaches for addiction are generally as successful as those for other chronic diseases (American Society of Addiction Medicine, 2022). The addiction priority health need encompasses programs and services for the prevention and treatment of addiction and the prevention of unintentional drug overdose deaths. The combined age groups suicide death rate in Stark County has decreased over the last five years from 18.8 to 15.3. The suicide death rate for combined age groups in Stark County is still higher than the state of Ohio. Youth suicide prevention remains a priority focus in Stark County. A third of community leaders (33%) agreed, half of community leaders (50%) disagreed that "*Residents in Stark County are able to access a mental healthcare provider when needed*" (Figure 19).

Figure 19 Community Leader Survey Item: Residents in Stark County are able to access a mental healthcare provider when needed.

Community Leader: Perceived Progress on Key Measures Mental Health - Access
Residents in Stark County are able to access a mental healthcare provider when needed

33%	17%	50%

■ Agree ■ Neither ■ Disagree

Source: 2022 Stark County Community Health Assessment

Potential Resources to Address Mental Health

Figure 20 Potential Resources to Address Mental Health	
Mental Health Access	
Name	Access Health Stark County
Website	http://accesshealthstark.org/
Description	Access Health Stark County provides access to a coordinated system of healthcare and community resources for those that are underserved and uninsured in our community. The agency is focused on providing community residents a chance to live a better life through the following programs and initiatives: ▪ Community Health Worker Training Center. ▪ Physician Support Program. ▪ Peer Support Learning Community. ▪ Destination U! ▪ Access Health Membership. ▪ The WorkBridge.
Name	*Aultman Medical Group Behavioral Health and Counseling Center*
Website	https://aultman.org/home/services/medical-services/psychiatrics/#/
Description	Aultman Medical Group Behavioral Health and Counseling Center provides understanding and supportive outpatient psychiatric treatment with a broad array of treatment options personalized to the individual. These treatment options include medication management, psychiatric services, individual therapy, group therapy, dialectical behavioral therapy and interpersonal effectiveness.
Name	*Aultman Alliance Community Hospital Senior Care Unit*
Website	https://aultmanalliance.org/home/services/senior-care/
Description	A 12-bed inpatient psychiatric unit that provides treatments to enhance coping skills to help maintain or improve senior independence to provide a more satisfying lifestyle. Services include a sensory suite, robust dehydration prevention protocol, palliative care services and routine family meetings.
Name	*Child and Adolescent Behavioral Health*
Website	https://www.childandadolescent.org/
Description	Child and Adolescent Behavioral Health, a non-profit, full service, trauma-informed mental health organization, specializes in the emotional and behavioral needs of children, adolescents, young adults and their families. The agency offers behavioral health services and products that help children, youth and families successfully meet life's challenges. Child and Adolescent Behavioral Health offers and supports the following programs: • Individual, Group & Family Therapy/Counseling. • Peer Advocate Services. • Prevention Services. • Diagnostic Assessment. • Case Management.

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Figure 20 Potential Resources to Address Mental Health	
	• Psychiatric Evaluations & Medication Management. • Trauma Informed Day Treatment. • School-Based Consultation. • Early Childhood. • Summer Workshops.
Name	*Coleman Professional Services*
Website	www.colemanservices.org
Description	Coleman Professional Services provides behavioral health and rehabilitation programs that improve the lives of individuals and families. The agency is committed to fostering recovery and building independence through adult psychiatric and case management services, the crisis intervention & recovery center, FIRST, Jail Diversion programs and housing services.
Name	*CommQuest Services Inc.*
Website	https://commquest.org/
Description	CommQuest Services Inc. provides a range of services from prevention, mental health, substance abuse and social services. The agency provides hope to all people through prevention, advocacy, support, education, treatment and recovery. CommQuest's mental health services are designed to assist individuals who are seeking assistance for an emotional, behavioral or severe and persistent mental health illness. The following programs are designed to assist individuals start and maintain a sober life: • Individual, Group & Family Counseling. • Case Management. • Psychiatric. • Supported Employment. • School Based Service (Early Childhood, Prevention, Mental Health).
Name	*National Alliance on Mental Health NAMI Stark County*
Website	http://namistarkcounty.org/
Description	NAMI Stark County is a grassroots organization dedicated to improving the lives of people who have been touched by mental illness. NAMI provides and supports public education; family and consumer peer education; advocacy on behalf of people living with mental illness; and public events that raise funds and awareness.
Name	*Stark County Family Council*
Website	www.starkfamilycouncil.org/
Description	Stark County Family Council is a partnership of local governmental entities, community agencies and families who work together to promote a system of care for families with children/youth ages birth through 21. The partnership was created to open a dialogue among service organizations and families in order to create a broader awareness of important child and family issues. Stark County Family Council supports and/or provides the following programs and initiatives: WrapAround, Service Review Collaborative, Help Me Grow, Ohio Children's Trust Fund and Trauma and Resiliency.
Name	*Stark County Mental Health and Addiction Recovery (StarkMHAR)*
Website	https://starkmhar.org/

Description	StarkMHAR is a multi-faceted behavioral health board comprised of expert professionals, dedicated volunteers and concerned community leaders. The agency believes in hope, wellness and recovery for everyone. Stark MHAR provides and/or supports the wellness and recovery innovative collaborations, education and advocacy:
	• Care Teams.
	• Mobile Response.
	• Crisis Intervention Team.
	• Mental Health First Aid.
	• Trauma Informed Care.
	• Bullying Prevention.
	    o Crisis Text Line.
	    o The Olweus Program.
	• Behavioral Health Access and Integration Collaborative.

Mental Health Addiction	
Name	*Arrow Passage Recovery*
Website	https://www.arrowpassage.com/
Description	Arrow Passage Recovery provides the highest quality family and community oriented chemical-dependency treatment program, placing a great emphasis on rebuilding lives and families within the community. Patients move through treatment at their own pace using therapies that are most effective for them. Family education and support is an integral part of every patient's program.

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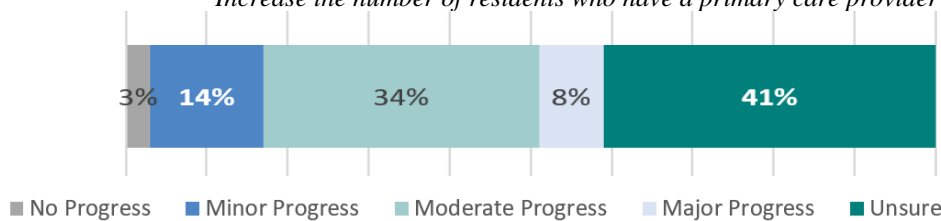|	Figure 20 Potential Resources to Address Mental Health
Name	*Canton Addiction Services, LLC*
Website	http://www.cantonaddiction.com/
Description	Canton Heroin and Opiate Addiction Services provides Suboxone, Subutex, Buprenorphine generic equivalents to treat heroin and opiate addiction. The agency also provides psychiatric care, motivational enhancement therapy and relational psychotherapy during visits to enhance outcomes and abstinence.
Name	*Coleman Professional Services*
Website	www.colemanservices.org
Description	Coleman Professional Services provides behavioral health and rehabilitation programs that improve the lives of individuals and families. The agency is committed to fostering recovery and building independence through addiction recovery, diagnostic assessment and individual, group and family counseling.
Name	*CommQuest Services Inc.*
Website	https://commquest.org/
Description	CommQuest Services Inc. provides a range of services from prevention, mental health, substance abuse and social services. The agency provides hope to all people through prevention, advocacy, support, education, treatment and recovery. CommQuest's addiction services include a continuum of care ranging from detox to outpatient treatment. The following programs are designed to assist individuals start and maintain a sober life: • Bright House. • Deliverance House. • Detox & Recovery Unit at Aultman Hospital. • Medicated Assisted Recovery. • Mom + Me Recovery. • Regional Center – Detox & Recovery. • Smith House. • Wilson Hall.
Name	*Stark County Mental Health and Addiction Recovery*
Website	https://starkmhar.org/
Description	Stark MHAR is a multi-faceted behavioral health board comprised of expert professionals, dedicated volunteers and concerned community leaders. The agency believes in hope, wellness and recovery for everyone. Stark MHAR provides and/or supports the following wellness and recovery innovative collaborations, education and advocacy: • Stark County Opiate Task Force. • Drug Free Stark County. • Opiate Hotline. • Opiate Overdose Kit. • Project DAWN. • BOLO – Parent Resources. • Drug Drop-Off Locations (17).
Name	*The Lenzy Family Institute*
Website	https://www.psychiatristcantonoh.com/
Description	The Lenzy Family Institute provides a comprehensive range of substance abuse prevention, treatment and recovery support services that include diagnostic assessment; individual, group and family counseling; rehabilitation; therapy; drug screening; pharmacological management; and an intensive outpatient program.
Mental Health Suicide	
Name	Stark County Mental Health and Addiction Recovery (StarkMHAR)
Website	https://starkmhar.org/

Description	StarkMHAR is a multi-faceted behavioral health board comprised of expert professionals dedicated volunteers and concerned community leaders. The agency believes in hope, wellness and recovery for everyone. Stark MHAR provides and/or supports the wellness and recovery innovative collaborations, education and advocacy:
	• Suicide Prevention Coalition.
	• Aultman Hospital and Aultman Alliance Community Hospital implemented elements of Zero Suicide.
	• Suicide Prevention.
	   o Crisis Hotline.
	   o FIRST Stark County.
	   o Man Therapy.
	   o Education & Talking Points.

Name	U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration
Website	https://www.samhsa.gov/

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Figure 20 Potential Resources to Address Mental Health	
Description	▪ **988 Suicide and Crisis Lifeline**. In 2020, Congress designated the new 988 dialing code to be operated through the existing National Suicide Prevention Lifeline. SAMHSA sees 988 as a first step towards a transformed crisis care system in America. ▪ **QPR (Question, Persuade, Refer) Suicide Prevention Training**. QPR is a Suicidal Thinking, Behavior, Attempts prevention training for participants to be able to recognize the warning signs of Suicidal Thinking, Behavior, Attempts and question, persuade and refer people at risk for Suicidal Thinking, Behavior, Attempts for help.

Description of Priority Health Need 2 Access to Healthcare - Primary Care

The Access to Healthcare priority health need encompasses programs and services to expand community access to high-quality, affordable, holistic and culturally relevant basic healthcare, work to reduce barriers impacting access to care and improve coordination of care to ensure community members have equitable access to care. Aultman Health Foundation CHNA Advisory Committee identified the Key Measure Access to Care – Primary Care as a priority health need. The ratio of population to primary care physicians is slightly better in Stark County (1,250:1) than it is for the state of Ohio (1,300:1). Less than half of community leaders, 48.0%, agreed that "*Residents in Stark County are able to access a primary care doctor when needed*" with 8.0% strongly agreeing, and nearly a quarter, 24.0%, who disagreed with this statement. Forty-two percent (42%) of community leaders felt there has been moderate or major progress in increasing the number of residents who have a primary care provider, 14% said there was minor progress and 3% said there was no progress (Figure 21).

Figure 21 Community Leader Survey Item: Increase the number of residents who have a primary care provider

Community Leader: Perceived Progress on Key Measures Access to Care – Primary Care
Increase the number of residents who have a primary care provider

3%	14%	34%	8%	41%

■ No Progress ■ Minor Progress ■ Moderate Progress ■ Major Progress ■ Unsure

Source: 2022 Stark County Community Health Assessment

Potential Resources to Address Access to Healthcare (Primary Care)

Figure 22 Potential Resources to Address Access to Healthcare – Primary Care	
Name	*Access Health Stark County*
Website	http://accesshealthstark.org/
Description	Access Health Stark County provides access to a coordinated system of healthcare and community resources for those that are underserved and uninsured in our community. The agency is focused on providing community residents a chance to live a better life through the following programs and initiatives: • Community Health Worker Training Center. • Physician Support Program. • Peer Support Learning Community. • Destination U! • Access Health Membership. • The WorkBridge.
Name	*AultCare MAC Trailer Health and Wellness Center*
Website	*https://www.aultcare.com/client-pages/mac-trailer*
Description	AultCare and MAC Trailer have partnered to add more resources to the health and wellness center to promote clinical quality and wellness among the employees at the MAC Trailer locations in Alliance, Kent & Salem. The health and wellness center offers services to promote, protect and restore each employee's health to facilitate optimal quality of life and maximize productivity. Additionally, the health and wellness center streamlines access to complete an individual's well-being through AultCare's Care Coordination platform of services. An on-site physician assistant provides service to all MAC Trailer Manufacturing employees. Full-time, benefit-eligible employees and spouses (Alliance location only) have access to an AultCare registered nurse three days a week who assists employees in taking a proactive approach to their health and wellness. An AultCare registered dietitian will also be available one day a week to educate employees regarding their nutritional needs.
Name	*Aultman Alliance Community Hospital's University of Mount Union Student Health Center*

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Figure 22 Potential Resources to Address Access to Healthcare – Primary Care	
Website	*https://www.mountunion.edu/health-center*
Description	Mount Union's health center contracts with Aultman Alliance Community Hospital. The health center promotes good health practices, offers short-term clinical care and counseling services where students can receive short-term counseling in-house or they can be linked with a counselor in the Alliance area for something more long-term.
Name	*Aultman Medical Group Telehealth in School-based Clinics*
Website	https://aultman.org/news/march-2022/aultman-receives-1-9-million-grant-from-ohio-department-of-health-to-provide-and-expand-primary-and-preventive-care-services-in-schools/#/
Description	The Ohio Department of Health awarded Aultman Health Foundation with a $1.9 million grant to bring primary and preventive care services to Northeast Ohio schools as part of Governor Mike DeWine's $25.9 million statewide initiative to open or expand school-based health centers throughout Ohio. The grant funding will improve access to primary care telehealth and other services for students and staff at five rural school districts by creating new school-based health clinics at Brown Local School District, Claymont City School District, Minerva Local School District (Stark County) and Tuscarawas Valley Local School District, as well as expanding the existing school-based health clinic in Carrollton Exempted Village School District. Aultman will create 14 new school-based health clinics and expand two existing school-based health centers within Carroll, Stark and Tuscarawas counties. The school-based health centers take a whole-child approach, addressing not only health needs, but also social service needs. These health centers operate as extensions of existing school nursing services to provide students with improved access to primary care services, help coordinate behavioral health services and collaborate with community health workers to address community health needs. The new health centers replicate Aultman's successful school-based health clinic telehealth model. In April 2018, Aultman Health Foundation established telehealth service within a school-based health clinic at Rittman Exempted Village School District. In October 2018, Aultman expanded its school-based health clinic model to serve Orrville City School District and Southeast Local School District in Wayne County. In January 2022, Aultman's fourth school-based health clinic telehealth program went live in Carrollton Exempted Village School District in collaboration with the Carroll County General Health District. In response to individual school needs, Aultman Health Foundation will partner with many community organizations such as Alcohol, Drug Addiction & Mental Health Services (ADAMHS) Board of Tuscarawas and Carroll counties, Carroll County General Health District, East Central Ohio Educational Service Center, Stark County Health Department, Tuscarawas County Health Department and more to provide staffing, training and community support services.
Name	*Beacon Charitable Pharmacy*
Website	http://beaconpharmacy.org
Description	Beacon Charitable Pharmacy provides prescription medication assistance to uninsured and underinsured residents in Stark and Carroll counties who have low to moderate income. Beacon is an innovative agency that coordinates prescription assistance, maximizes resources, expands the utilization of prescription assistance programs throughout the community, advocates for vulnerable populations and provides a practice site for NEOMED's pharmacy students.
Name	*Social Service Manual*
Website	https://integratedhealthcollaborative.org/about-us/patient-resources/#/ & click 'Social Service Manual'
Description	The Social Service Manual provides a listing of social and health services available in the county that accept patients and/or community residents for a variety of services including medical, dental, home health care and much more.
Name	*Stark Help Central*
Website	www.starkhelpcentral.com/
Description	Stark Help Central is an easy-to-use navigation tool to search for resources. The organization is a safe place to turn for support. Stark Help Central improves the lives of children, teens and young adults by connecting young people and their families with hundreds of community resources to help them overcome challenges and achieve their full potential. This is accomplished through new prevention efforts, amplifying awareness and mobilizing resources to achieve real, lasting results.
Name	*United Way 2-1-1*
Website	https://www.uwstark.org/unitedway2-1-1helps
Description	United Way 2-1-1 is an easy to remember three-digit toll-free telephone number that instantly connects the community to hundreds of local resources for emergency housing, healthcare services, food assistance, drug rehabilitation and more. 2-1-1 can be accessed through a computer or phone 24 hours a day, seven days a week.

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Aultman Health Foundation
Aultman Alliance Community Hospital
Aultman Hospital
Aultman Specialty Hospital
2020-2022 Joint Evaluation of Impact Report

The Aultman Health Foundation Joint Aultman Alliance Community Hospital, Aultman Hospital, Aultman Specialty Hospital 2020-2022 Implementation Strategy was developed following the 2019 CHNA and served as a guide to improve the health of the community by addressing specific strategies and activities. The implementation strategy identified significant priority health needs, programs and services, resources and community partners that Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital and/or Aultman Specialty Hospital and affiliated programs and services targeted to improve the overall health of Stark County residents. Aultman Alliance Community Hospital adopted Access to Healthcare, Mental Health, Infant Mortality and Obesity & Healthy Lifestyle as the significant priority health needs for the Stark County patient population served by the hospital. Aultman Hospital adopted Access to Healthcare, Mental Health, Infant Mortality, Obesity & Healthy Lifestyle and Housing social determinant of health as the significant priority health needs for the Stark County patient population served by the hospital. Aultman Specialty Hospital adopted Mental Health (Heroin/Opioid Use) and Obesity & Healthy Lifestyle as the significant priority health needs for the Stark County patient population served by the hospital. Each hospital addressed the priority health needs in the 2020-2022 Joint Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital, Aultman Specialty Hospital Implementation Strategy. Operationalization of the 2020-2022 Joint Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital, Aultman Specialty Hospital Implementation Strategy began in early 2020. This report section provides a snapshot of the progress made towards the 2020-2022 Joint Implementation Strategy priority health need outcomes through June 2022. At the time of this report, first and second quarter 2022 data was included as available. The 2020-2022 Joint Implementation Strategy will continue to be implemented through 2022; the 2023-2025 Joint Aultman Health Foundation, Aultman Alliance Community Hospital, Aultman Hospital and/or Aultman Specialty Hospital Implementation Strategy will begin in 2023.

Aultman Alliance Community Hospital

Priority Health Need 1: Access to Healthcare

Description

Access to high-quality, affordable, holistic and culturally relevant care. Aultman Healthcare Delivery System aims to expand its presence in the community, work to reduce barriers impacting access to care and improve coordination of care to ensure community members have equitable access to high-quality primary, acute, specialized, urgent and emergency care in appropriate settings.

Aultman Alliance Community Hospital Programs and Services: Access to Healthcare

Aultman Alliance Community Hospital implemented the following programs and services to address the priority health need access to healthcare.

AultmanNow Telehealth Services

Since March 2020, Aultman Alliance Community Hospital has offered the AultmanNow app for telehealth services that connect community members for one-on-one scheduled or on-demand discussions with an experienced, board-certified physician from home, work or school 24/7/365 about non-emergency ailments like sore throat, cough, cold, fever and more. In 2020, the Department of Health and Human Services took steps that enabled Aultman to expand telehealth services during the COVID-19 pandemic. The Centers for Medicare & Medicaid Services telehealth waivers made it easier for people enrolled in Medicare, Medicaid and Children's Health Insurance Program to receive medical care through telehealth services during the COVID-19 pandemic public health emergency. Some of the changes allow providers to:
• Conduct telehealth with patients located in their homes and outside of designated rural areas.
• Practice remote care, even across state lines, through telehealth.
• Deliver care to both established and new patients through telehealth.
• Bill for telehealth services (both video and audio-only) as if they were provided in person.
In 2020, the Federal Communications Commission awarded Aultman a $294,749 COVID-19 Telehealth Program grant, part of the $2 trillion Coronavirus Aid, Relief and Economic Security (CARES) Act, to support telehealth expansion amid the pandemic. Aultman used the funding for a telehealth platform, office equipment, mobile hotspots and telehealth equipment to enhance patient

access to healthcare via smartphones, tablets and computers. As a result, Aultman was able to rapidly expand access to telehealth services adding 400 clinicians and 17 telehealth services.

Telehealth services connect community members with the following provider services from Aultman Medical Group, an affiliate of Aultman Health Foundation:
- Aultman Primary Care Practices (10 practices)
- AultmanNow Urgent Care Centers (4 centers)

Telehealth services may also connect community members with the following Aultman Hospital interprofessional services:
- Aultman Behavioral Health Services
- Aultman Cardiovascular Consultants
- Aultman Cardiovascular Rehabilitation
- Aultman Cardiothoracic Surgery
- Aultman Care Coordination
- Aultman Clergy
- Aultman Diabetes
- Aultman General Surgery
- Aultman Give It Up! Program
- Aultman Grief Counseling
- Aultman Infectious Disease consultation
- Aultman Lactation Services
- Aultman Neurology
- Aultman Nutrition
- Aultman Oncology Services
- Aultman Outpatient Therapy Services
- Aultman Pain Management
- Aultman Palliative Care
- Aultman Pulmonary Rehabilitation
- Aultman Radiation Oncology Services
- Aultman Rural Health Clinic (Wayne County)
- Aultman Urology
- Aultman Weight Management

AultCare, an affiliate of Aultman Health Foundation, offers enrollees AultCare Wellness via AultmanNow telehealth.
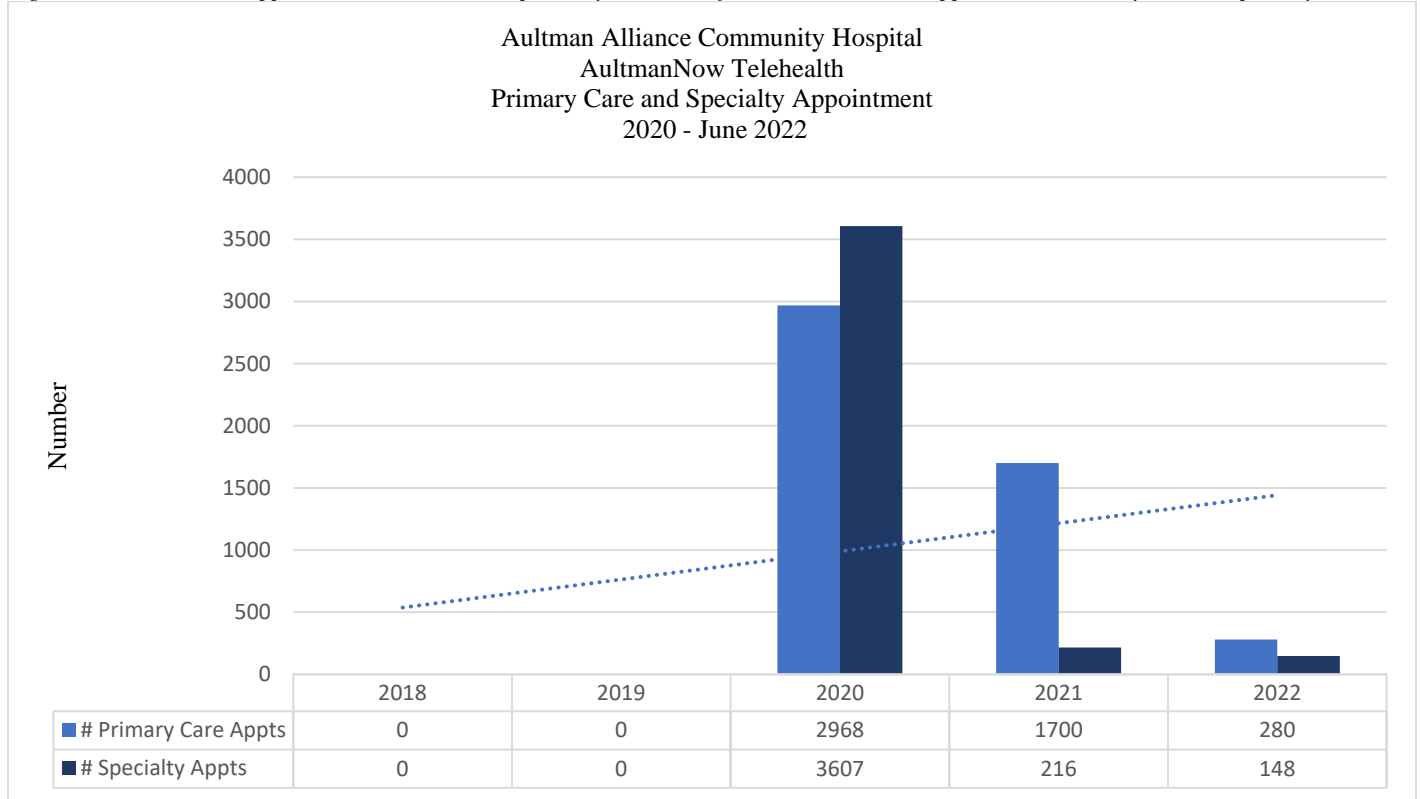
Telehealth services also connect community members with contracted Amwell providers for the following services:
- Urgent care for non-emergency ailments (e.g., sore throat, cough, cold, fever) for a flat $59 patient fee with no insurance necessary.
- Behavioral health.

Evaluation of Impact

In March 2020-2022, Aultman Medical Group Family Medicine of Alliance physicians offered both telehealth appointments and office visits providing additional access to primary care and specialty services. The launch of telehealth services in March 2020 provided an alternative to office visits during the COVID-19 pandemic increasing access to healthcare. Aultman Medical Group Family Medicine of Alliance provided 2,573 primary care telehealth appointments in March to December 2020; 1,700 primary care telehealth appointments in 2021; and 280 primary care telehealth appointments in the first half of 2022. Aultman Medical Group Family Medicine of Alliance provided 633 specialty appointments in March to December 2020; 216 specialty care appointments in 2021; and 148 specialty care appointments in January to June 2022 (Figure 23).

Figure 23 Aultman Now App: Aultman Medical Group Family Medicine of Alliance Telehealth Appointments Primary Care & Specialty

Aultman Alliance Community Hospital
AultmanNow Telehealth
Primary Care and Specialty Appointment
2020 - June 2022

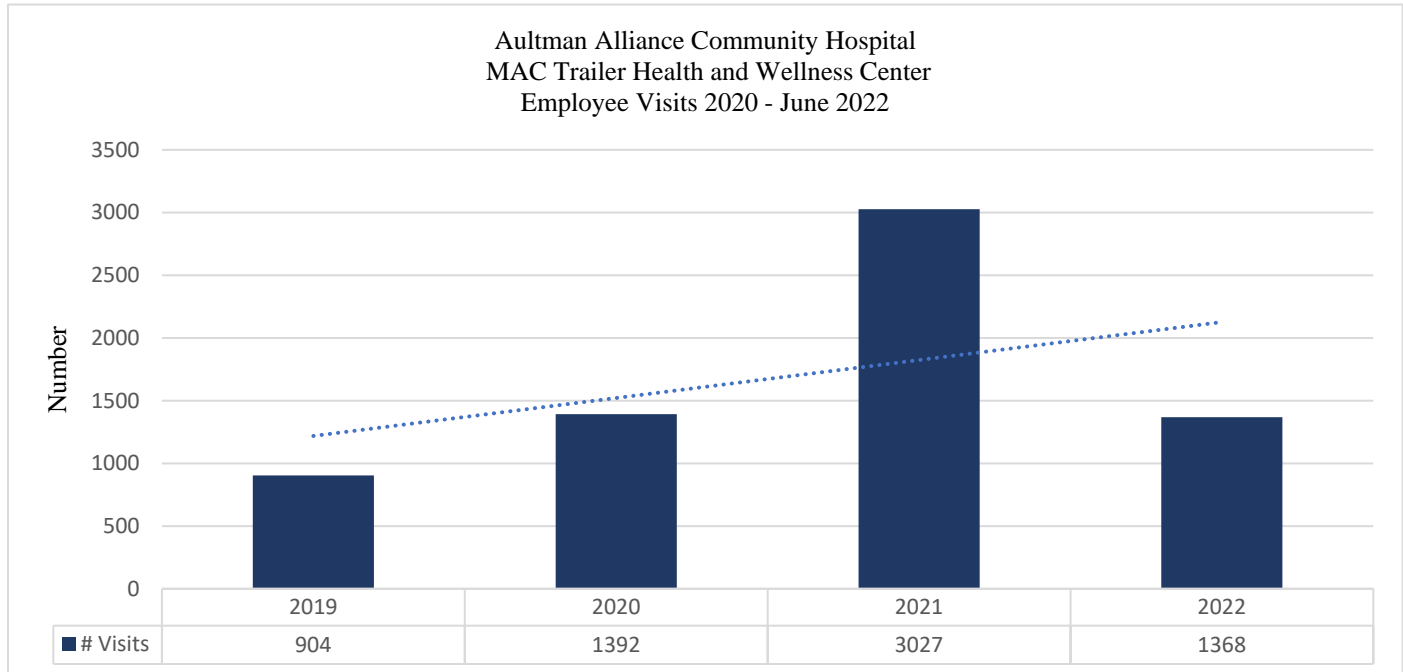|	2018	2019	2020	2021	2022
# Primary Care Appts	0	0	2968	1700	280
# Specialty Appts	0	0	3607	216	148

Source: Aultman Telehealth Services

MAC Trailer Health and Wellness Center

Since 2013, Aultman Alliance Community Hospital has contracted with MAC Trailer Manufacturing, one of the city's largest employers, to offer on-site preventive and treatment services to its employees. Services have expanded from preventive and minor illness treatment to a chronic disease management model. Services include biometric screening, laboratory testing, health risk screening, influenza vaccination and an outpatient clinic that operates for treatment of minor illness, non-work-related minor injury, health counseling and education. AultCare, an Aultman Health Foundation affiliate, and MAC Trailer partner to add more resources to the Health & Wellness Center to promote clinical quality and wellness among the employees at the MAC Trailer locations in Alliance, Kent & Salem. The Health & Wellness Center offers services to promote, protect and restore each employee's health to facilitate optimal quality of life and maximize productivity. Additionally, the Health & Wellness Center streamlines access to complete an individual's well-being through AultCare's Care Coordination platform of services. An on-site physician assistant provides service to all MAC Trailer employees. Full-time, benefit-eligible employees and spouses (Alliance location only) have access to an AultCare registered nurse three days a week who assists employees in taking a proactive approach to their health and wellness. An AultCare registered dietitian will also be available one day a week to educate employees regarding their nutritional needs.

Evaluation of Impact

In 2019, the MAC Trailer Health and Wellness Center offered in-person and telehealth visits providing work-based access to primary care services to employees of MAC Trailer Manufacturing. In 2020-2021, the MAC Trailer Health and Wellness Center offered in-person visits and telehealth visits during the COVID-19 pandemic. The MAC Trailer Health and Wellness Center served 904 MAC Trailer Manufacturing employees via in-person visits in 2019, 1,725 employees via in-person and telehealth visits in 2020 and 3,075 employees via in-person and telehealth visits in 2021. The MAC Trailer Health and Wellness Center had a trend of increased number of visits from 2019 to 2021 and provided more than triple the number of visits in 2021 as compared to 2019. In the first half of 2022, the clinic provided 1,368 in person, telehealth and telephonic visits (Figure 24).

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Figure 24 MAC Trailer Health and Wellness Center Visits

Aultman Alliance Community Hospital
MAC Trailer Health and Wellness Center
Employee Visits 2020 - June 2022

|	2019	2020	2021	2022
# Visits	904	1392	3027	1368

Source: AthenaHealth

University of Mount Union Student Health Center

Aultman Alliance Community Hospital staffs a Student Health Center located near The University of Mount Union campus. The student body primarily lives on campus and needs access to local primary care services. Aultman Alliance Community Hospital and the University of Mount Union collaborated through a contractual agreement to locate the Student Health Center on the hospital's campus. The health center focuses on health promotion, health protection, disease prevention and clinical care. The main purpose of the health center is to provide medical care for students who have short-term illnesses and injuries. In 2020-2021, due to the COVID-19 pandemic, the health center offered telehealth appointments and scheduled face-to-face appointments with intermittent reduced hours and closures. The health center offered drive-through COVID-19 testing for staff and students as needed. Mid-May 2021, the health center re-opened with normal hours for scheduled face-to-face appointments and COVID-19 testing. Before the COVID-19 pandemic, students could access services without an appointment. Due to the need for ongoing social distancing during the COVID-19 pandemic, the health center no longer accepts walk-in appointments. Students can call the health center and pre-register. Students are screened over the phone and may be given a telehealth appointment or a scheduled face-to-face appointment in the health center. In addition, students arriving for face-to-face appointments are screened for COVID-19 upon arrival. Scheduling appointments reduced student wait times. The center's hours and phone number are posted on the university's website for the students' convenience. University campus security offers transportation to students if needed.

Evaluation of Impact

In 2019-2021, the University of Mount Union Student Health Center offered hybrid access to primary care services. The health center served 2,280 students via face-to-face on-campus appointments in 2019, 1,392 students via face-to-face and telehealth appointments in 2020 and 1,998 students via face-to-face and telehealth appointments in 2021. The health center experienced reduced visits at the onset of the COVID-19 pandemic in 2020. Contributing factors included student transition to virtual coursework with some students moving off-campus, athletic program cancellation in Fall 2020 reduced the need for student-athlete visits for injury management, health center closure from mid-May to June 2020 temporarily reduced access and the need to schedule face-to-face appointments. In 2021, health center visits increased compared to 2020, with students transitioning back to face-to-face classrooms and the health center's transition back to usual hours of operations. In the first half of 2022, the health center provided 959 visits (Figure 25).

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Figure 25 University of Mount Union Student Health Center Student Visits

Aultman Alliance Community Hospital
Student Visits to University of Mount Union Student Health Center
2020 - June 2022

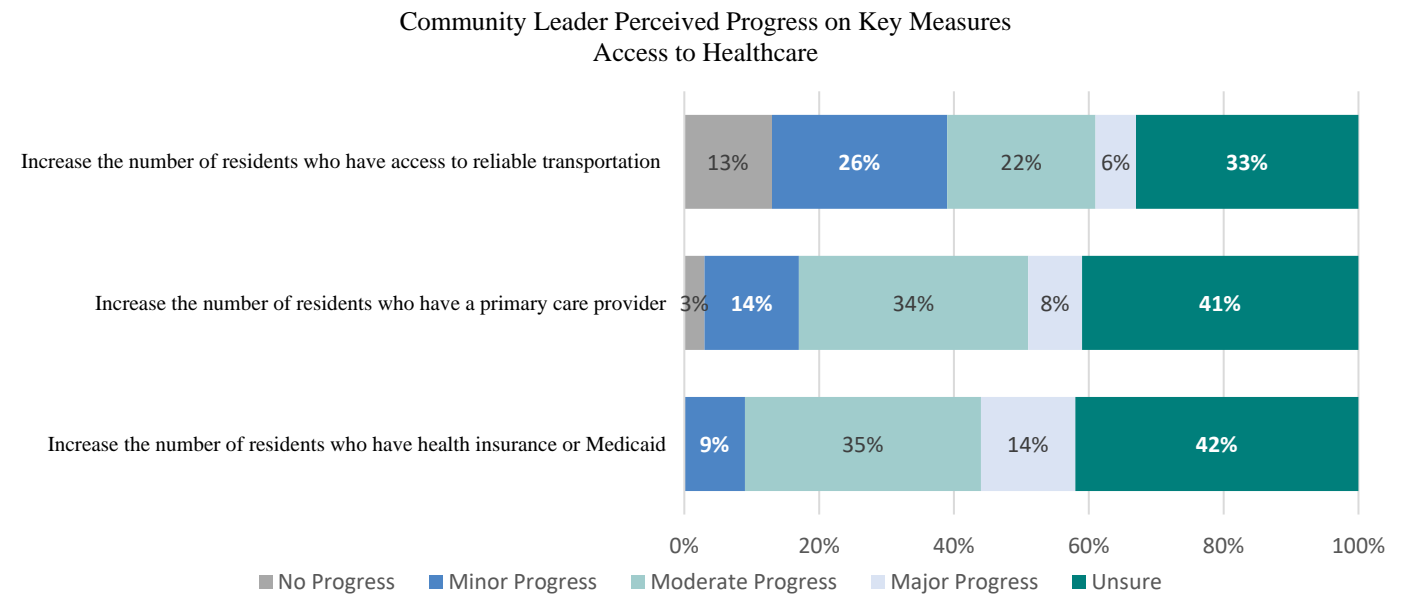|	2019	2020	2021	2022
# Student Visits University of Mount Union Student Health Center	2280	1392	1998	959
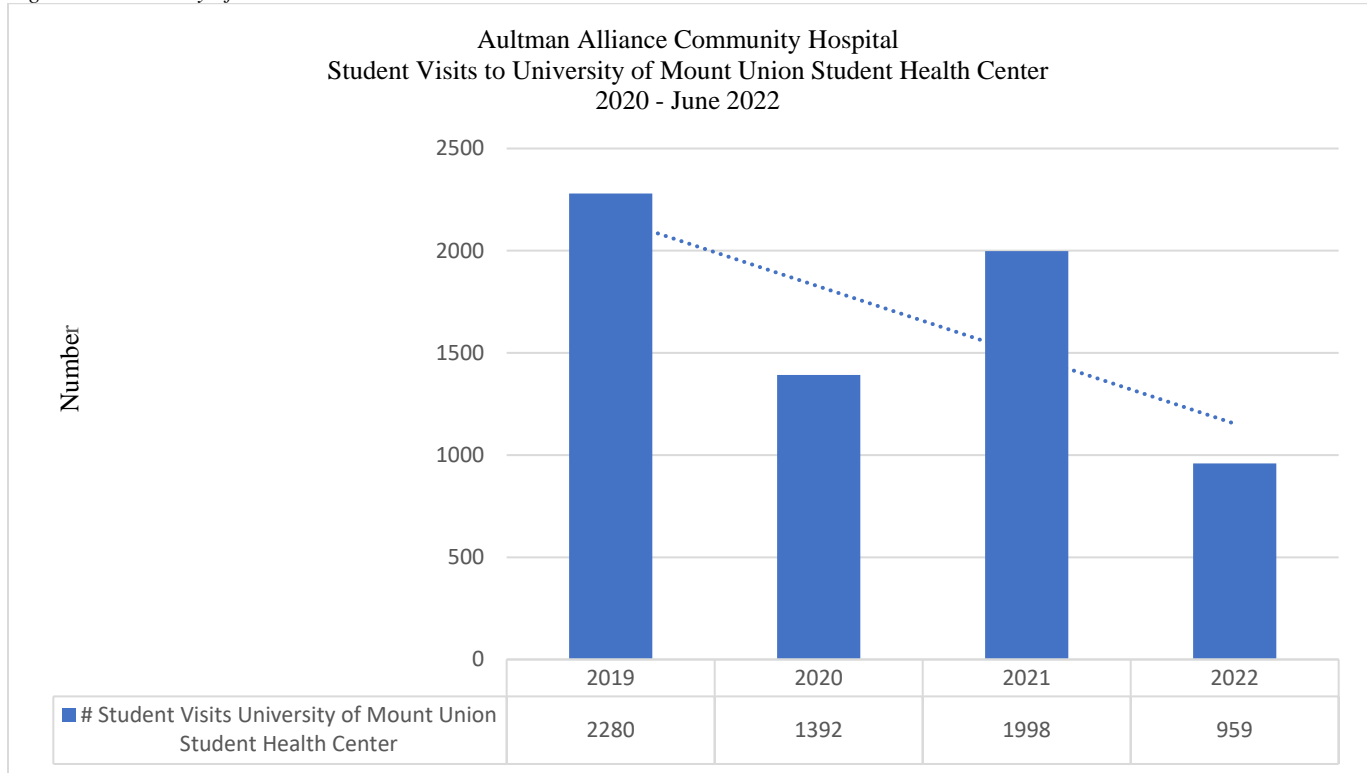
Source: AthenaHealth

Evaluation of Impact at the Stark County Level

More than half of community leaders (56.0%) agreed/strongly agreed that "*Residents in Stark County are able to access a primary care doctor when needed.*" Nearly a quarter, 24.0%, disagreed with this statement (Stark County Community Health Assessment). Forty-two percent (42%) of community leaders reported moderate/major progress in increasing the number of Stark County residents who have a primary care provider (Figure 26).

Figure 26 Community Leader Perceived Progress on Key Measures Access to Healthcare

Community Leader Perceived Progress on Key Measures
Access to Healthcare

	No Progress	Minor Progress	Moderate Progress	Major Progress	Unsure
Increase the number of residents who have access to reliable transportation	13%	26%	22%	6%	33%
Increase the number of residents who have a primary care provider	3%	14%	34%	8%	41%
Increase the number of residents who have health insurance or Medicaid		9%	35%	14%	42%

Source: 2022 Stark County Community Health Assessment

Community Partners for Access to Healthcare

- Alliance Community Medical Foundation

- Alliance Family Health Center
- Amwell telemedicine
- MAC Trailer Manufacturing
- Northeast Ohio Medical University (NEOMED)
- University of Mount Union

Priority Health Need 2: Mental Health

Description

The mental health priority health need encompasses access to mental health services, heroin/opioid use and youth suicide. Access to mental health care focused on the integration of mental health services in primary care, substance abuse treatment and violence prevention. The misuse of and addiction to heroin and opioids (including prescription pain relievers and synthetic opioids such as fentanyl) continues to be a national crisis. The Centers for Disease Control and Prevention estimates the "economic burden" at $78.5 billion a year (National Institute on Drug Abuse, 2019). Youth suicide prevention remains a priority focus in Stark County.

AultCare, an Aultman Health Foundation affiliate, launched the You Matter campaign to increase community awareness of the importance of mental health and decrease the stigma associated with mental illness. The message has spread across all corners of our communities. From our hospitals to the school systems, You Matter shares that everyone matters. In 2020-2021, AultCare collaborated with Child & Adolescence Behavioral Health to promote the message of You Matter from elementary school to high school students including support for the annual Stark County Children's Mental Health Awareness Week. In 2021, more than 42,500 students in 10 school districts benefited from the third annual Stark County Children's Mental Health Awareness Week. During this week, a unity video featured 21 high school mental health champions from the partnership school districts. AultCare provided You Matter messaging materials for Child & Adolescence Behavioral Health staff members and more than 350 Stark County school administrators including You Matter T-shirts, posters and notepads to reinforce the positive message to students. AultCare awarded 41 scholarships in 2020 and 40 scholarships in 2021 to one graduating senior from each high school in the five-county primary service area to recognize the students' resilience despite significant sacrifices.

Aultman Alliance Community Hospital Programs and Services: Mental Health (Access)

Aultman Alliance Community Hospital implemented the following programs and services to address the priority health need of mental health access to care.

Behavioral Health Access and Integration Collaborative

In 2019, the Aultman Behavioral Health Corporate Plan recognized the need for community collaboration to address access to mental health services in Stark County. As a result, Aultman Health Foundation engaged with community stakeholders to form an ad hoc Behavioral Health Strategy Workgroup to develop a sustainable long-term plan. In 2020, Aultman Health Foundation, StarkMHAR and the Stark County Educational Service Center funded a county-wide Chief Integration Officer (CIO) position to lead a community initiative for increasing access to Stark County mental health services. As a first step, the CIO is studying the scope of the need, identifying the social determinants of health that challenge people from accessing mental health services and leading integration and coordination of access to county mental health services and resources. The CIO formed a community Behavioral Health Access and Integration Collaborative (Collaborative), a Stark County initiative supported by Aultman Health Foundation, Stark Mental Health & Addiction Recovery and the Stark County Educational Service Center, that focuses on two primary goals: a) increase access to behavioral health services through innovative evidence-based models and b) address the Social Determinants of Health barriers and challenges that inhibit Stark County's residents from accessing behavioral health services.

In 2021, the collaborative formed subcommittees to a) establish HIPAA compliant practices for data sharing, b) establish a data usage process to facilitate community treatment services and care coordination between healthcare providers and c) study social determinants of health that influence access to behavioral health services. Aultman Alliance Community Hospital and Aultman Hospital plan to share data on patient utilization of emergency departments for behavioral health services. This information will be shared with stakeholders as a means of determining success of current initiatives used to address the community member mental health challenges and provide insight into unknown challenges that would need to be addressed with additional or new strategies. Through various sources of data (2017-2021), the collaborative hopes to identify trends in chronic use of emergency departments for behavioral healthcare, including the Aultman Alliance Community Hospital and Aultman Hospital emergency departments.

Evaluation of Impact

From September 2021 through April 2022, the Chief Integration Officer conducted six community meetings and 15 small focus groups hosted in the 17 Stark County school districts to ensure information gathering by locality. Community members participated in a virtual facilitated discussion regarding barriers and challenges posed by community social determinants of health and strategies to address them. Long-term plans include the creation of increased outpatient access points for behavioral health services through

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evidence-based models for integration into the primary care settings. This strategy is hoped to contribute to a decreased emergency department utilization rate for behavioral health conditions.

Aultman Alliance Community Hospital Senior Care Unit

Aultman Alliance Community Hospital maintains the 12-bed inpatient Senior Care Unit that offers clinical and behavioral initiatives including Palliative Care Services, a Sensory Suite, a robust Dehydration Prevention Protocol and routine family meetings. In 2021, inpatient volumes were lower than previous years related to the strategic decision to close the unit two different times to temporarily reassign staff for COVID-19 crisis response. While open, the census was capped to assure consistent nurse staffing for the patient population and avoid the temporary reassignment of nursing staff.

Evaluation of Impact

The Aultman Alliance Community Hospital Senior Care Unit experienced a steady decline in patient volumes between 2019 – June 2022. The 2019 number of patient days (3,985) was 50% more than the number of patient days (2,110) in 2021. In 2021, inpatient volumes were lower than previous years due to the strategic decision to close the unit twice to temporarily reassign staff as part of the COVID-19 crisis response. While open, the unit census was capped to provide consistent staffing for the patient population and avoid the temporary reassignment of nursing staff to other patient care units. In the first half of 2022, the unit had 1,257 patient days (Figure 27).

Figure 27 Aultman Alliance Community Hospital Senior Care Unit Patient Days

Aultman Alliance Community Hospital
Senior Care Unit Patient Volumes
2020- June 2022

	2019	2020	2021	2022
Senior Care Unit Patient Days	3985	2811	2110	1257
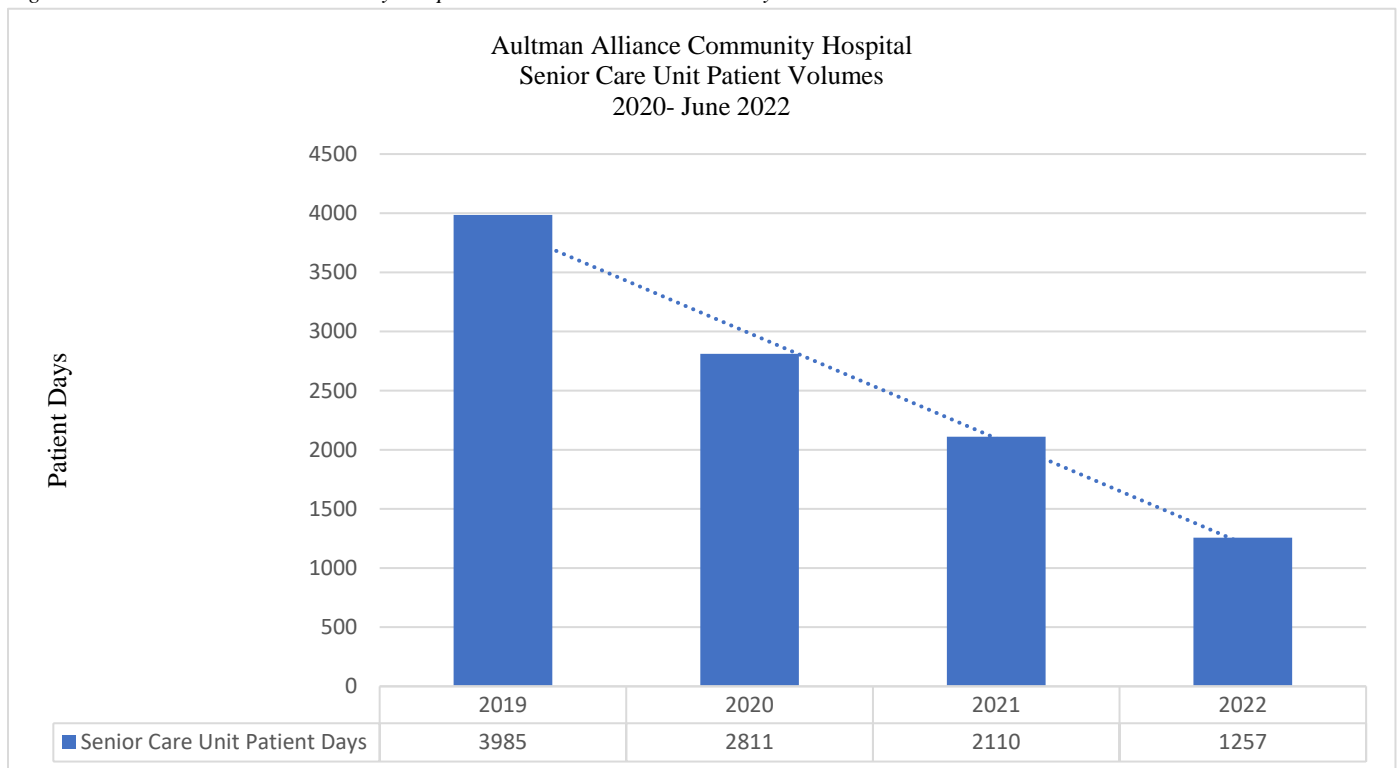
Source: Meditech

Community Partners for Mental Health (Access)
- Akron Children's Hospital
- AultCare
- Aultman Health Foundation
- Aultman Hospital
- Canton City Health
- Cleveland Clinic Mercy Hospital
- Coleman Professional Services
- CommQuest Services, Inc.
- Stark County Health Department
- Sisters of Charity Foundation
- Stark County Educational Service Center
- StarkMHAR

Aultman Alliance Community Hospital Programs and Services: Mental Health (Addiction)

Aultman Alliance Community Hospital implemented the following programs and services to address the priority health need of mental health, heroin and opioid use.

MedSafe Medication Disposal Site

Since 2019, Aultman Alliance Community Hospital partners with Sharps Compliance to reduce prescription medication abuse by providing solutions to safely dispose of expired and unused medications. A MedSafe collection and disposal receptacle is located just outside of the Aultman Alliance Community Hospital emergency room entrance. The specially designed receptacle allows for the safe and anonymous disposal of unused or expired over the counter and prescription medications, including controlled substances. The MedSafe receptacles are securely installed and can only be accessed and emptied by two hospital employees as required by the Drug Enforcement Administration. In 2020, Aultman Alliance Community Hospital began distributing an information sheet in discharge packets that describes how to safely dispose of unused and expired medications to increase community awareness.

Evaluation of Impact

From 2019-2021 there was an increasing trend in pounds of medication that community members returned to the MedSafe Collection site. In 2019 to 2022, the MedSafe Collection site removed more than 100% more weight of expired and unused medications from the community compared to 2019. Community members returned 51 pounds of medication in 2019, 149.5 pounds of medication in 2020, 129.55 pounds of medication in 2021 and 175.66 pounds of medication in the first half of 2022 (Figure 28).

Figure 28 Weight of MedSafe Collection Containers Destroyed in Pounds

	2019	2020	2021	2022
■ Pounds Medications Destroyed	51	149.5	129.55	175.66
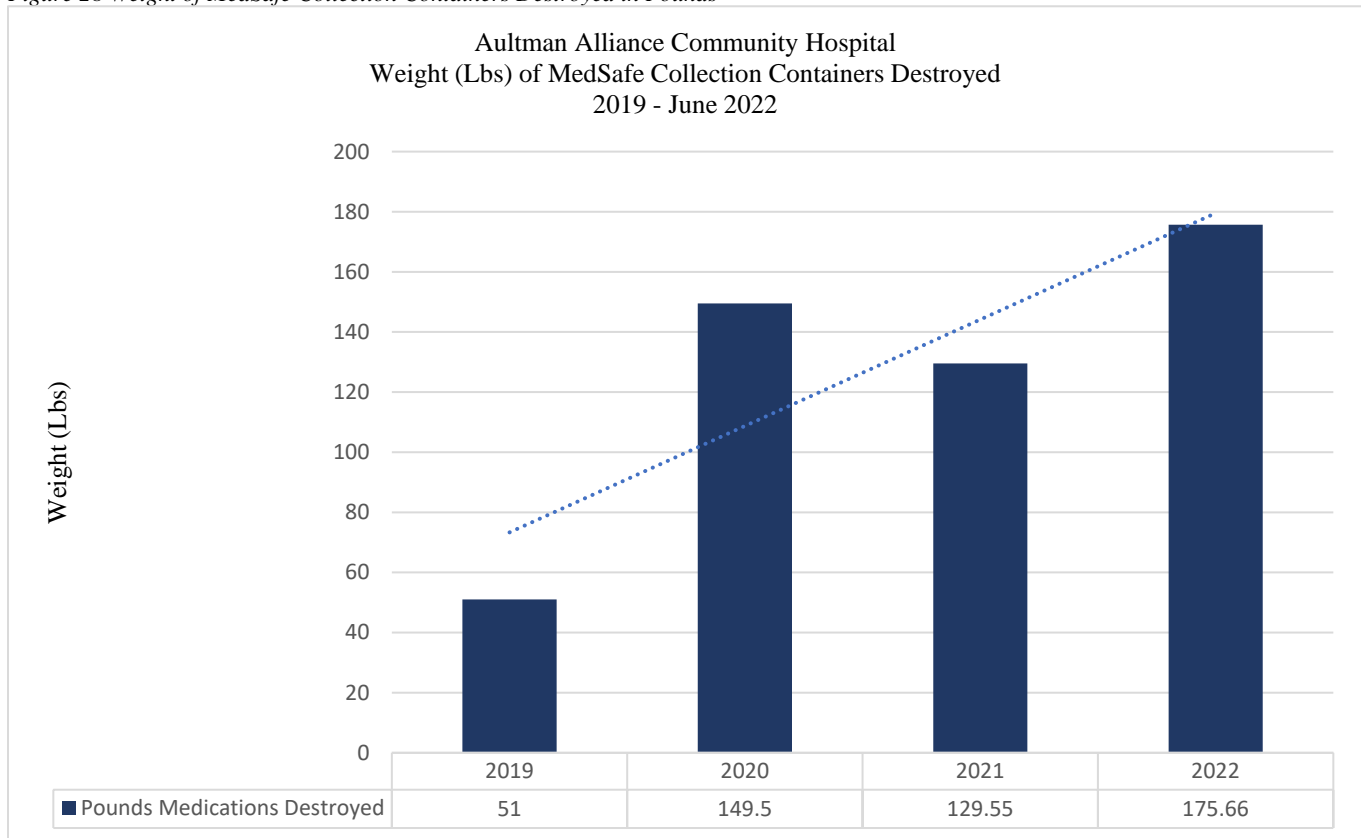
Source: MedSafe

Aultman Opioid Committee

The Aultman Opioid Committee is an integrated and standardized Aultman-wide committee with subcommittees that address the key drivers of safe opioid prescribing practices. In 2022, committee members explored additional areas of opportunity identified from a 2021 Ohio Hospital Association Gap Analysis including overdose policies, standard policies and protocols for opioids in the facility, standardized naloxone dispensing, buprenorphine training and cultural competence in the care of patients with opioid use disorder.

Subcommittee Information Technology

The subcommittee aims to enhance transitions between practitioners with the use of safe, effective and optimal use of technology in the clinical setting. Strategies include creating a dashboard for provider feedback (e.g., chronic and acute opioid measures such as benzodiazepine co-prescribing), making recommendations on the use of the Cerner Opioid Toolkit and facilitating changes to the electronic medical record. The Cerner Opioid Toolkit includes a central chart location to review opioid-related risk, clinical decision support for opioid management, opioid management analytics to help enable assessment of prescribing patterns, opioid treatment and naloxone provisioning and a predictive model to help inform providers of patients' risk for a future opioid use disorder event.

Subcommittee Acute/Chronic Pain & Regulatory/Compliance
The subcommittee aims to support safe inpatient prescribing practices with adherence to regulatory and compliance standards on pain assessment and management. The subcommittee aims to promote the proper treatment and evaluation of standards of clinical practice and patient care for consistency with evidence-based practice, quality outcomes and regulatory requirements.

Subcommittee Education
The subcommittee aims to educate physicians, nurses, clinicians and patients on the opioid crisis. Subcommittee members secure speakers, determine topics and identify logistics for the healthcare delivery system. Topics include understanding Ohio law, morphine equivalent dose and interpretation of a urine drug screen. Patient education includes safe disposal of medications with the distribution of Drug Disposal Kits on discharge.

Evaluation of Impact

Subcommittee Information Technology
Aultman Alliance Community Hospital plans to implement the Cerner Opioid Toolkit following transition to Cerner in 2023.

Subcommittee Education
At the end of 2021, 98% of credentialed, employed Aultman Alliance Community Hospital providers who prescribe opioids completed the safe opioid prescribing education (Source: Medical Staff Office).

Subcommittee Acute/Chronic Pain & Regulatory/Compliance
In 2020 – June 2022, Aultman Alliance Community Hospital exceeded the committee goal of 95% compliance with the prescribing practice of opioid pill prescriptions with a quantity/supply of ≤7 days at discharge. In 2020, 97.5%, in 2021, 99.5% and in the first half of 2022, 97% of Aultman Alliance Community Hospital opioid pill prescriptions had a quantity/supply of ≤7 days at discharge (Figure 29).

Figure 29 Opioid Prescription Pill Quantity/Supply ≤7 Days at Discharge (2020- June 2022)

	2020	2021	2022
# Opioid Rx Pill Quanity ≤7 Days	97%	99%	97%

Source: Meditech

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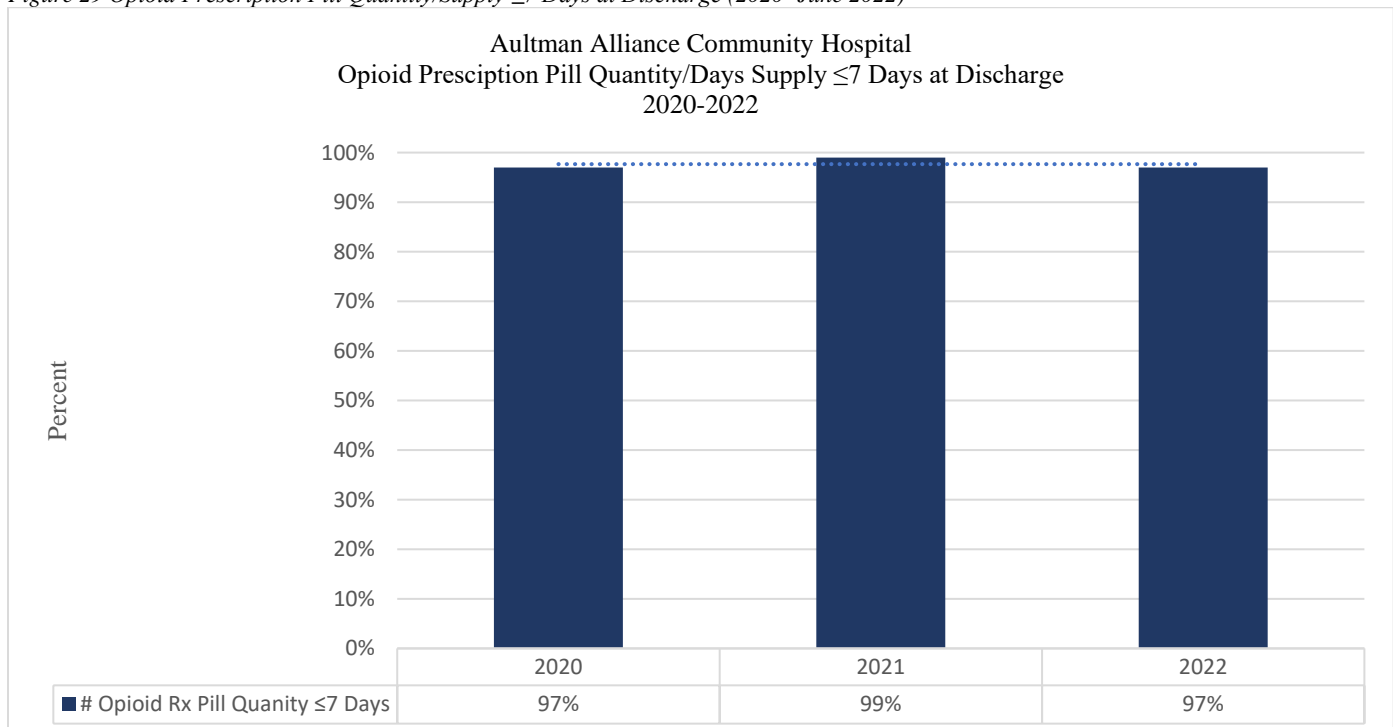
In 2020 to June 2022, the committee determined that all intravenous push (IVP) opioid doses were within an acceptable range (Figure 30).

Figure 30 Opioid IVP Doses within Acceptable Range Inpatient Settings Excluding ER, OR, End of Life Care

Aultman Alliance Community Hospital
Opioid IV Push Doses within Acceptable Ranges
Inpatient Settings Excluding ED, OR, End of Life Care
2020 - June 2022

	2020	2021	2022
% Opioid IVP Doses	100	100	100
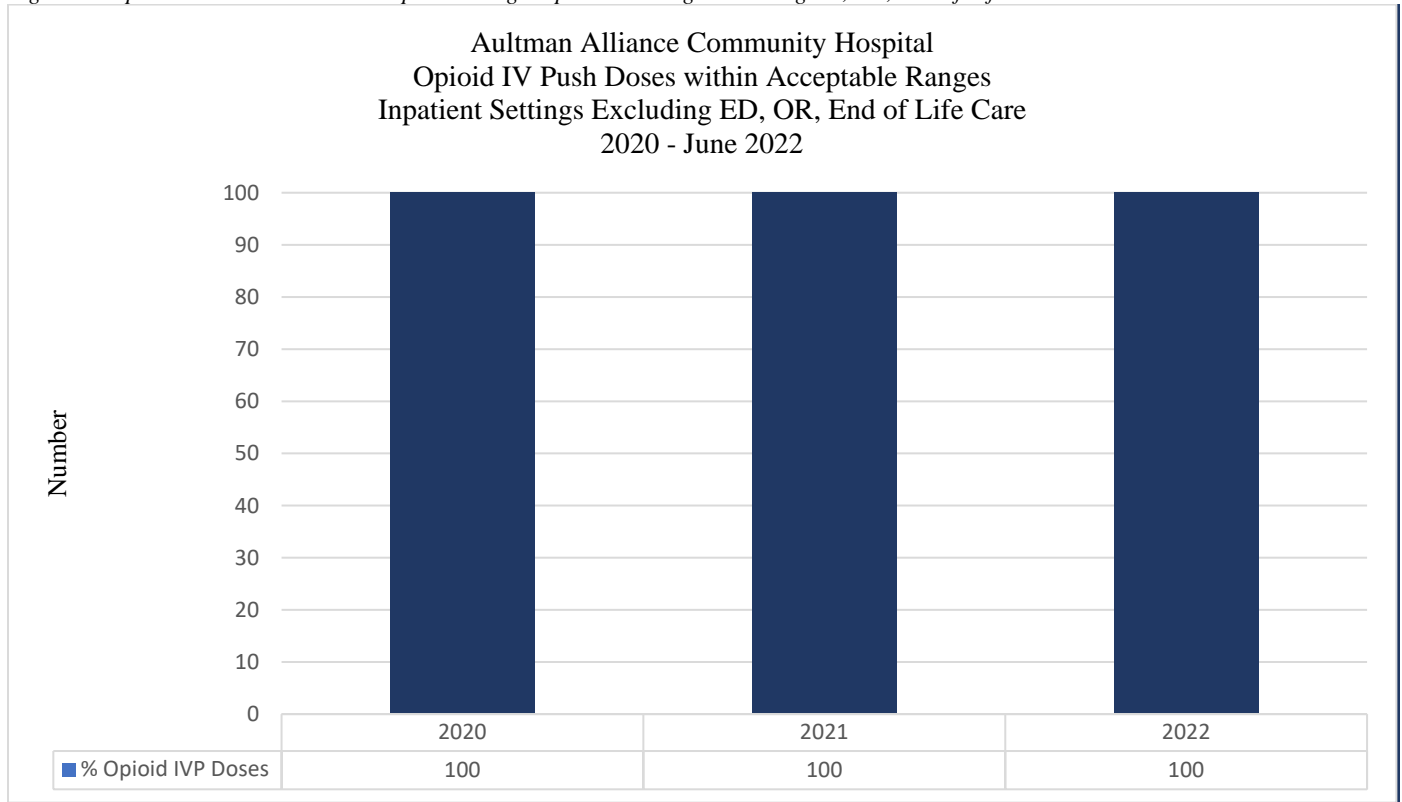
Source: Meditech

In 2020- June 2022, the committee identified no unusual prescribing patterns or trends in naloxone doses in inpatient settings excluding the emergency room and operating rooms (Figure 31).

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Figure 31 Naloxone Doses Administered in Inpatient Settings Excluding Emergency Room and Operating Rooms

Aultman Alliance Community Hospital
Naloxone Doses Administered
Inpatient Settings Excluding ER, OR
2020 - June 2022

|	2020	2021	2022
# Naloxone Doses	4	7	3
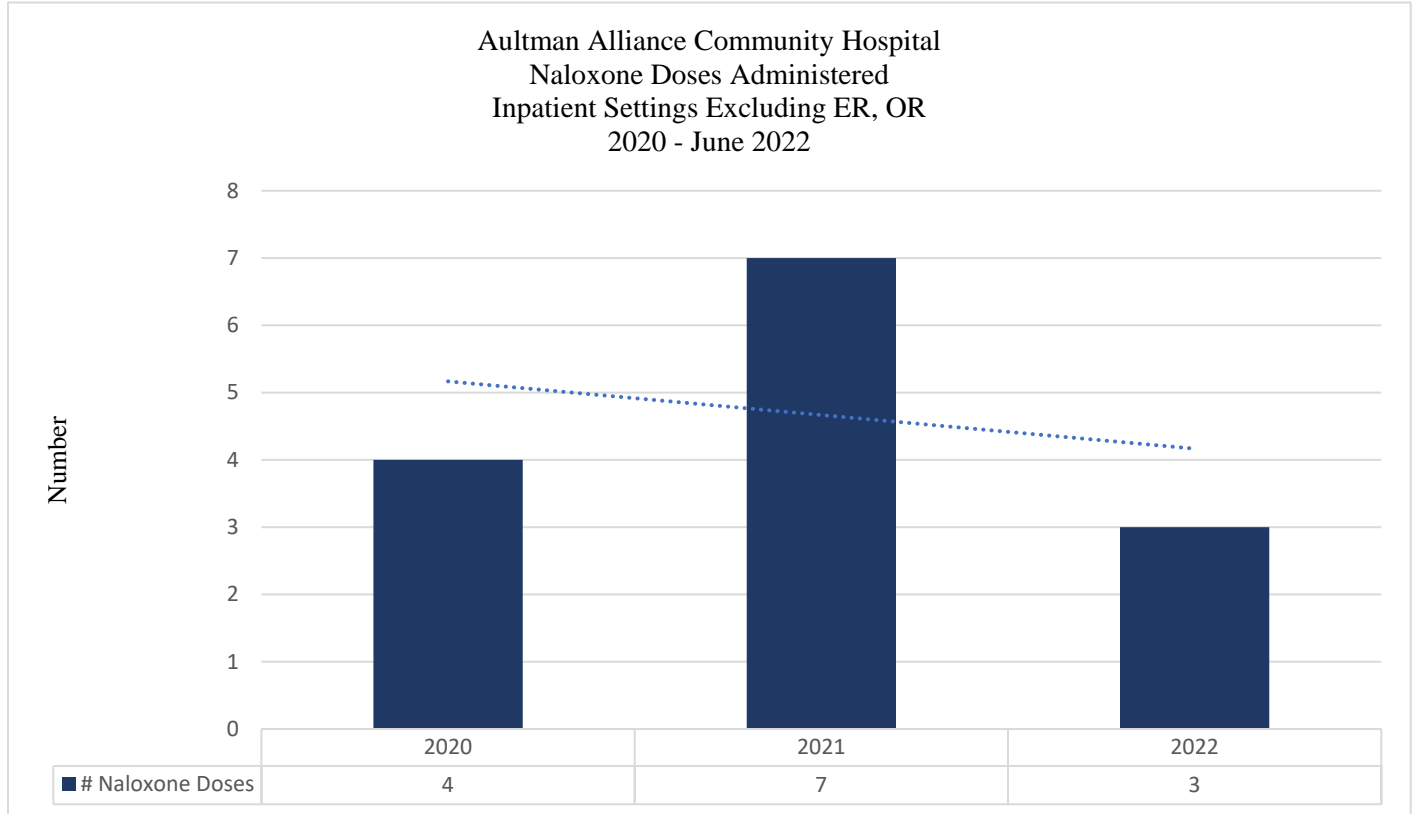
Source: Meditech

CommQuest Detox and Recovery Unit in Aultman Alliance Community Hospital

In fall of 2017, Aultman Alliance Community Hospital partnered with CommQuest Services, Inc. to open a withdrawal management unit within Aultman Alliance Community Hospital. Under this partnership agreement, CommQuest Services operated a withdrawal management unit focusing on addiction services, serving individuals who are in crisis and in need of recovery treatment. The program allowed CommQuest and Aultman staff to collaborate and facilitate individual needs related to withdrawal management for those patients who may be treated in the hospital. The unit offered 24/7 admissions for medication-assisted recovery, detoxification, individual and group counseling and case management services. The 16-bed inpatient residential treatment program used a combination of medication, counseling and case management services to begin the recovery process. In 2020, CommQuest reduced unit capacity by half during the pandemic so that patients didn't have to share rooms. In 2021, the CommQuest Services closed the detox unit at Aultman Alliance Community Hospital due to a pattern of low patient volumes and lower demand for services during the COVID-19 pandemic and did not renew the lease for 2022. CommQuest transferred patients to CommQuest Detox and Recovery Unit at Aultman Hospital. Calls to the CommQuest Detox and Recovery Unit at Aultman Alliance Community Hospital are forwarded to the CommQuest Detox and Recovery Unit at Aultman Hospital. Aultman Alliance Community Hospital staff have referral cards and information to direct clients to CommQuest Detox and Recovery Unit at Aultman Hospital.

Evaluation of Impact

The CommQuest Detox and Recovery Unit at Aultman Alliance Community Hospital expanded access to local inpatient detox services with 1,070 patient days in 2019. In 2020, the unit had reduced capacity and reduced patient volumes with 230 patient days, about 75% lower than 2019. As explained above, CommQuest closed the unit in 2021 but maintains a hospital-based unit in the county at Aultman Hospital (Figure 32).

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Figure 32 CommQuest Detox and Recovery Unit at Aultman Alliance Community Hospital Inpatient Volumes (2019-2021)

Aultman Alliance Community Hospital
CommQuest Services Patient Volumes
2019-2021

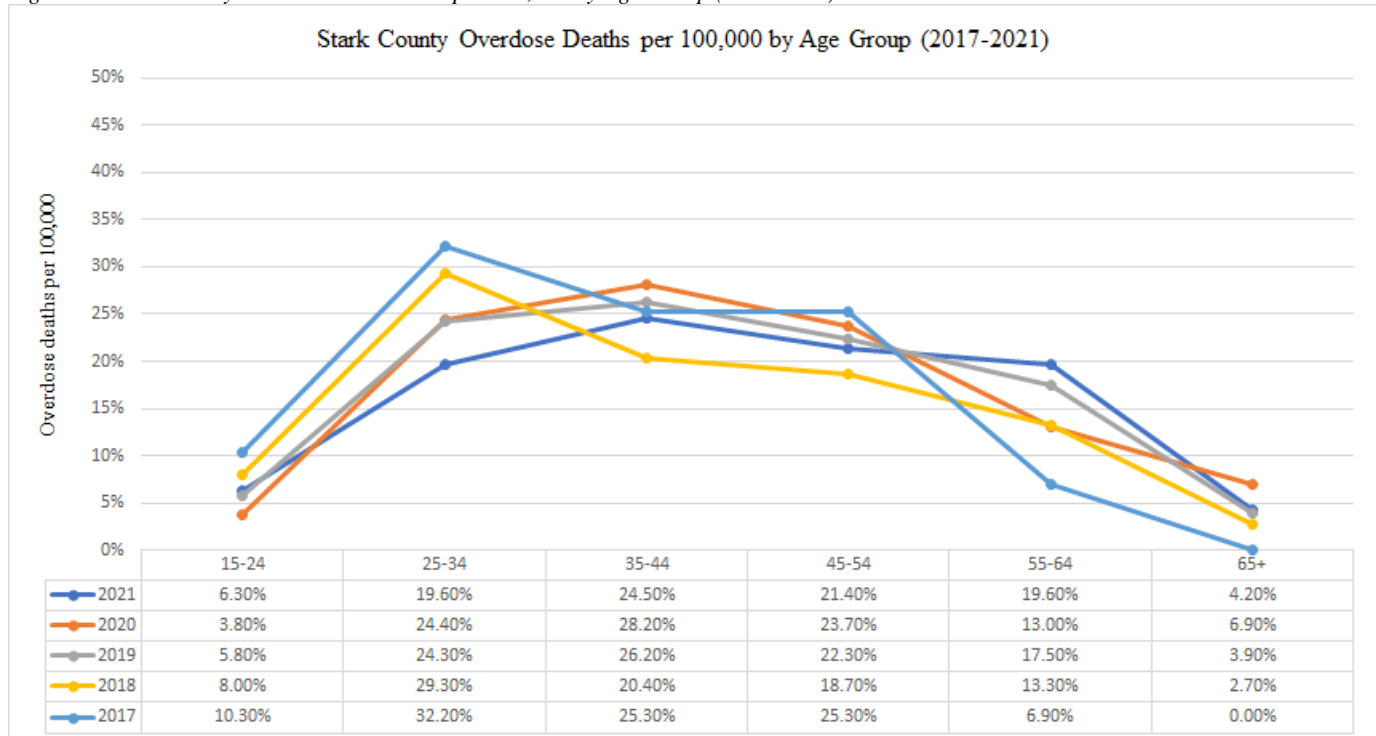|	2019	2020	2021
Patient Days	1070	230	0
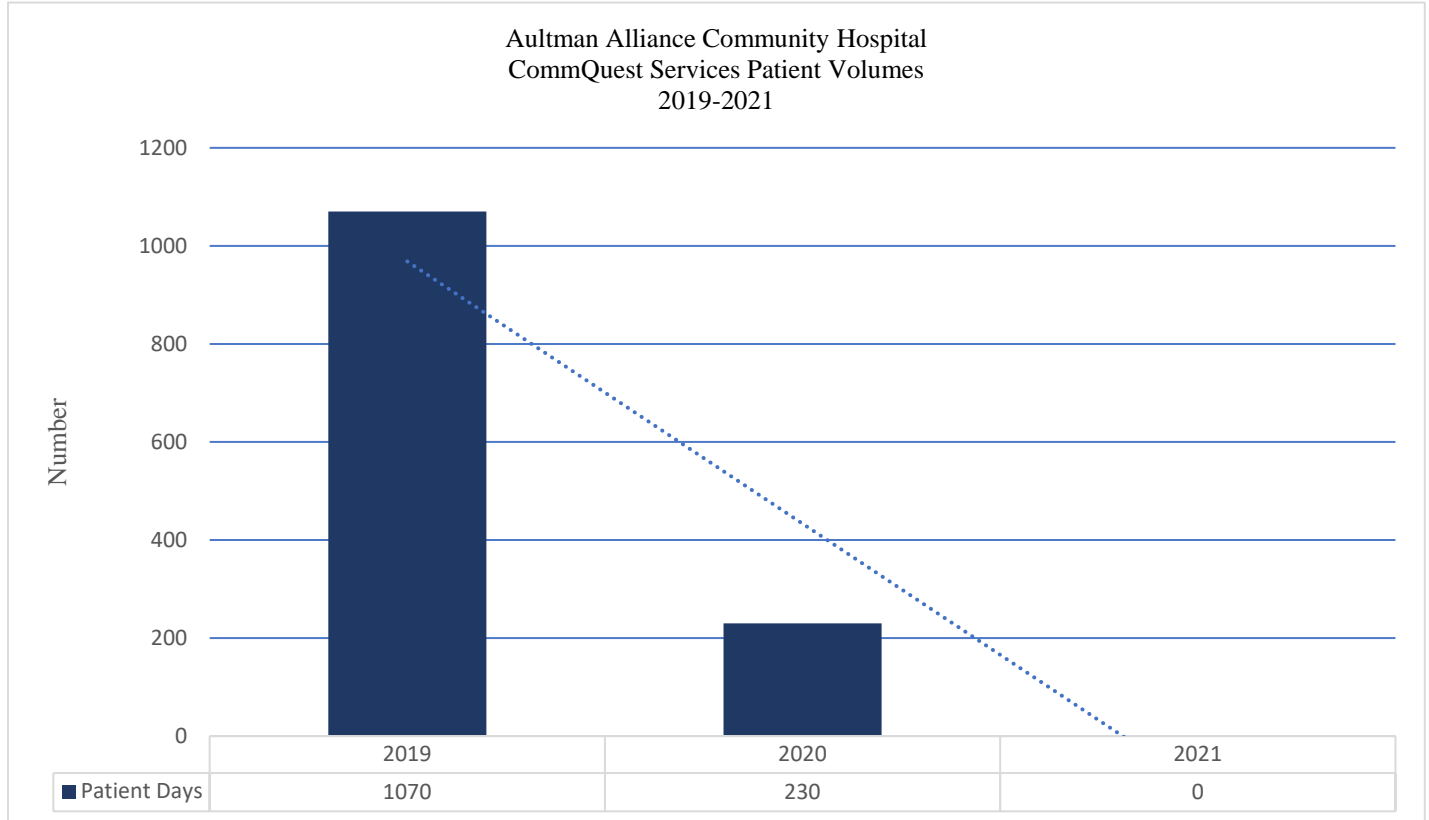
Source: CommQuest Services Report

Evaluation of Impact at the Stark County Level

The majority of Stark County overdose deaths continue to be non-Hispanic white males. The age group with the highest rate in previous years has been 25-34. In 2019-2020, this age group shifted to be 35-44, with 25-34 being close behind (Figure 33).

Figure 33 Stark County Overdose Death Rate per 100,000 by Age Group (2017-2021)

Stark County Overdose Deaths per 100,000 by Age Group (2017-2021)

	15-24	25-34	35-44	45-54	55-64	65+
2021	6.30%	19.60%	24.50%	21.40%	19.60%	4.20%
2020	3.80%	24.40%	28.20%	23.70%	13.00%	6.90%
2019	5.80%	24.30%	26.20%	22.30%	17.50%	3.90%
2018	8.00%	29.30%	20.40%	18.70%	13.30%	2.70%
2017	10.30%	32.20%	25.30%	25.30%	6.90%	0.00%

Source: Stark County Health Department Overdose Fatality Review Stark County 2020: Annual Report

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The darker shades on the Stark County map represent zip codes with higher incidence of overdose death cases while lighter shades represent zip codes with lower incidence of overdose death cases (Figure 34).

Figure 34 2020 Stark County Ohio Overdose Death Case Residence by Zip Code
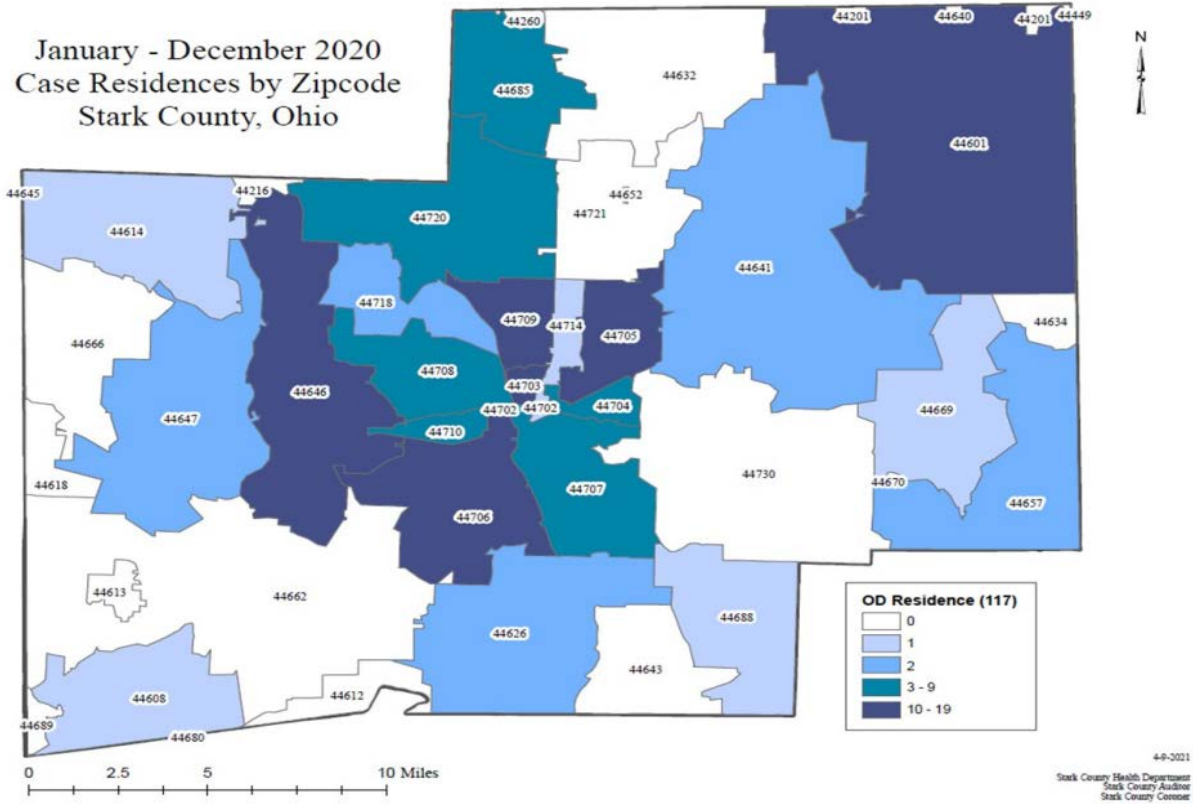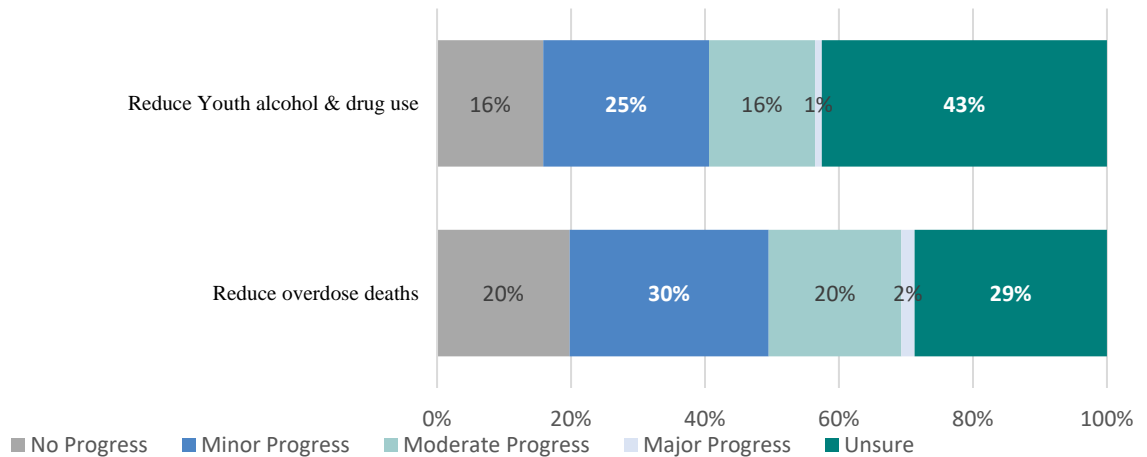

Source: Overdose Fatality Review (OFR) Stark County 2020: Annual Report

Twenty-two percent (22%) of community leaders reported moderate/major progress on reducing overdose deaths (Figure 35).

Figure 35 Community Leader Perceived Progress on Key Measures Addiction

Source: Stark County Community Health Assessment

Community Partners for Mental Health (Addiction)
▪ Akron Children's Hospital
▪ AultCare

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- Aultman Alliance Community Hospital
- Aultman Hospital
- Aultman Orrville Hospital
- Canton City Health
- CommQuest Services, Inc.
- Coleman Professional Services
- Cleveland Clinic Mercy Hospital
- Overdose Fatality Review Committee
- Ohio Board of Nursing
- Ohio Department of Health
- Ohio Hospital Association Opioid Response Initiative
- Stark County Health Department
- Stark County Mental Health & Addiction Recovery
- Stark County Opiate Task Force
- Stark County TASC
- State Medical Board of Ohio
- State of Ohio Board of Pharmacy

Aultman Alliance Community Hospital Programs and Services: Mental Health (Youth Suicide)

Aultman Alliance Community Hospital implemented the following programs and services to address the priority health need of mental health youth suicide.
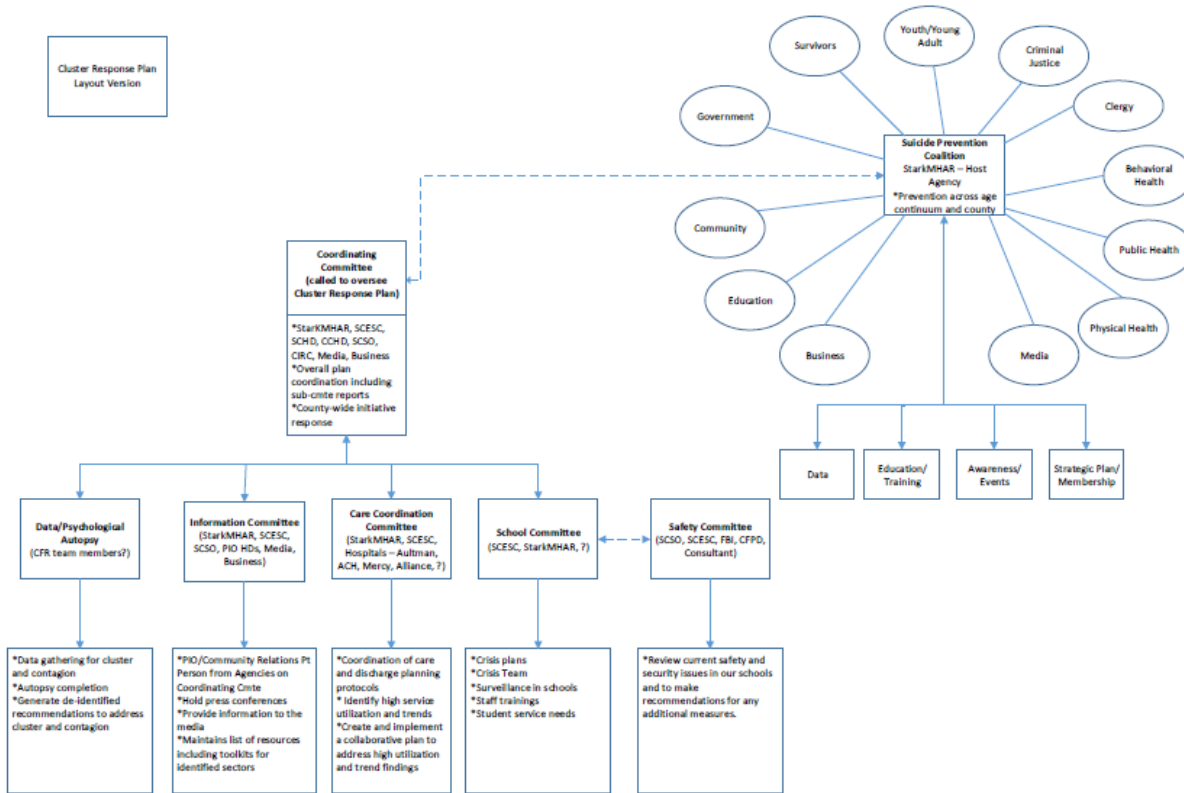
Stark County Suicide Prevention Coalition

Funded by Stark County Mental Health & Addiction Recovery, the Stark County Suicide Prevention Coalition is a partnership of representatives from more than 20 local community organizations working together to save lives (Figure 36). Active members currently include representatives from community advocacy, behavioral health organizations, survivors of suicide loss, social service organizations, human service agencies, government organizations, medical facilities and educational institutions. The coalition's mission is to provide guidance and expertise to promote hope, wellness and behavioral health as a means of preventing suicide in our community. The main goal is to provide education, guidance and resources to achieve a Stark County community with zero suicides. Between August 2017 and March 2018, the community of Stark County, Ohio, experienced 12 suicides among middle and high school students. During this timeframe, the suicide rate among youth aged 10–19 years rose to more than seven times the U.S. national rate and 11 times the 2011-2016 Stark County rate. In response, the Ohio Department of Health and Stark County Health Department made a formal request to the Centers for Disease Control and Prevention (CDC) for epidemiologic assistance (Epi-Aid); a rapid, short-term onsite technical assistance and investigation of the urgent public health problem by CDC subject matter experts to meet the following Epi-Aid objectives:

1. Rapidly determine the population in need of prevention services at all affected and at-risk middle and high schools in Stark County through a comprehensive school-based risk screen.
2. Identify precipitating factors for youth suicide that may contribute to ongoing suicidal behaviors among the Stark County youth population to prevent further suicide attempts and suicides.
3. Ascertain the activities, social supports and other factors among the Stark County youth population that are most protective against suicide risk to guide immediate prevention activities.
4. Inventory and catalogue existing suicide prevention initiatives in Stark County and make recommendations on evidence-based suicide prevention programs.

The survey was originally created and administered in April 2018, in collaboration with the Centers for Disease Control and Prevention (CDC) as a component of the Ohio Department of Health's urgent response to the youth suicide cluster in Stark County, with the purpose of preventing further suicide deaths and self-inflicted injuries among youth. Preliminary findings noted that Stark County youth feel more isolated and communication to parents is more limited than the U.S. average (see 2018 Northeast Ohio Youth Health Survey). In fall of 2021, Stark County Health Department, Ohio Department of Health, Stark County Educational Service Center (Stark County ESC) and Stark County Mental Health & Addiction Recovery (Stark MHAR) partnered to administer the Northeast Ohio Youth Health Surveys to 15,083 7th to 12th grade students from 18 Stark County school districts. The electronic survey was anonymous and included questions about connectedness, social media, mental health, life experiences, friendships, suicidal thoughts, suicidal behavior, resiliency and perceptions of drug and alcohol use. This is the third year that Stark County ESC-affiliated schools have administered the Northeast Ohio Youth Health Survey (see 2021 Northeast Ohio Youth Health Survey).

Figure 36 Stark County Suicide Prevention Coalition and Coordinating Committee Cluster Response Plan

The Stark County Suicide Prevention Coalition and the Coordinating Committee developed a Cluster Response Plan. Chaired by Aultman Health Foundation leadership, the Care Coordination subcommittee developed a standardized process for navigating community mental health resources and systems along the continuum of care. The process helps assure patients have a consistent discharge plan for referral to local mental health resources. Community-wide youth suicide prevention strategies include:

- A standardized hospital process for discharging a youth at risk for suicide.
- Use of the Teen Bullying & Suicide Mental Health Toolkit.
- QPR (Question, Persuade, Refer) Suicide Prevention Training for leadership.
- Accessing Coleman Professional Service's Mobile Youth Response Team as the Stark County After Hospital Care Contact and the first call for local assessment of youth experiencing a behavioral health concern.
- Use of the Zero Suicide framework.
  - Monthly Community of Learning Calls coordinated through StarkMHAR.
  - Use of the Columbia Suicide Severity Rating Scale (C-SSRS), a standard suicide risk screening tool.
  - Staff completed training on the use of the C-SSRS instrument.
  - All patients screened for suicide risk on admission to emergency department, inpatient units and outpatient settings.
  - Use of a Companion Program.
- Use of the Stark County CARE Team Initiative's school-based Coordinate and Align Resources to Engage, Empower and Educate team model (iC.A.R.E.[3]) for mental health services and resources.
  - An iC.A.R.E.[3] team may be comprised of school principals, counselors, teachers, nurses, resource officers, intervention specialists, psychologists, family support specialists/liaisons, mental health and/or alcohol and drug professionals.
  - In a confidential setting, an iC.A.R.E.[3] team wraps additional supports around a child for a successful transition back into a daily school routine after a hospital visit or stay.
  - Available in 22 school districts, iC.A.R.E.[3] teams develop strategies and align resources to promote physical, social, emotional and intellectual supports when a little extra help is needed in school.
  - A parent, school counselor, teacher, administrator, community agency or any concerned individual may refer a student to a school-based iC.A.R.E.[3] team. Parents learn about the iC.A.R.E.[3] teams in a brochure, *Parental Guide to Your School's iC.A.R.E.[3] Team* shared after a hospital stay or emergency room visit.

In 2020-2021, Aultman Health Foundation collaborated with StarkMHAR for the implementation of the Counseling on Access to Lethal Means (CALM) program to reduce access to the methods people use to kill themselves. Emergency department staff completed an online course that covered how to: 1) identify people who could benefit from lethal means counseling, 2) ask about their access to lethal methods and 3) work with them – and their families – to reduce access. While this course is primarily designed for mental health professionals, others who work with people at risk for suicide, like social service professionals and healthcare providers, benefit from taking it. In 2021, emergency department staff completed CALM train-the-trainer training with plans to

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provide professional development training to all staff. When assessing a patient for a behavioral issue, CALM-trained staff can intervene if a need for gunlock safety is identified, distribute a gun-locking device and share safe handling and secure storage guidelines. Patients and families can also be referred to Stark County police and sheriff departments to obtain a gun lock. StarkMHAR provides Aultman Hospital, Aultman Alliance Community Hospital and Cleveland Clinic Mercy Hospital with funding for training and resources (e.g., gun locks, Safe Home card) for implementation of CALM through an Ohio Department of Health Child Injury Prevention Grant and community grant funds. In 2021, 36 staff members completed CALM training and implemented the program in the emergency department.
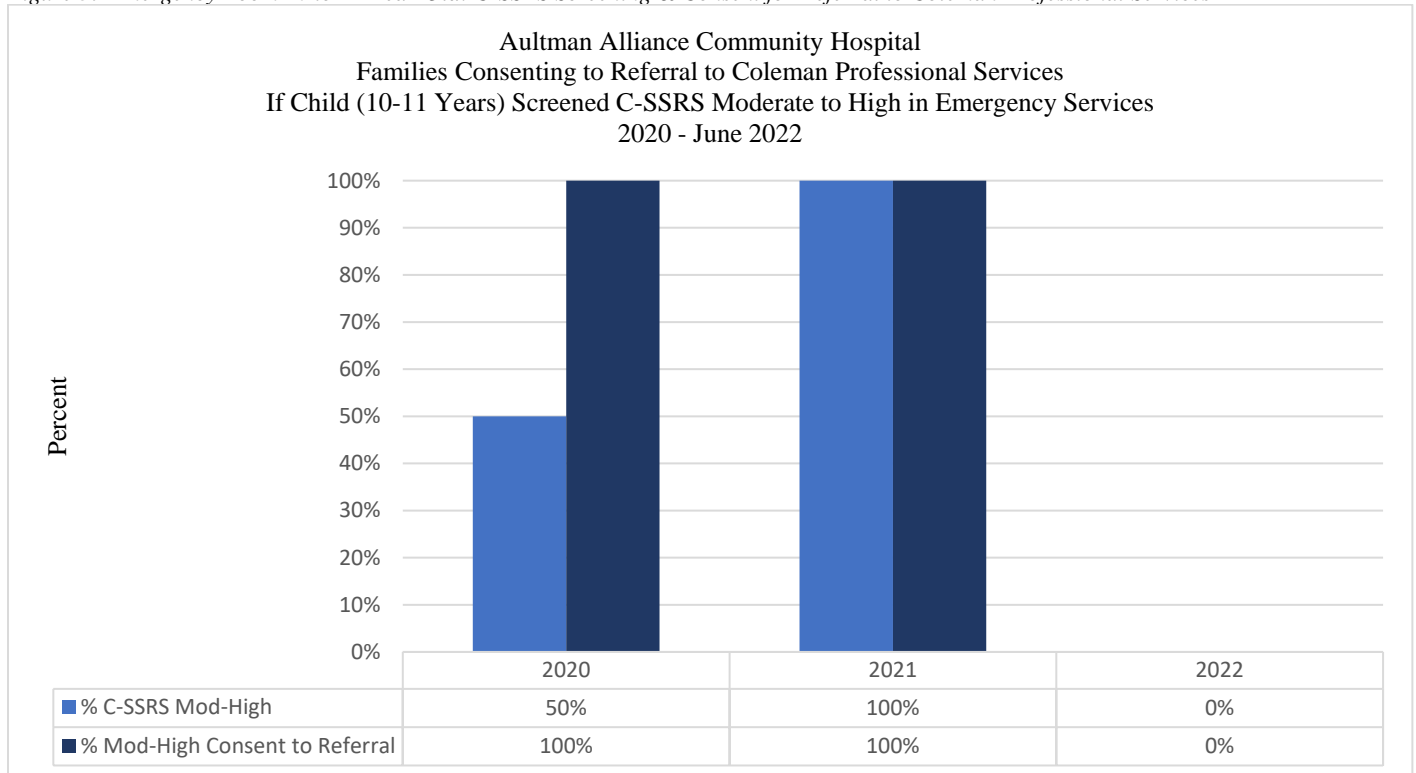
In 2021, the Care Coordination Committee membership determined that the target programs and services were being sustained in practice and the committee achieved the established goals. The committee was subsequently dissolved in November 2021.

Evaluation of Impact

In 2020-2021, Aultman Alliance Community Hospital Emergency Room met the goals of screening all 10- to 17-year-old children who presented to the emergency room for risk of suicide using the C-SSRS and identifying community resources for families of children that screened moderate to high risk.

In 2020, 50% (1/2) of 10- to 11-year-old children screened moderate to high, and the family consented to a referral to Coleman Professional Services. In 2021, 100% (1/1) of 10- to 11-year-old children screened moderate to high, and the family consented to a referral to Coleman Professional Services. In the first half of 2022, none of 10- to 11-year-old children screened moderate to high (Figure 37). Families could also consent to transfer for inpatient admission or follow up with their established primary care provider and/or a private counselor, as appropriate.

Figure 37 Emergency Room 10 to 11-Year-Old: C-SSRS Screening & Consent for Referral to Coleman Professional Services

Aultman Alliance Community Hospital
Families Consenting to Referral to Coleman Professional Services
If Child (10-11 Years) Screened C-SSRS Moderate to High in Emergency Services
2020 - June 2022

	2020	2021	2022
% C-SSRS Mod-High	50%	100%	0%
% Mod-High Consent to Referral	100%	100%	0%

Source: Meditech

In 2020, 60% (27/45) of 12- to 17-year-old children screened moderate-high, and 91% (10/11) of families consented to a referral for Coleman Professional Services. In 2021, 69% (51/74) of 12- to 17-year-old children screened moderate-high, and 77% (39/51) of the families consented to a referral for Coleman Professional Services. Families could also consent to transfer for inpatient admission or follow up with their established primary care provider and/or a private counselor, as appropriate. In the first half of 2022, 78% (29/37) of 12- to 17-year-old children screened moderate-high, and 10% (3/29) of the families consented to a referral for Coleman Professional Services (Figure 38). Families could also consent to transfer for inpatient admission or follow up with their established primary care provider and/or a private counselor, as appropriate.
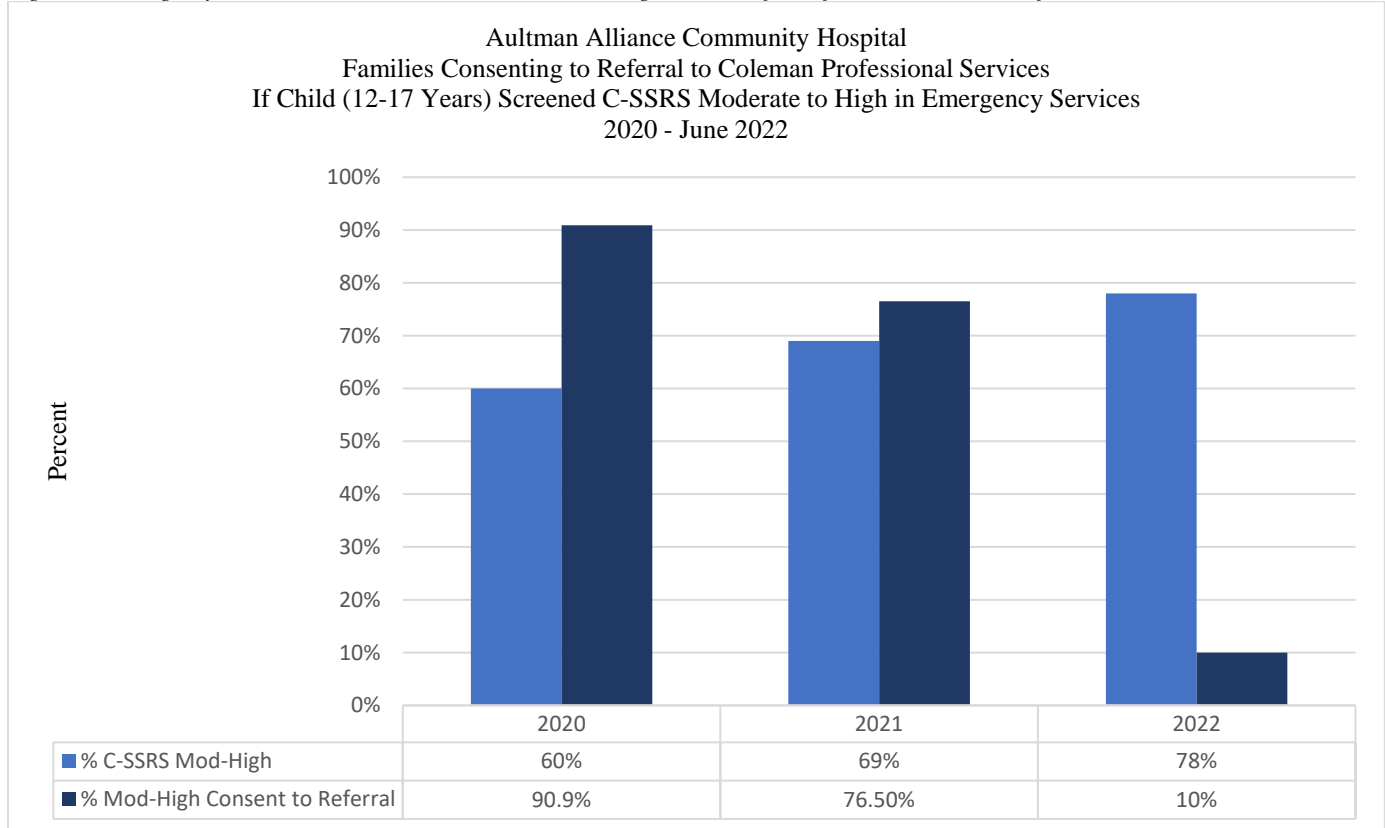
Figure 38 Emergency Room 12 to 17-Year-Old: C-SSRS Screening & Consent for Referral to Coleman Professional Services

Aultman Alliance Community Hospital
Families Consenting to Referral to Coleman Professional Services
If Child (12-17 Years) Screened C-SSRS Moderate to High in Emergency Services
2020 - June 2022

	2020	2021	2022
% C-SSRS Mod-High	60%	69%	78%
% Mod-High Consent to Referral	90.9%	76.50%	10%

Source: Meditech

## Evaluation of Impact at the Stark County Level

In 2020, suicide was the second leading cause of death among children and adolescents aged 10–14 and adults aged 25–34 years in the U.S. The overall suicide rate declined significantly from 2019 to 2020 in seven states (California, Connecticut, Florida, New Jersey, Ohio, Oregon and Pennsylvania) (Division of Injury Prevention, National Center for Injury Prevention and Control, CDC). The combined age groups suicide death rate in Stark County has decreased over the last five years from 18.8 to 15.3. The suicide death rate for combined age groups in Stark County is still higher than the state of Ohio. In Stark County, the youth suicide rate for ages 14 and under trended down in 2020 and 2021. In Stark County, the youth suicide rate for ages 15-19 was 13.2 in 2020 and 17.7 in 2021 compared to 17.4 in 2019. In Stark County, the youth suicide rate for the 15- to 19-year-old age group remains a focused concern (Figure 39).

Figure 39 Ten Year Stark County Youth Suicide Death Age-Specific Rate per 100,000 by Age Group										
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
14 & Under	0	4.1	4.2	4.3	4.3	4.4	17.4	4.4	4.4	0
15-19	11.9	8.0	8.1	12.3	8.3	12.6	21.3	17.4	13.2	17.7
Source: Ohio Department of Health, Data Warehouse										

Stark County community leaders reported 10% moderate/major progress on increasing the number of mental health workers, 22% moderate/major progress on decreasing the wait time for an initial behavioral health assessment and services, 31% moderate/major progress on increasing the ability to assist individuals in a behavioral health crisis, 33% moderate/major progress on decreasing youth and adult suicide rates and 47% moderate/major progress on increasing access and delivery of suicide care (Figure 40).

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Figure 40 Community Leader Perceived Progress on Key Measures Mental Health (Access, Suicide)
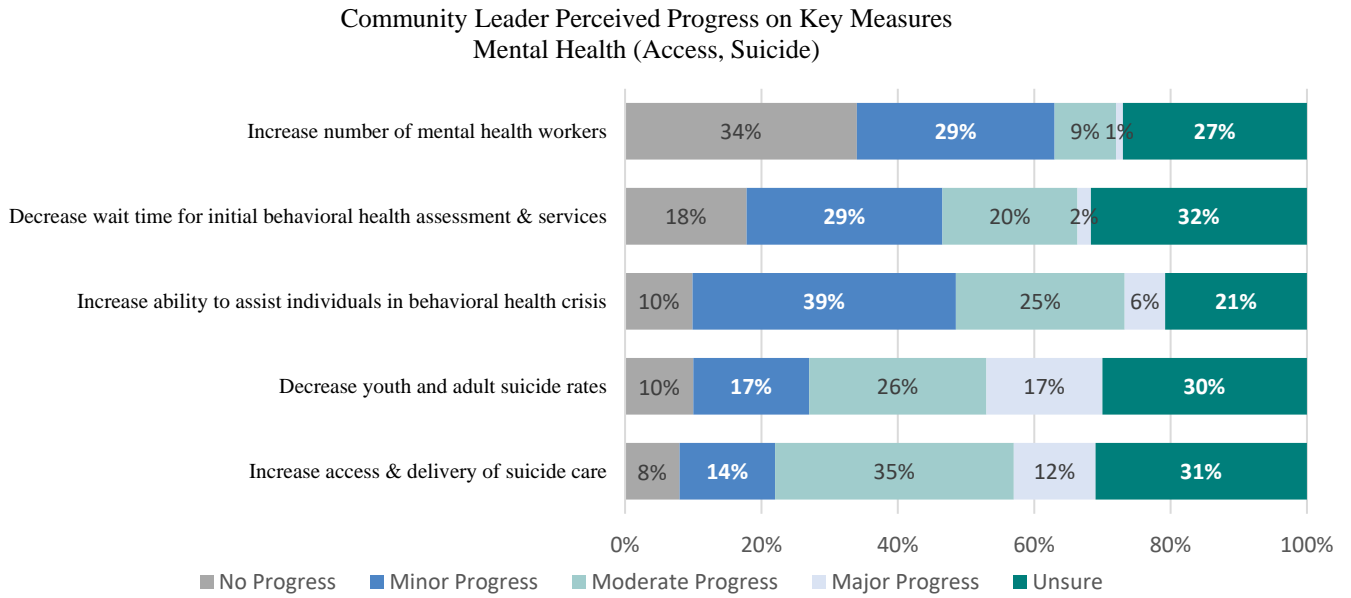
Community Leader Perceived Progress on Key Measures
Mental Health (Access, Suicide)

Source: Stark County Community Health Assessment

The most common adverse life experiences that Stark County students have experienced during their lifetime were that their parents are separated or divorced or that they live with someone who is living with mental illness (e.g., depression, suicidal). For the six life experiences listed below, more female students reported experiencing each than male students. (Figure 41).

Figure 41 Youth: Adverse Life Experiences
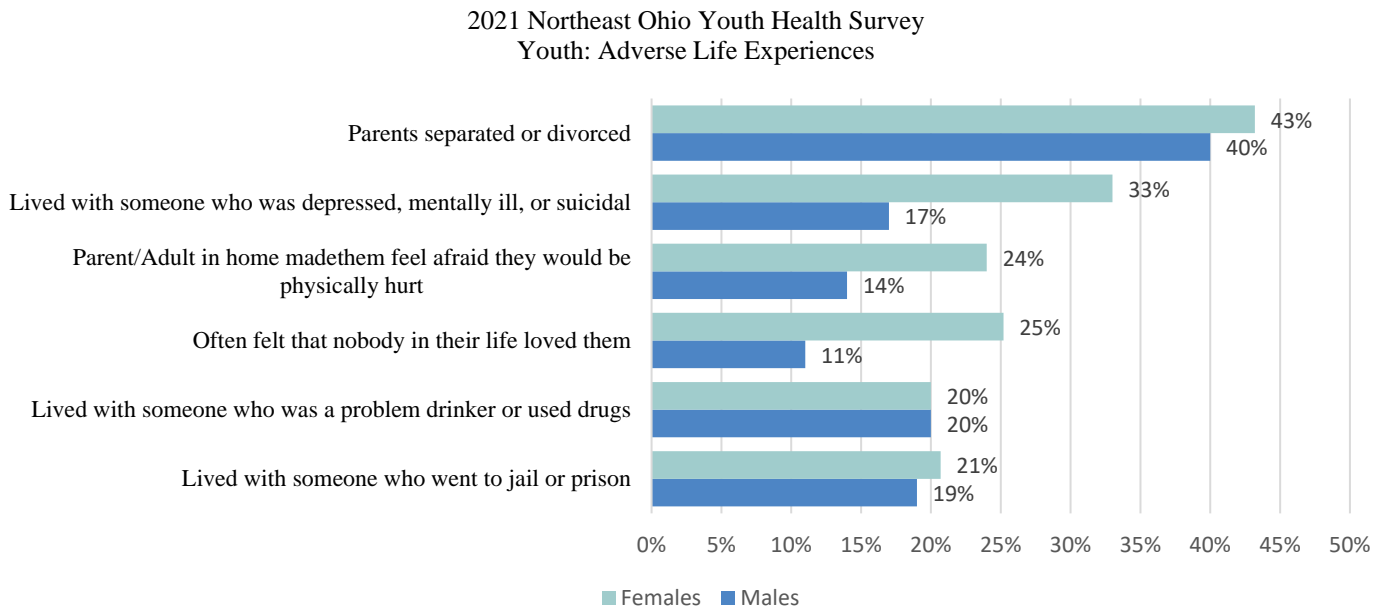
2021 Northeast Ohio Youth Health Survey
Youth: Adverse Life Experiences
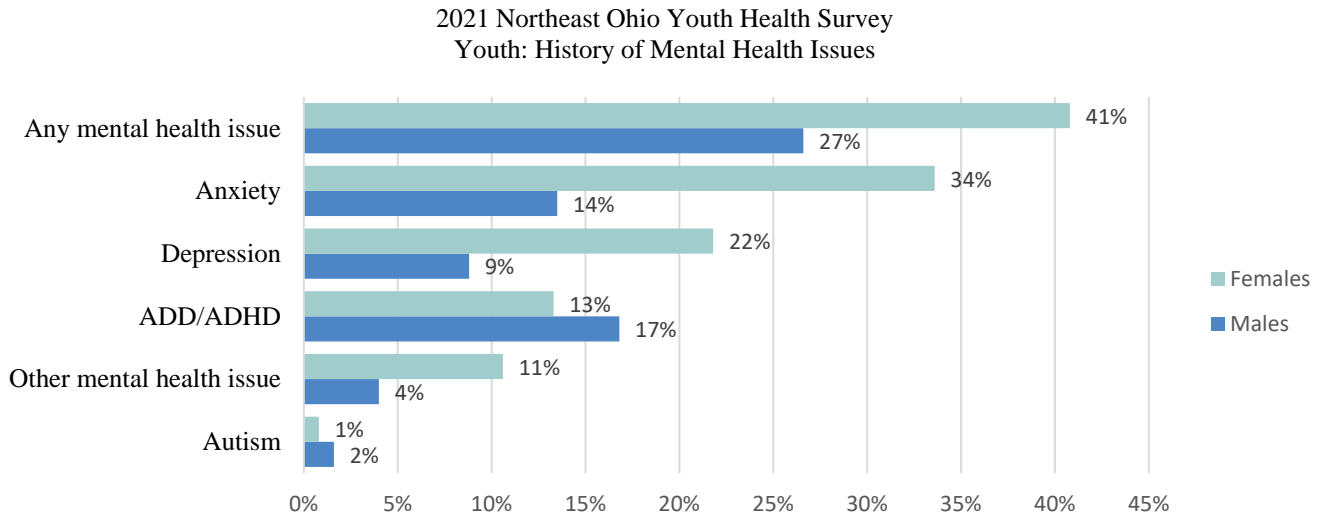

Source: 2021 Northeast Ohio Youth Health Survey

More than a third of students (34.5%) reported that they have been told by a healthcare professional they had a mental health issue before the current school year. The most common mental health issues for female students were anxiety and depression. For male students, the most common issues were ADD/ADHD and anxiety (Figure 42).

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Figure 42 Youth: History of Mental Health Issues

2021 Northeast Ohio Youth Health Survey
Youth: History of Mental Health Issues

Source: 2021 Northeast Ohio Youth Health Survey

Community Partners for Mental Health (Youth Suicide)

- Akron Children's Hospital
- AultCare
- Aultman Alliance Community Hospital
- Aultman Hospital
- Canton City Health
- Centers for Disease Control and Prevention Epi-Aid 2018-025: Increase in youth suicides - Stark County, Ohio, 2018 recommendations. Available at https://www.starkcountyohio.gov/StarkCounty/media/Public-Health/Press%20releases/Stark-EpiAid-Final-Report-April-2019.pdf
- CommQuest Services, Inc.
- Coleman Professional Services
- Cleveland Clinic Mercy Hospital
- Ohio Department of Health
- Stark County Educational Service Center
- Stark County Health Department
- Stark County Opiate Task Force
- Stark County School Districts
- Stark County Suicide Prevention Coalition
- Stark County TASC
- StarkMHAR

Priority Health Need 3: Infant Mortality and Maternal Health

Description

Infant mortality, defined as an infant death before the first birthday, serves as an indicator of a society's overall health. Ohio ranks 41st in the nation in overall infant mortality rate (IMR) or the number of infant deaths per 1,000 live births. In 2019, infant deaths decreased for the third straight year. In 2019, the Ohio Department of Health reported that 929 Ohio infants died before their first birthday. In 2019, the Ohio infant mortality across all races was 6.9 per 1,000 live births, the same as in 2018. The number of white infants who died was 518, the lowest number in the past 10 years. In 2019, there were 356 Black infant deaths in Ohio, an increase of 17 from 2018. However, this is still lower than 2015, 2016 and 2017. The Black IMR was 14.3 in 2019, up from 13.9 in 2018. Black infants were more than 2.8 times more likely to die than white infants. In 2019, Stark County had an overall IMR of 5.4 infant deaths per 1,000 live births (Ohio Department of Health, 2020). In 2019, the Ohio Department of Health did not report a Black IMR for Stark County since the number of Black infant deaths was less than 10 in multiple years. In 2019, the white IMR was 3.8.

In 2021-2022, the Eliminating Disparities in Infant Mortality Task Force worked closely with the Ohio Department of Health to focus on advancing health equity and establish Ohio as a model for justice, equity, opportunity and resilience as part of Governor

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DeWine's action plan. Ohio Department of Health and Centers for Medicare and Medicaid Services will provide additional funding to Stark County for THRIVE initiatives.

Aultman Alliance Community Hospital Programs and Services: Infant Mortality

Aultman Alliance Community Hospital implemented the following programs and services to address the priority health need infant mortality.

Stark County Toward Health Resiliency for Infant Vitality & Equity (THRIVE) Collaborative

Based on a national Institute for Equity in Birth Outcomes model, nine Ohio communities make up the Ohio Institute for Equity in Birth Outcomes (Ohio Equity Institute), a community-driven effort to reduce infant deaths. In 2013, the nine Ohio communities, Ohio Equity Institute, the Ohio Department of Health and CityMatCH partnered to improve the infant mortality rate (IMR) and reduce racial disparities (Ohio Equity Institute 2.0 Grant #7620011OE0221). The Stark County Fetal Infant Mortality Review Committee reviews infant mortality data, determines preventable deaths, identifies opportunities for improvement in care or services and makes recommendations to the THRIVE Collaborative on interventions needed to prevent future infant deaths. The Stark County THRIVE Evaluation Team & Pathways HUB Quality Improvement team analyzes and reports the Stark County Pathways HUB data to THRIVE Collaborative members. Although THRIVE serves all Stark County, the initiative prioritizes women residing in southeast and northeast Canton, central Massillon and eastern Alliance based on county IMR and disparity rate data. THRIVE focuses on two interventions for the greatest possible impact on IMR and infant mortality disparity rate.

1. *CenteringPregnancy® prenatal care and community-based care coordination* with the goals of increasing awareness of the value of early prenatal care, linking women to prenatal services, addressing barriers to prenatal care and meeting socio-economic needs. Aultman providers refer patients to the My Community Health Center CenteringPregnancy® program.
   a. *Certified Community Health Workers (CHWs) and Stark County THRIVE Pathways HUB*. Ten care coordination agencies employ 26 THRIVE CHWs who are representative of the communities and individuals that they serve. The CHWs complete Ohio Board of Nursing approved training. The Stark County THRIVE Pathways HUB implements 20 pathways that address social determinants of health (e.g., affordable housing, substance use, prenatal care, social service needs, medication assistance and health insurance). CHWs make in-home visits to assess a client's needs, coordinate care, provide evidence-based health education and support the client in accessing and completing treatment as appropriate. CHWs typically work one-on-one with families, visiting them at home and accompanying the new mothers to medical appointments. During the pandemic, CHWs kept in touch with expectant families via video conferencing and phone calls.
   b. *Racism, cultural competency and humility*. Partnerships with Stark Mental Health & Addiction Recovery and Mary Church Terrell Federated Club provide support for community partners, service providers and clients to address barriers and challenges related to racism and offer culturally appropriate services.
   c. *Stark County Fatherhood Coalition and Early Childhood Resource Center* provides mentoring programs and access to resources to fathers in supporting meaningful engagement with children and mothers.
   d. *Community Legal Aid* provides the Health Education Advocacy and Law Program, which is a partnership between Community Legal Aid to help patients overcome legal problems that interfere with their health.
   e. *THRIVE Tenant-Based Rental Assistance Program*. CHW clients experiencing housing barriers have access to a Tenant Based Rental Assistance Program funded by the city of Canton Department of Community Development in partnership with the YWCA of Canton.
2. *Safe Sleep.* Education, policies and resources create awareness and enculturate safe sleep policies and practices. Aultman adopted safe sleep policies per Ohio law and monitors reliable use and modeling of safe sleep practices. On average, more than three Ohio infants die each week due to sleep-related causes, which is why Aultman follows the current safe sleep standards and actively educates its young patient parents and caregivers on their importance. The standards include the "ABCs of Sleep," reminding parents and caregivers that infants should sleep alone, on their backs and in a crib, among other important facts. Aultman partners with hospitals and organizations around the county to educate on safe sleep practices. During hospital stays, nurses share safe sleep information with families in the Birth Center. Aultman Alliance Community Hospital distributes information on infant safe sleep to all families following emergency department visits.

Evaluation of Impact at the Stark County Level

For six years, Canton City Public Health has led an effort to reduce infant mortality and disparity rates through a countywide THRIVE collaborative. In 2019, the American Hospital Association recognized Aultman Hospital and the THRIVE collaborative with the Dick Davidson NOVA Award for innovative collaborations that engage hospitals to bring better health to the populations they serve. THRIVE members have gained a much deeper understanding of the nature of Stark County's infant mortality problem using data. Infant mortality rates (IMR) are calculated by the number of infant deaths divided by the number of live births, multiplied by 1,000. This calculation of rates helps to compare populations.

To help minimize fluctuations in infant mortality rates over time, Stark County Ohio Equity Institute reviews three-year data groupings. Each data point in the graph shows a combination of three years of births and deaths to each group. When a new year is added, the oldest year is dropped off to keep the grouping at three years (Figure 43, Figure 44). Using this method allows the Ohio

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Equity Institute to look at larger and therefore more stable counts (Canton City Public Health Stark County THRIVE Fiscal Year 2021 Annual Report).
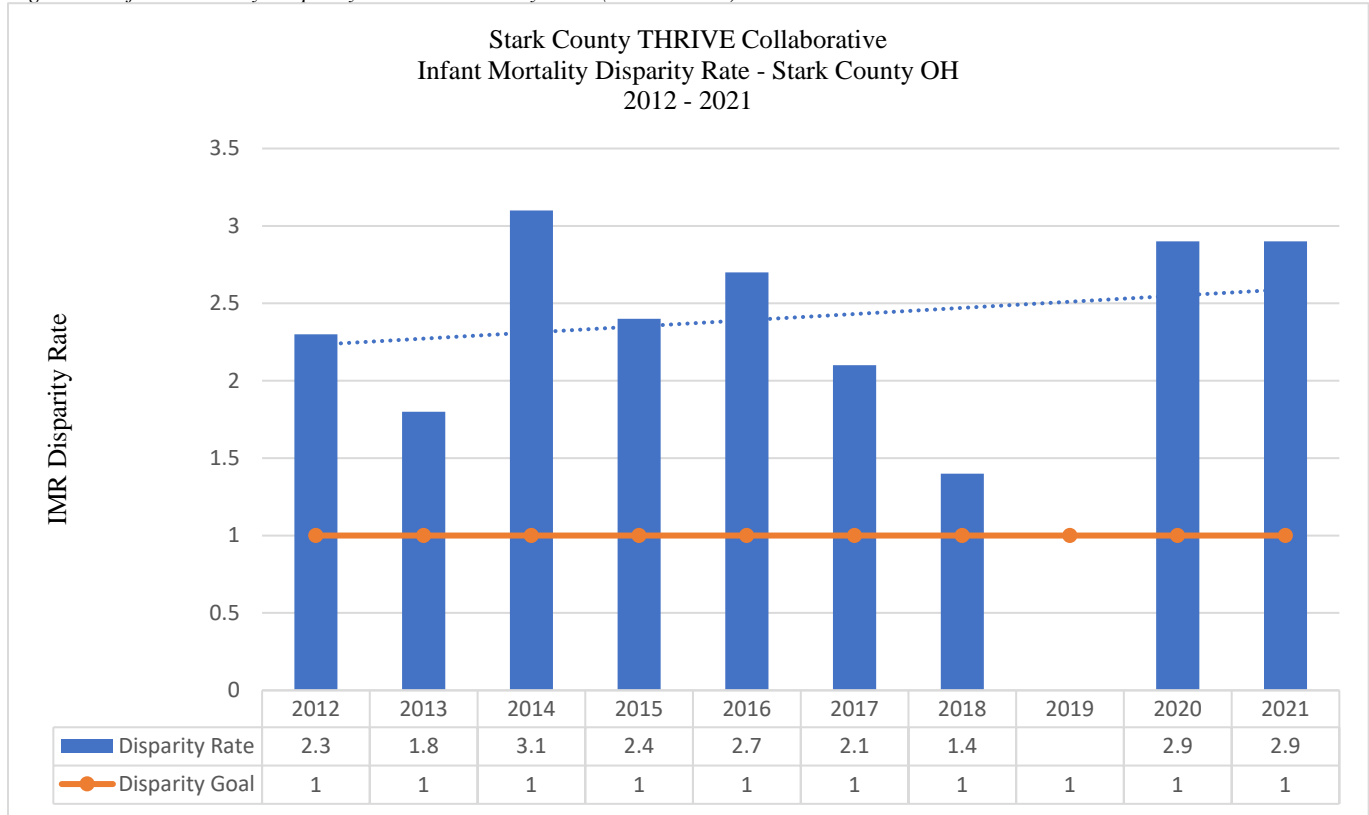
The white IMR in Stark County since 2011 has fluctuated between 6.5 per 1,000 live births and 8.3 per 1,000 live births. The Black IMR in Stark County since 2011 has fluctuated between 6.7 per 1,000 live births and 14.1 per 1,000 live births. The overall IMR in Stark County since 2011 has fluctuated between 5.4 per 1,000 live births and 8.1 per 1,000 live births (Figure 44). Stark County has ongoing work to continue to improve the IMR and reduce disparity to achieve the Healthy People 2030 IMR goal of 5.0 per 1,000 live births (Canton City Public Health THRIVE Fiscal Year 2021 Annual Report) (Figure 45). Race/ethnicity of infant deaths is based on race/ethnicity documented at birth.

Figure 43 Infant Mortality Rate by Race Stark County, Ohio (2011 – 2021)
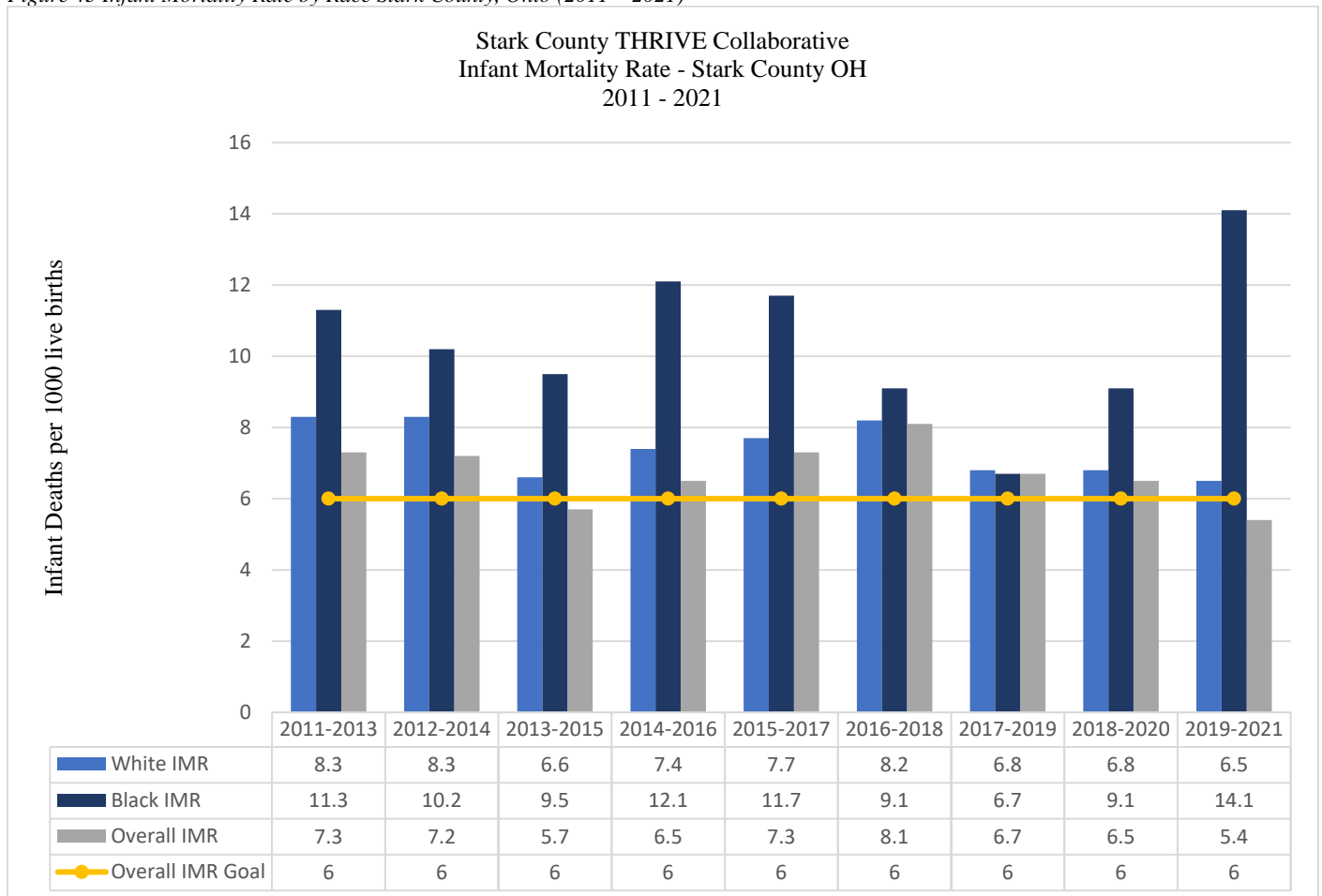
Stark County THRIVE Collaborative
Infant Mortality Rate - Stark County OH
2011 - 2021

	2011-2013	2012-2014	2013-2015	2014-2016	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021
White IMR	8.3	8.3	6.6	7.4	7.7	8.2	6.8	6.8	6.5
Black IMR	11.3	10.2	9.5	12.1	11.7	9.1	6.7	9.1	14.1
Overall IMR	7.3	7.2	5.7	6.5	7.3	8.1	6.7	6.5	5.4
Overall IMR Goal	6	6	6	6	6	6	6	6	6

Source: 2022 Stark County THRIVE Collaborative. "These data were provided by the Ohio Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations, or conclusions." 2020 and 2021 data is preliminary and subject to change. Data is reviewed monthly. For questions regarding this data, please contact Epidemiologist jboley@cantonhealth.org.

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Figure 44 Infant Mortality Disparity Rate Stark County Ohio (2012 – 2021)

Stark County THRIVE Collaborative
Infant Mortality Disparity Rate - Stark County OH
2012 - 2021

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Disparity Rate	2.3	1.8	3.1	2.4	2.7	2.1	1.4		2.9	2.9
Disparity Goal	1	1	1	1	1	1	1	1	1	1

Source: 2022 Stark County THRIVE Collaborative. "These data were provided by the Ohio Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations, or conclusions." 2020 and 2021 data is preliminary and subject to change. Data is reviewed monthly. For questions regarding this data, please contact Epidemiologist jboley@cantonhealth.org.

Thirty percent (30%) of community leaders report that moderate/major progress has been made to reduce the infant mortality disparity/inequity ratio, and fifty-five percent (55%) of community leaders report that moderate/major progress has been made to reduce the overall infant mortality rate (Figure 45).

Figure 45 Community Leader Perceived Progress on Key Measures Infant Mortality
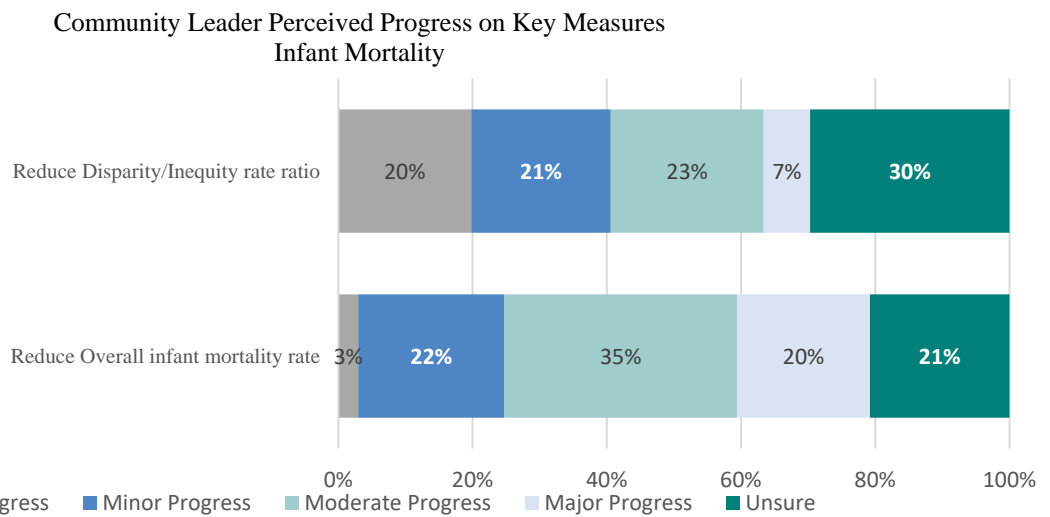
Community Leader Perceived Progress on Key Measures
Infant Mortality

Source: Stark County Community Health Assessment

Community Partners for Infant Mortality

- Abide Ministries: New Baltimore Community Church
- Access Health Stark County
- Akron Children's Hospital
- Alliance City Health Department

- Alliance Family Health Center
- Aultman Alliance Community Hospital
- Beacon Pharmacy
- Buckeye Health Plan
- Canton Calvary Mission
- Canton City Public Health
- Canton City School District
- CareSource
- Catholic Charities
- City of Canton, Department of Community Development
- CommQuest
- Domestic Violence Project
- Early Childhood Resource Center
- Faith-Based & Grassroots Organizations
- Family Empowerment Ministries
- George Dunwoody Foundation
- Hannah's House 119
- JRC, Inc.
- Margaret B. Shipley Child Health Clinic
- Mary Church Terrell Federated Club
- Massillon City Health Department
- Cleveland Clinic Mercy Hospital
- Molina
- My Community Health Center
- Ohio Collaborative to Prevent Infant Mortality
- Ohio Department of Medicaid
- Ohio Guidestone
- Ohio Means Jobs
- Paramount Health Plan
- Perry Local School District
- Pregnancy Choices
- Stark Housing Network (Homeless Continuum of Care) and Housing Providers
- Stark Homeless Navigation
- Stark County Department of Job & Family Services
- Stark County District Library
- Stark County Health Department
- Stark County Homeless Hotline
- Stark County TASC, Inc.
- Stark County THRIVE Community Collaborative
- Stark County THRIVE Pathways HUB
- Stark Mental Health & Addiction Recovery
- Stark Metropolitan Housing Authority
- Stark Community Support Network
- The Ohio State University — Extension Services
- United Healthcare
- United Way of Greater Stark County
- Women, Infants, and Children (WIC) clinics
- YWCA Canton

Priority Health Need 4: Obesity and Healthy Lifestyle

Description

Promotion of healthy lifestyle choices and prevention and management of chronic diseases and conditions such as obesity, type 2 diabetes, hypertension, heart disease, stroke and cancer.

Aultman Alliance Community Hospital Programs and Services: Obesity and Healthy Lifestyle

Aultman Alliance Community Hospital implemented the following programs and services to address the priority health need obesity and healthy lifestyle.

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Colleague Wellness Program

The Aultman Alliance Community Hospital Colleague Wellness Program requires an annual physical exam, promotes colleague wellness and provides age-appropriate screenings for health conditions with referrals, as indicated. In 2020, the Colleague Wellness Program was suspended during the pandemic.

Evaluation of Impact

In 2019, 79%, and in 2021, 81% of Aultman Alliance Community Hospital colleagues participated in the program.
Source: Aultman Alliance Community Hospital Colleague Wellness Program

Clinic for Medication, Education, Diet, Support (MEDS Clinic)

Since 2015, the MEDS Clinic, a diabetes treatment center in Alliance, has focused on providing patients with diabetes the support they need to manage their condition. Proper nutrition, glucose monitoring and insulin pump education can be vital in the process of dealing with diabetes. The MEDS Clinic offers a full spectrum of services for adults with prediabetes, type 1 diabetes, type 2 diabetes and gestational diabetes. MEDS Clinic patients can meet with a dedicated and caring team of pharmacists, dietitians, nurses and certified diabetes educators for an individualized plan and self-management tools.

M	**Medication**:	A team of pharmacists and certified pharmacy technicians help patients optimize their medications for better diabetes control. This includes finding the correct medications to maximize the benefits while simplifying therapy and limiting potential side effects and costs.
E	**Education**:	A certified diabetes educator works with patients as part of diabetes education programs designed to increase understanding of diabetes, prevent complications and share how to self-manage diabetes. Group classes range from specific diabetes topics to yearlong comprehensive programs.
D	**Diet**:	A nutritionist meets individually with patients to help them understand how what they eat affects their health. Using an in-depth meal breakdown and analysis, the nutritionist helps patients create a meal plan based on their unique needs.
S	**Support**:	Alliance Community Care Network health coaches and case managers serve an underserved population of Alliance. The team helps patients with coordination of services for Behavioral and Emotional Support, Community Resources, Challenges of Daily Living and Prevention and Risk. Working closely with a team of qualified hospital clinicians and the patient's primary care physician, health coaches educate patients with a focus on medication reconciliation; resources for obtaining medication, food and transportation; adequate supplies (e.g., blood sugar monitoring supplies, glucometer, scale, home blood pressure monitoring device, respiratory care equipment, ambulation equipment); and information about disease management.

Evaluation of Impact

In 2022, the MEDS Clinic began meeting with Information Technology to create an electronic medical record report to track the achievement of target HbA1c, inpatient admissions and emergency department visits for patients with diabetes as a way to track and evaluate the positive impact of the MEDS Clinic in the future.

Aultman Food Insecurity Committee

Because only 20% of health can be attributed to medical care, Aultman's population health strategy has invested in the identification of social determinants of health such as food insecurity as a significant population health issue. According to the USDA, food insecurity represents a household-level economic and social condition of limited or uncertain access to adequate food for an active and healthy life. Hunger may result from food insecurity. Feeding America estimates a Stark County food insecurity rate of 17.5% of the total population, a 30% increase due to the pandemic. The Stark County child food insecurity rate is 27.6%, a 39% increase due to the pandemic. Food insecurity can increase the risk of:
- Physical health issues including hypertension, asthma, tooth decay, anemia, infection and birth defects.
- Behavioral health issues including depression, anxiety and emotional imbalance.
- Chronic health conditions including obesity and diabetes.

From 2019 to 2021, the Aultman Food Insecurity Committee, comprised of hospital and community partner members, addressed hospital-based strategies to address Stark County food insecurity and mitigate the impact food insecurity has on health and health outcomes for patient populations served. Aultman used the American Hospital Association's Role of Hospitals in Food Insecurity as a framework. The Aultman Food Insecurity Committee aimed to improve community health by implementing upstream affordable, patient-centered, equitable interventions. The population health strategy integrated evidence-based clinical and non-clinical interventions that lead to a sustainable impact on reducing the prevalence of food insecurity and related health conditions. Benefits of implementing clinical interventions include identifying the target population, reducing the prevalence of food insecurity and its related health conditions, advancing culturally competent care and promoting a healthier environment. Benefits of implementing nonclinical interventions include leveraging partnerships with local food organizations and overcoming the stigma associated with

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food insecurity. In November 2021, the committee was dissolved, and Aultman Health Foundation will contribute to ongoing community needs as a member of the Stark County Food Council.

In 2020-2021, the Aultman Food Insecurity Committee partners implemented and sustained the following programs and services to meet local community food needs: Screening for Food Insecurity, Nutritional Services Department Meal Preparation for Meals on Wheels America, Alliance Area Community Garden at Aultman Alliance Community Hospital Campus and StarkFresh Mobile Grocery Market.

Screening for Food Insecurity

Aultman integrated the Hunger Vital Sign™ food insecurity screening items in the electronic medical record (EMR) to guide system-wide identification of food insecure patients. Integrating screening items in the EMR helps determine a patient's eligibility for food assistance programs, allows tracking of food insecurity status, helps identify patients at follow-up visits to discuss changes or ongoing needs and supports data analysis over time to measure readmissions and other healthcare utilization rates. Screening for food insecurity allows Aultman social workers, physicians and other professionals to assist patients experiencing food insecurity by:

- Referring patients to support for access to community food resources.
- Increasing awareness of and use of federal nutrition programs.
- Discussing associated physical or social conditions.
- Educating patients about nutrition and strategies to improve food security.
- Providing tailored clinical care based on a patient's needs, food security status and financial stability.

Evaluation of Impact

In 2021, Aultman Alliance Community Hospital patient screening identified 10.6% (580/5478) of patients who experienced food insecurity and provided referrals to community food resources, more than twice as many as in 2020. In the first half of 2022, 9.7% of patients screened as food insecure. Social workers offered to link these patients to community food programs and services (Figure 46).

Figure 46 Food Insecurity Screening
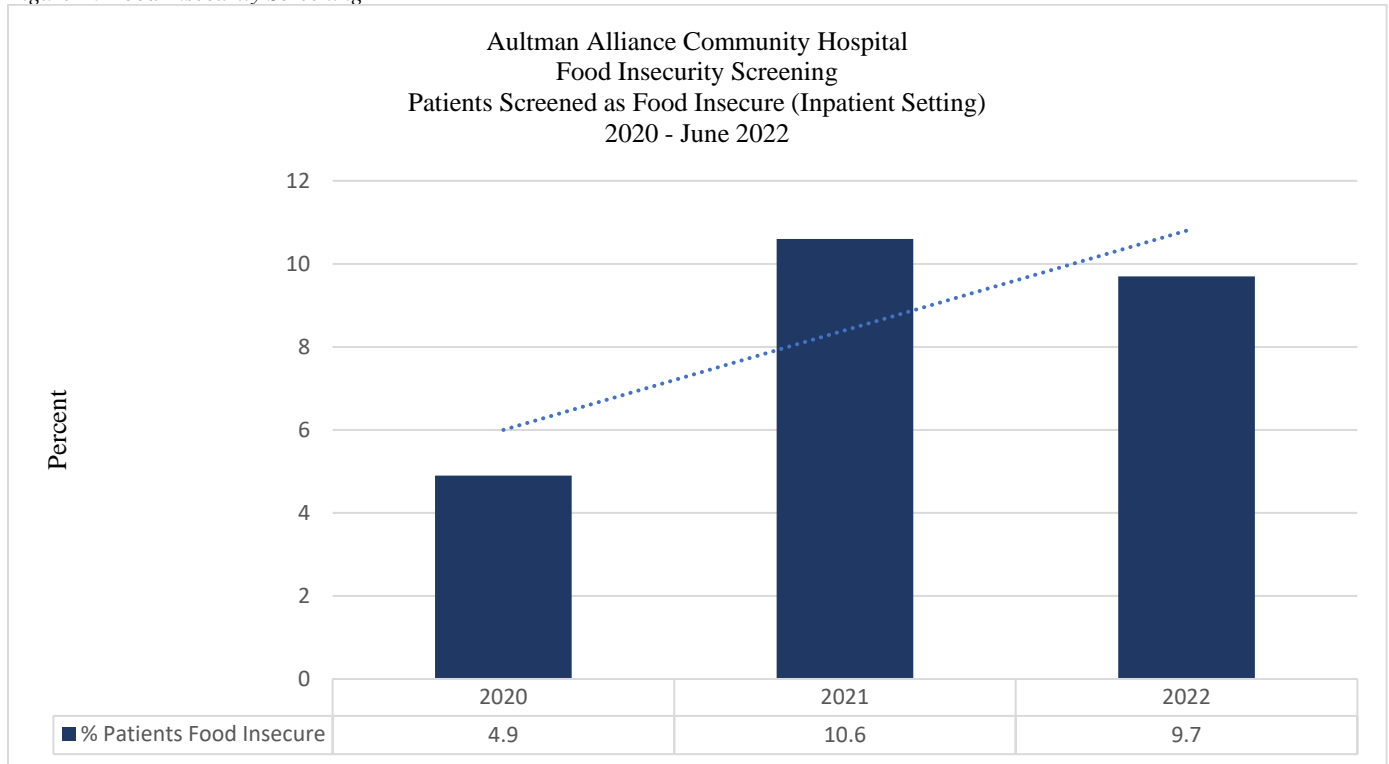
Source: Meditech

The Food Environment Index equally weights two indicators of the food environment: 1) limited access to healthy foods, which estimates the percentage of the population that is low income and does not live close to a grocery store and 2) food insecurity, which estimates the percentage of the population that did not have access to a reliable source of food during the past year. The Food Environment Index ranges from 0 (worst) to 10 (best). The Food Environmental Index is slightly better in Stark County than the state of Ohio (Figure 47).

Figure 47 Food Environment Index

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Food Environment Index						
	2015	**2016**	**2017**	**2018**	**2019**	**% Change**
Stark County	7.3	7.4	7.3	7.4	7.4	**+0.3%**
State of Ohio	6.6	6.7	6.7	6.8	6.8	**-0.2%**
Source: County Health Rankings						

Stark County has nearly the same percentage of the population that is food insecure or does not have access to a grocery store as the state of Ohio (Figure 48).

Figure 48 Food Insecurity Rate

| Food Insecurity Rate				
	2017	**2018**	**2019**	**% Change**
Stark County	14.2%	13.5%	13.4%	**-0.8%**
State of Ohio	14.5%	13.9%	13.2%	**-1.3%**
Source: Feeding America, Map the Meal Gap				

Nutritional Services Department Meal Preparation for Meals on Wheels America

As a community benefit, Aultman Alliance Community Hospital's Nutritional Services Department prepares meals, at cost, for the city of Alliance chapter of Meals on Wheels America. Community volunteers deliver the meals to city of Alliance residents in need of a food delivery service. The Alliance Towers (HUD affordable senior housing) receive most of the meals based on their grant funding. The number of meals prepared varies by year based on Meals on Wheels America budget including grant funding and the cost of the meals.

Evaluation of Impact

The number of meals prepared varies by year based on grant funding received and the cost of the meals. In 2020, the number of meals prepared increased to 17,205 from 15,476 in 2019 related to increased needs during the COVID-19 pandemic. In 2020-2021, Nutritional Services Department prepared 33,570 meals (an average of 9,000 more meals a year) for delivery to area residents (Figure 49).

Figure 49 Aultman Alliance Community Hospital Nutrition Department Prepared Meals for Meals on Wheels America

Aultman Alliance Community Hospital
Hospital Prepared Meals for Meals on Wheels
2019-2021

	2019	2020	2021
# Meals Prepared	15476	17205	16365
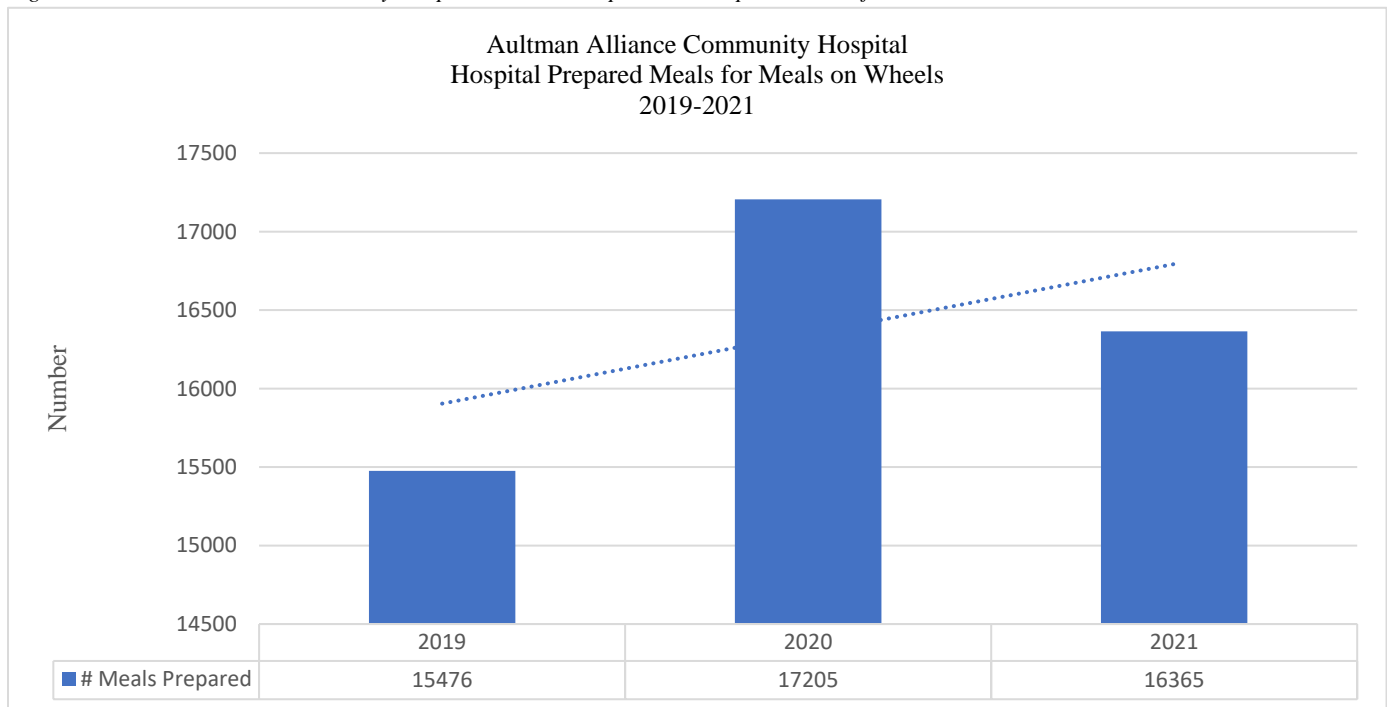
Source: Aultman Alliance Community Hospital Inhouse Report

Alliance Area Community Garden at Aultman Alliance Community Hospital Campus

The Greater Alliance Community Gardens Association helps support nine community gardens where people can grow vegetables, herbs, fruits and flowers for personal use. Some of the gardens offer individual plots while others have shared plots. Some of the gardens supply fresh food for meal kitchens and the local food pantry. Some of the gardens provide community education
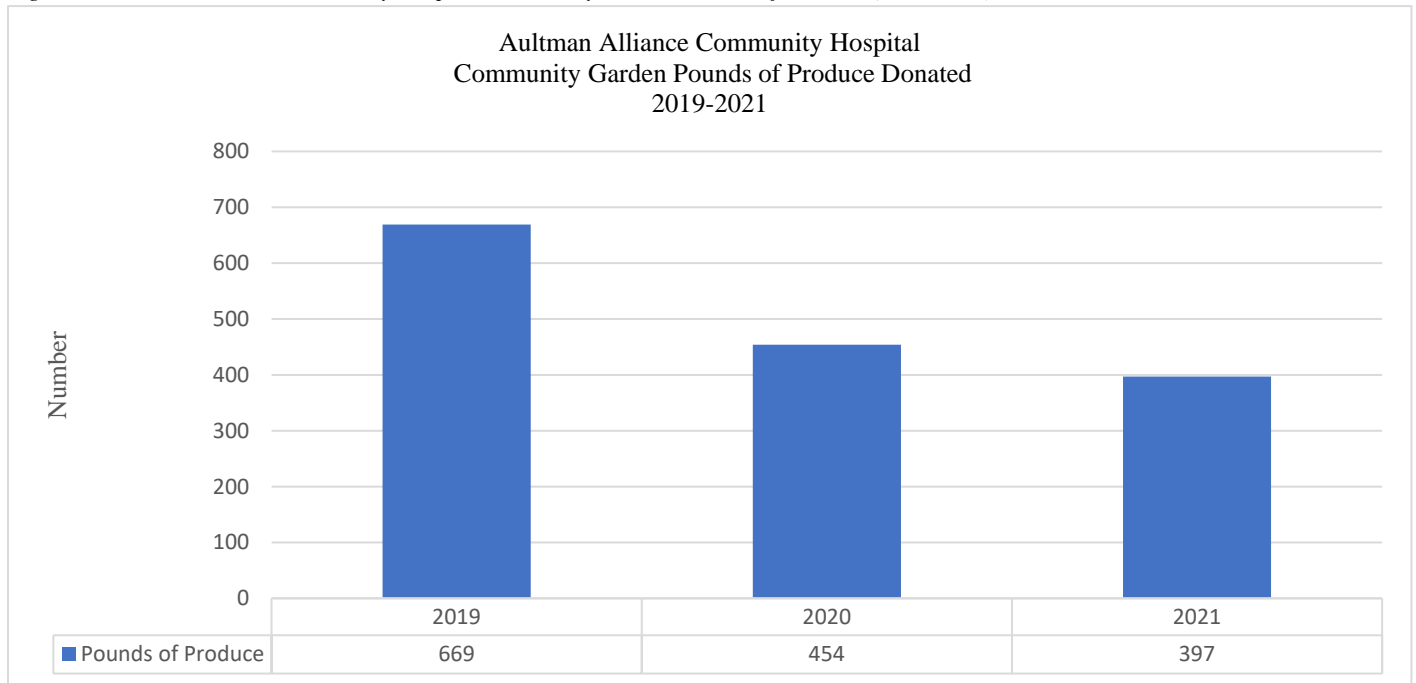
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programming and mentoring for at-risk youth. A committed team of volunteers operates and maintains each garden. Each garden beautifies the neighborhood, inspires community development, fosters good-neighbor relationships and instills community pride.

Initiated in 2017, the Aultman Alliance Community Hospital campus participates as one of the Greater Alliance Community Gardens Association community gardens that provides vegetables and fruits for local use. Produce is distributed to patients experiencing food insecurity, MEDS Clinic patients, wound care patients and others who present a need. Hospital Nutritional Services Department staff offer patients recipes on how to prepare nutritional meals with the produce. Aultman Alliance Community Hospital hosts a farmer's market a few times during the growing season with sale of produce to staff and visitors. Proceeds of the sale fund the community garden for the following year.

Evaluation of Impact

In 2020-2021, Community Garden at Aultman Alliance Community Hospital campus provided a total of 851 pounds of fresh produce for community consumption despite maintaining limited operations during the pandemic (Figure 50).

Figure 50 Aultman Alliance Community Hospital Community Garden Pounds of Produce (2019-2021)

Source: Aultman Alliance Community Hospital Inhouse Report

StarkFresh Mobile Grocery Market

In 2020, Aultman Alliance Community Hospital partnered with StarkFresh to establish a Mobile Grocery Market along two bus stops located near the hospital. The Mobile Grocery Market provides easy access to low-cost, nutritious food products, as well as locations and times to serve vulnerable community members. Aultman Alliance Community Hospital announced the new service to Alliance community members via mail to zip codes of low-income neighborhoods, social media and a city newspaper.

Evaluation of Impact

StarkFresh Mobile Grocery Market increases colleague and community member access to fresh produce with 78 pounds of produce provided in 2020 **and** 150 pounds of produced provided in 2021. In 2021, StarkFresh Mobile Grocery Market tripled the number of visits (33 visits) to the Aultman Alliance Community Hospital campus compared to 2020 (11 visits) (Figure 51).

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Figure 51 StarkFresh Mobile Grocery Market Visits and Transactions: Aultman Alliance Community Hospital Campus (2020-2021)
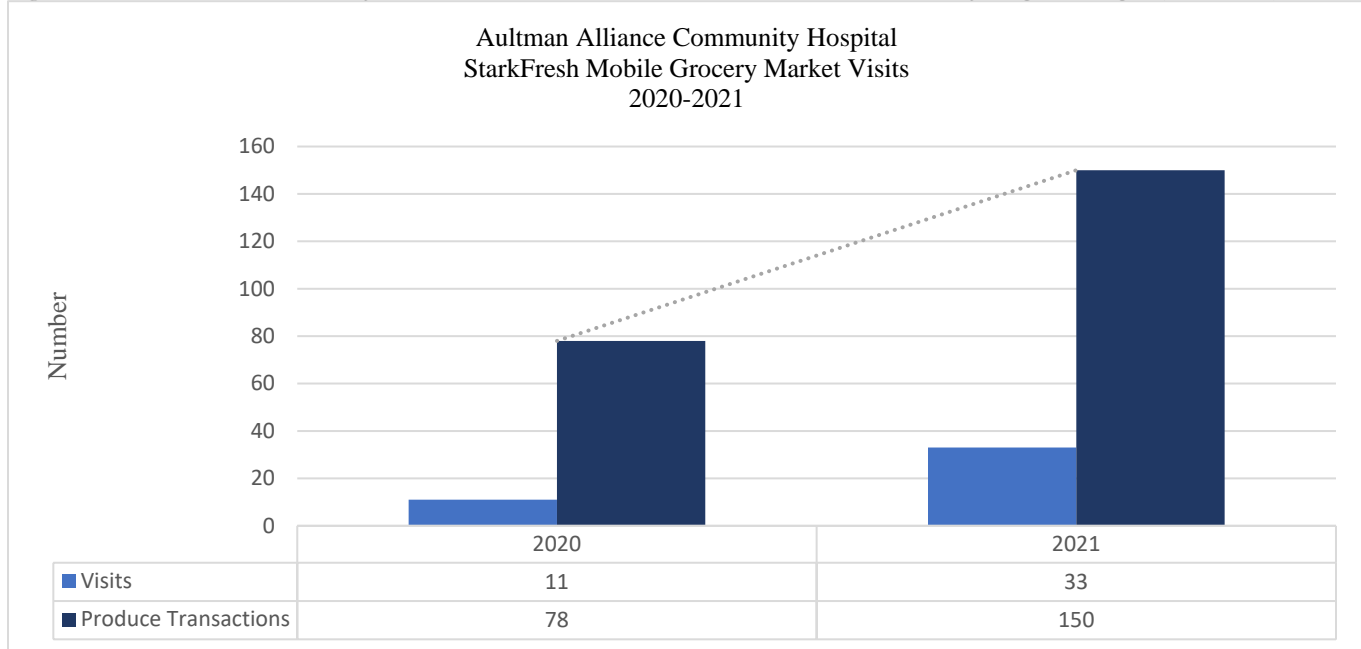
Aultman Alliance Community Hospital
StarkFresh Mobile Grocery Market Visits
2020-2021

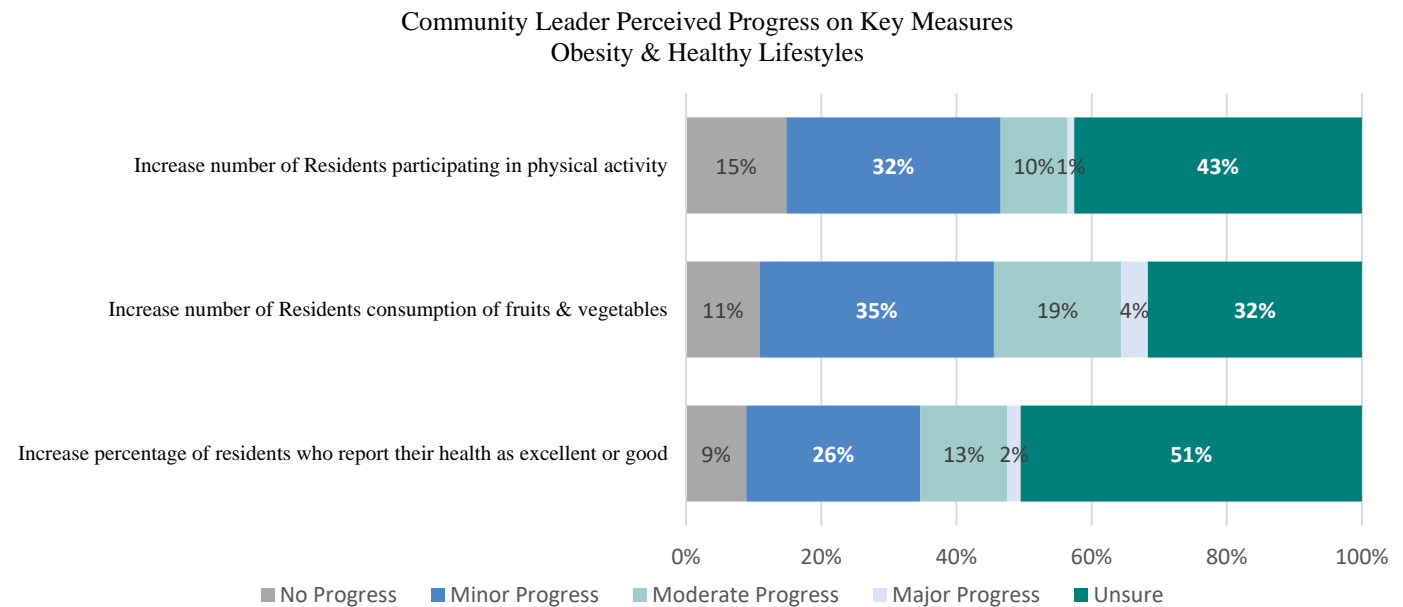|	2020	2021
Visits	11	33
Produce Transactions	78	150

Source: StarkFresh

Evaluation of Impact at the Stark County Level

Eleven percent (11%) of community leaders reported moderate/major progress on increasing the number of residents participating in physical activity. Twenty-three (23%) of community leaders reported moderate/major progress on increasing the number of residents consuming fruits and vegetables. Fifteen percent (15%) of community leaders reported moderate/major progress on increasing the percentage of residents who report their health as excellent or good (Figure 52).

Figure 52 Community Leader Perceived Progress on Key Measures Obesity & Healthy Lifestyles

Community Leader Perceived Progress on Key Measures
Obesity & Healthy Lifestyles

Increase number of Residents participating in physical activity: 15% No Progress, 32% Minor Progress, 10% Moderate Progress, 1% Major Progress, 43% Unsure

Increase number of Residents consumption of fruits & vegetables: 11% No Progress, 35% Minor Progress, 19% Moderate Progress, 4% Major Progress, 32% Unsure

Increase percentage of residents who report their health as excellent or good: 9% No Progress, 26% Minor Progress, 13% Moderate Progress, 2% Major Progress, 51% Unsure

■ No Progress ■ Minor Progress ■ Moderate Progress ■ Major Progress ■ Unsure

Source: Stark County Community Health Assessment

Community leaders were also asked what challenges they feel people in the community face when trying to maintain a healthy lifestyle. This was an open-ended question in which the respondent could give multiple responses. The most common responses mentioned were access to healthy food (44%), affordability (38%), safe outdoor green space (28%), health literacy/information overload (20%), time/busy schedules (14%), transportation (11%), social determinants of health (11%) and motivation (11%).

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Figure 53 Challenges that Keep People from Being Healthy		
	Responses	% of Community Leaders
Nutritious food to buy and prepare	49	44.1%
Affordability	42	37.8%
Safe outdoor green space	31	27.9%
Health Literacy	22	19.8%
Time	15	13.5%
Transportation	12	10.8%
Social determinants	12	10.8%
Motivation	12	10.8%
Indoor facility for physical activity	10	9.0%
Support system	10	9.0%
Health problems	7	6.3%
Social norms	6	5.4%
Ability to see healthcare worker	5	4.5%
Scheduled activities	5	4.5%
Childcare	3	2.7%
Total	244	(n=109)
Survey Question: What challenges do you feel people in the community face when trying to maintain a healthy lifestyle?		

Source: Stark County Community Health Assessment

Community Partners for Obesity and Healthy Lifestyle

- Access Health Stark County
- Akron Canton Regional Food Bank
- Alliance Community Garden Association
- Alliance Family Health Center
- Alliance Family YMCA of Central Stark County
- Alliance Farmers' Market
- American Heart Association
- AultCare
- Greater Alliance Community Gardens Association
- Kiwanis Club of Alliance, Ohio
- Rotary Club of Alliance
- Stark County Health Department
- StarkFresh Mobile Grocery Market
- Stark County Hunger Task Force
- University of Mount Union Student Health Center
- Vantage Aging
- Walsh University

Social Determinants of Health - Housing

Description

Where and how people live directly affect their well-being. Housing instability, a term for the continuum between homelessness and stable, secure housing includes substandard housing structures, unaffordable housing or severe rent burden. Research shows that individuals experiencing housing instability have limited access to preventive care and are more likely to have chronic health conditions including diabetes, cardiovascular disease and chronic obstructive pulmonary disease. A web of interconnected socio-economic factors contributes to housing instability and influences health outcomes. Housing stability leads to improved health outcomes through stable housing, employment, economic stability, social service programs and neighborhood safety. Lack of well-maintained and affordable housing contributes to a range of physical and mental health problems, including toxic and persistent stress and exposure to harmful contaminants such as lead and mold. High housing costs make it more difficult for families with low incomes to pay for other necessities, such as food and medical care, which also has a direct and negative impact on health (Ohio's State Health Improvement Plan, 2020).

Aultman Alliance Community Hospital Programs and Services: Social Determinant of Health Housing

Aultman Alliance Community Hospital chose not to address safe, affordable housing directly and will rely on the expertise of other organizations, including its affiliates Aultman Hospital and Aultman Health Foundation, to address this need. Other programs, facilities and organizations with more applicable expertise and resources exist within the community to address this need.

Evaluation of Impact

Not applicable.

Community Partners for Social Determinant of Health Housing

Not applicable.

Aultman Hospital

Priority Health Need 1: Access to Healthcare

Description

Access to high-quality, affordable, holistic and culturally relevant care. Aultman aims to expand its presence in the community, work to reduce barriers impacting access to care and improve coordination of care to ensure community members have equitable access to high-quality primary, acute, specialized, urgent and emergency care in appropriate settings.

Aultman Hospital Programs and Services: Access to Healthcare

Aultman Hospital implemented the following programs and services to address the priority health need access to healthcare.
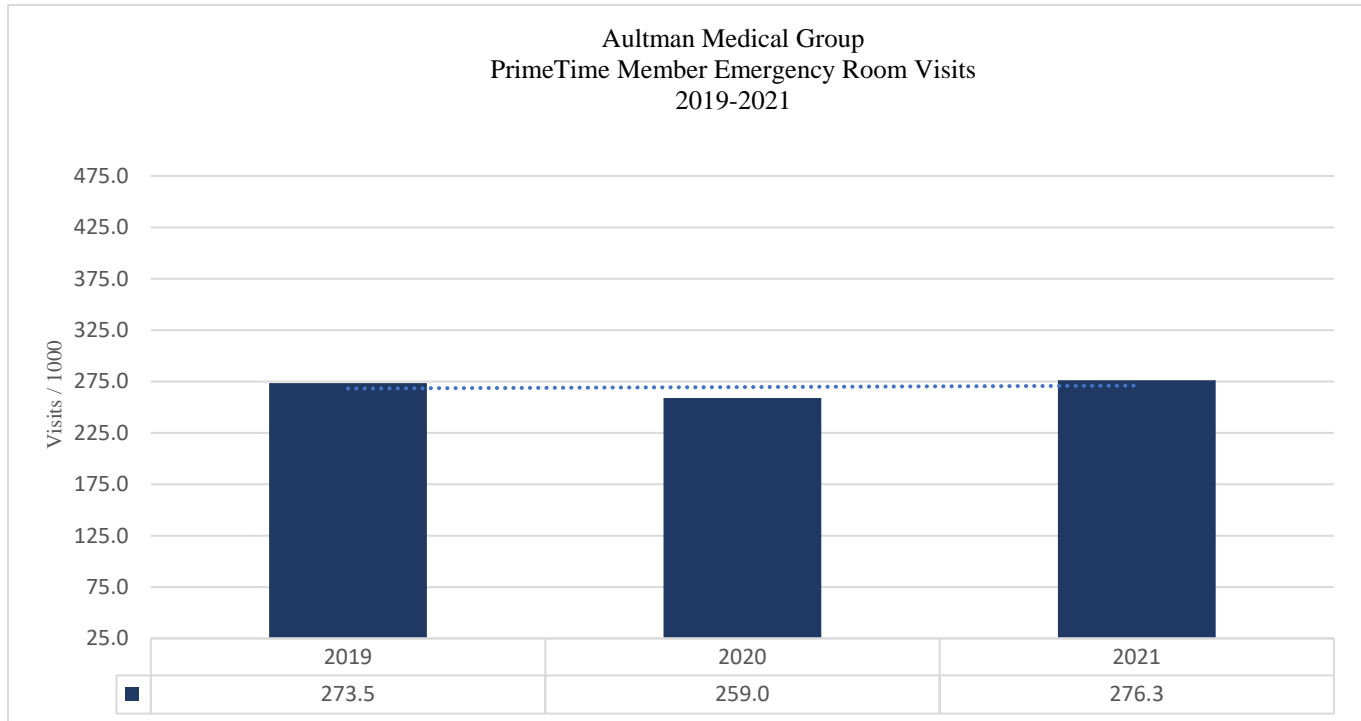
Aultman Medical Group

Aultman Medical Group, an Aultman Health Foundation affiliate, has a network of more than 240 medical professionals covering 23 specialties, increasing community access to a wide range of services. Physician and specialty practices and clinics span six counties at more than 20 locations providing community members with care close to home.

Evaluation of Impact

In 2021, Aultman Medical Group's 79 primary care providers (i.e., physicians, nurse practitioners, physician assistants) enhanced access to primary care with the aim of decreasing unnecessary emergency room utilization (Figure 54).

Figure 54 Aultman Medical Group Primary Care AultCare Primetime Enrollee Emergency Room Utilization

|	2019	2020	2021
■	273.5	259.0	276.3

Source: Aultman Medical Group

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Integrative Health Collaborative Medicare Shared Savings Program

Formed in December 2013, the IHC is an Accountable Care Organization, a group of doctors, hospitals and other healthcare providers who come together voluntarily to give coordinated, high-quality care to help meet traditional Medicare beneficiaries' healthcare needs. The IHC also partners with local agencies, skilled nursing facilities, rehabilitation facilities and others to help meet healthcare needs. By using a team approach, the IHC goal is to help guide patients through the healthcare system and make it easier to get the care they need when they need it. In collaboration with member physicians, IHC care coordinators, a social worker, pharmacist and others work closely with at-risk beneficiaries to help them meet their healthcare goals. This team links members to community resources, provides education on healthy lifestyle choices and chronic conditions (e.g., diabetes, chronic obstructive pulmonary disease, heart failure, hypertension, obesity) and offers social support. The IHC is committed to providing access to the highest quality of care at the lowest cost.

Evaluation of Impact

In 2019-2022, the Integrative Health Collaborative Medicare Shared Savings Program (IHC MSSP) experienced a decreasing trend in number of emergency room visits per 1,000 enrollees with 35 visits in 2019, 26 visits in 2020, 32 visits in 2021 (Figure 55) and increasing trend in primary care visits with 908 visits in 2019, 947 visits in 2020 and 3019 visits in 2021 (Figure 56).

Figure 55 Integrative Health Collaborative Medicare Shared Savings Program Emergency Room Utilization (2019-2022)

	2019	2020	2021
■ #ED Visits/1000	35	26	32
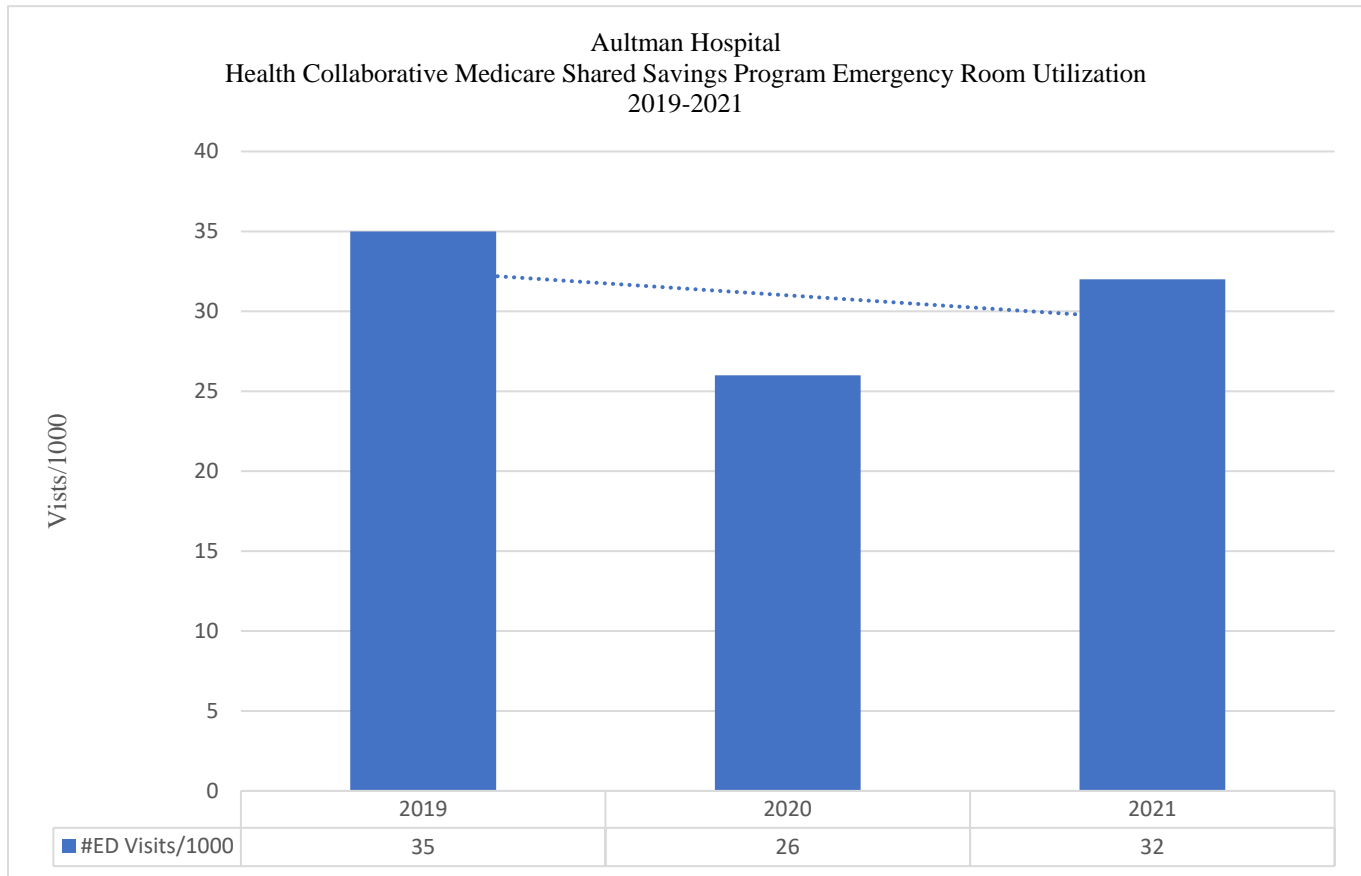
Source: IHC MSSP

Figure 56 Integrative Health Collaborative Medicare Shared Savings Program Primary Care Utilization (2019-2022)

Aultman Hospital
Integrative Health Collaborative Medicare Shared Savings Program Primary Care Utilization
2019-2021

	2019	2020	2021
■ #Primary Care Visits/1000	908	947	3019
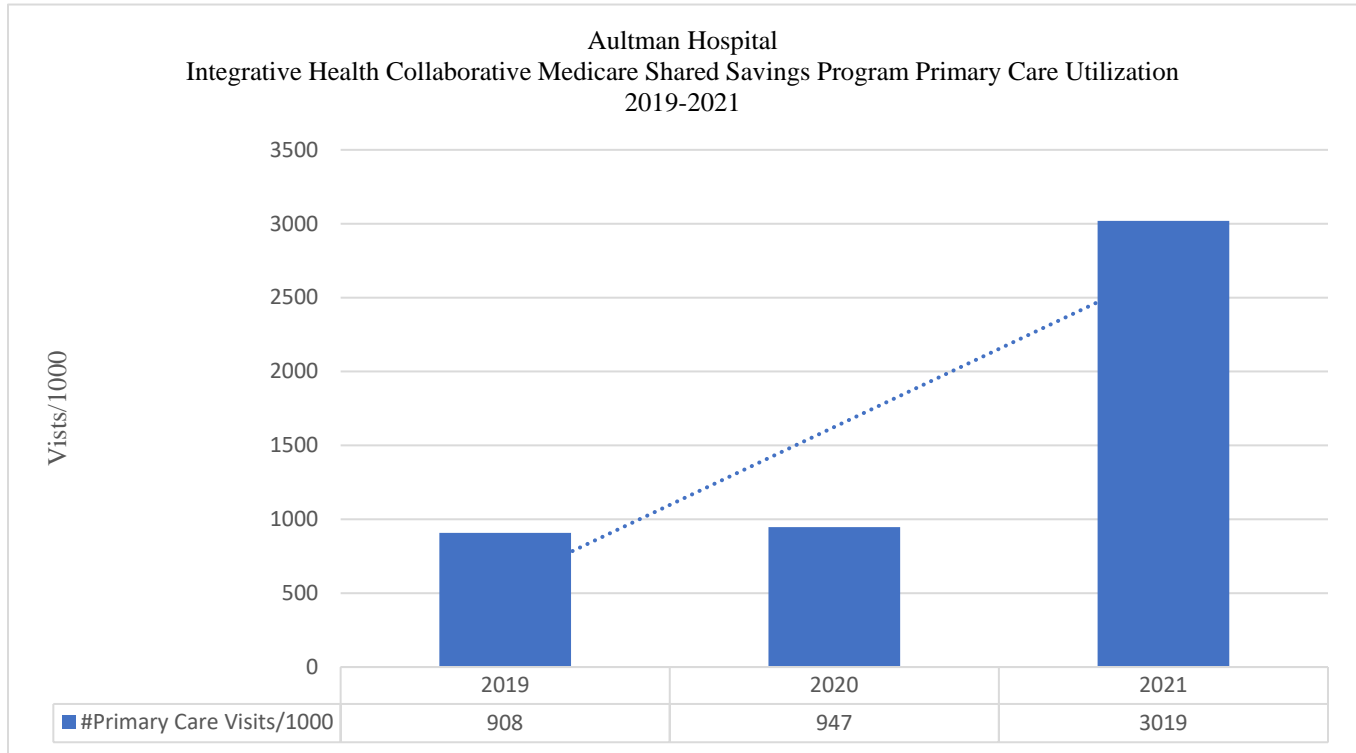
Source: IHC MSSP

AultmanNow Telehealth Services

Since 2018, Aultman has offered the AultmanNow App for telehealth services that connect community members for one-on-one scheduled or on-demand discussions with an experienced, board-certified physician from home, work or school 24/7/365 about non-emergency ailments like sore throat, cough, cold, fever and more. In 2020, the Department of Health and Human Services took steps that enabled Aultman to expand telehealth services during the COVID-19 pandemic. The Centers for Medicare & Medicaid Services telehealth waivers made it easier for people enrolled in Medicare, Medicaid and Children's Health Insurance Program to receive medical care through telehealth services during the COVID-19 pandemic public health emergency. Some of the changes allow providers to:

- Conduct telehealth with patients located in their homes and outside of designated rural areas.
- Practice remote care, even across state lines, through telehealth.
- Deliver care to both established and new patients through telehealth.
- Bill for telehealth services (both video and audio-only) as if they were provided in person.

In 2020, the Federal Communications Commission awarded Aultman a $294,749 COVID-19 Telehealth Program grant, part of the $2 trillion Coronavirus Aid, Relief and Economic Security (CARES) Act, to support telehealth expansion amid the pandemic. Aultman used the funding for a telehealth platform, office equipment, mobile hotspots and telehealth equipment to enhance patient access to healthcare via smartphones, tablets and computers. As a result, Aultman was able to rapidly expand access to telehealth services, adding 400 clinicians and 17 telehealth services. In 2020, Aultman launched AultmanNow App primary care services, further expanding access to care.

Telehealth services connect community members with the following provider services from Aultman Medical Group, an affiliate of Aultman Health Foundation:
- Aultman Primary Care Practices (10 practices)
- AultmanNow Urgent Care Centers (4 centers)

Telehealth services may also connect community members with the following Aultman Hospital interprofessional services:
- Aultman Behavioral Health Services
- Aultman Cardiovascular Consultants
- Aultman Cardiovascular Rehabilitation
- Aultman Cardiothoracic Surgery
- Aultman Care Coordination
- Aultman Clergy
- Aultman Diabetes

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- Aultman General Surgery
- Aultman Give It Up! Program
- Aultman Grief Counseling
- Aultman Infectious Disease consultation
- Aultman Lactation Services
- Aultman Neurology
- Aultman Nutrition
- Aultman Oncology Services
- Aultman Outpatient Therapy Services
- Aultman Pain Management
- Aultman Palliative Care
- Aultman Pulmonary Rehabilitation
- Aultman Radiation Oncology Services
- Aultman Rural Health Clinic (Wayne County)
- Aultman Urology
- Aultman Weight Management

AultCare, an Aultman Health Foundation affiliate, offers enrollees AultCare Wellness via AultmanNow telehealth.
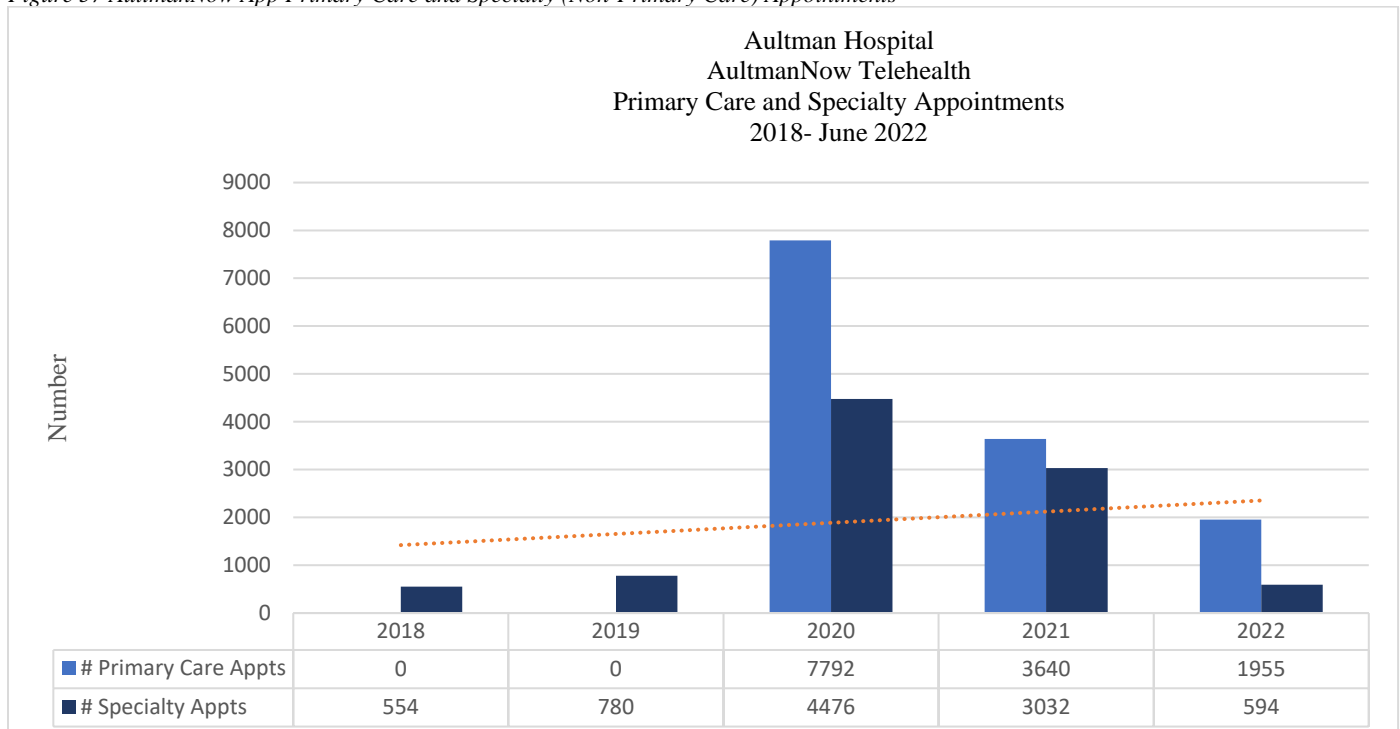
Telehealth services also connect community members with contracted Amwell providers for the following services:
- Urgent care for non-emergency ailments (e.g., sore throat, cough, cold, fever) for a flat $59 patient fee with no insurance necessary.
- Behavioral health.

Evaluation of Impact

In 2020-2021, Aultman Medical Group primary care and specialty providers offered telehealth appointments in addition to office visits, providing additional access to primary care and specialty services. Aultman Medical Group provided 7,792 primary care telehealth appointments in 2020, 3,640 primary care telehealth appointments in 2021 and 1,955 primary care telehealth appointments in the first half of 2022. Aultman Medical Group provided 4,476 specialty care telehealth appointments in 2020, 3,032 specialty care telehealth appointments in 2021 and 594 specialty care telehealth appointments in the first half of 2022. The 2020 launch of telehealth primary care services and the expansion of specialty telehealth services provided an alternative to office visits during the COVID-19 pandemic, increasing access to healthcare. In 2020, the pandemic skewed the volume of telehealth appointments with an overall increased trend in utilization of telehealth services (Figure 57).

Figure 57 AultmanNow App Primary Care and Specialty (Non-Primary Care) Appointments

Aultman Hospital
AultmanNow Telehealth
Primary Care and Specialty Appointments
2018- June 2022

|	2018	2019	2020	2021	2022
# Primary Care Appts	0	0	7792	3640	1955
# Specialty Appts	554	780	4476	3032	594

Source: Aultman Telehealth Services

Evaluation of Impact at the Stark County Level

More than half of community leaders (56.0%) agreed/strongly agreed that "*Residents in Stark County are able to access a primary care doctor when needed.*" Nearly a quarter, 24.0%, disagreed with this statement (Stark County Community Health Assessment). Forty-two percent (42%) of community leaders reported moderate/major progress in increasing the number of Stark County residents who have a primary care provider (Figure 58).

Figure 58 Community Leader Perceived Progress on Key Measures Access to Healthcare
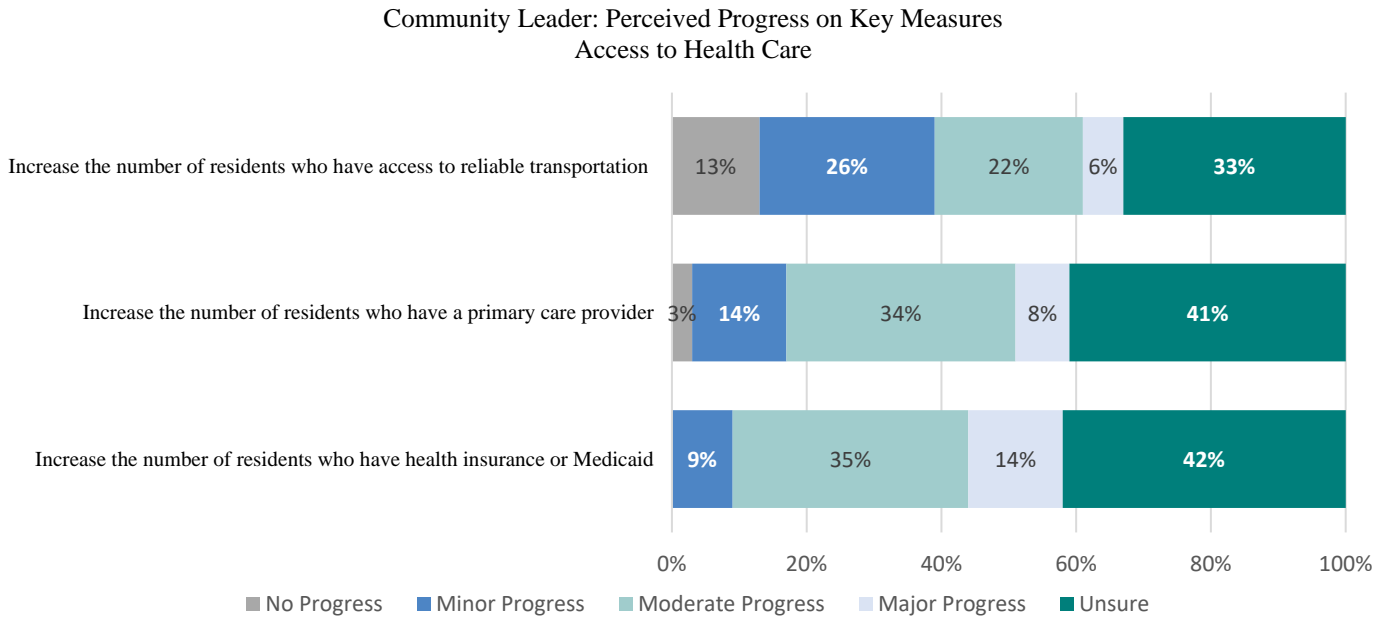
Community Leader: Perceived Progress on Key Measures
Access to Health Care

Source: Stark County Community Health Assessment

Community Partners for Access to Healthcare
- Amwell telemedicine
- Aultman Medical Group
- Aultman North Canton Medical Group
- Centers for Medicaid and Medicare Services
- Integrative Health Collaborative physician members (nearly 400)

Priority Health Need 2: Mental Health

Description

The mental health priority health need encompasses access to mental health services, heroin/opioid use and youth suicide. Access to mental healthcare focuses on the integration of mental health services in primary care, substance abuse treatment and violence prevention. The misuse of and addiction to heroin and opioids (including prescription pain relievers and synthetic opioids such as fentanyl) continues to be a national crisis. The Centers for Disease Control and Prevention estimates the "economic burden" at $78.5 billion a year (National Institute on Drug Abuse, 2019). Youth suicide prevention remains a priority focus in Stark County.

AultCare, an Aultman Health Foundation affiliate, launched the You Matter campaign to increase community awareness of the importance of mental health and decrease the stigma associated with mental illness. The message has spread across all corners of our communities. From our hospitals to the school systems, You Matter shares that everyone matters. In 2020-2021, AultCare collaborated with Child & Adolescence Behavioral Health to promote the message of You Matter from elementary school to high school students including support for the annual Stark County Children's Mental Health Awareness Week. In 2021, more than 42,500 students in 10 school districts benefited from the third annual Stark County Children's Mental Health Awareness Week. During this week, a unity video featured 21 high school mental health champions from the partnership school districts. AultCare provided You Matter messaging materials for Child & Adolescence Behavioral Health staff members and more than 350 Stark County school administrators including You Matter T-shirts, posters and notepads to reinforce the positive message to students. AultCare awarded 41 scholarships in 2020 and 40 scholarships in 2021 to one graduating senior from each high school in the five-county primary service area to recognize the students' resilience despite significant sacrifices.

Aultman Hospital Programs and Services: Mental Health (Access)

Aultman Hospital implemented the following programs and services to address the priority health need mental health access to care.

Behavioral Health Access and Integration Collaborative

In 2019, Aultman Behavioral Health Corporate Plan team members recognized the need for community collaboration to address access to mental health services in Stark County. As a result, Aultman Health Foundation engaged with community stakeholders to form an ad hoc Behavioral Health Strategy Workgroup to develop a sustainable long-term plan. In 2020, Aultman Health Foundation, StarkMHAR and the Stark County Educational Service Center funded a county-wide Chief Integration Officer (CIO) position to lead a community initiative for increasing access to Stark County mental health services. As a first step, the CIO is studying the scope of the need, identifying the social determinants of health that challenge people from accessing mental health services and leading integration and coordination of access to county mental health services and resources. The CIO formed a community Behavioral Health Access and Integration Collaborative (Collaborative), a Stark County initiative supported by Aultman Health Foundation, Stark Mental Health & Addiction Recovery and the Stark County Educational Service Center that focuses on two primary goals: a) increase access to behavioral health services through innovative evidence-based models, and b) address the barriers and challenges posed by Social Determinants of Health that inhibit Stark County's residents from accessing behavioral health services. In 2021, the collaborative formed three subcommittees to a) establish HIPAA compliant practices for sharing of data, b) establish a process for data usage to facilitate community treatment services and care coordination between healthcare providers and c) to study social determinants of health that influence access to behavioral health services. Aultman Alliance Community Hospital and Aultman Hospital will share data on adult and youth utilization of their emergency departments for behavioral health services. This information will be shared with stakeholders as a means of determining success of current initiatives used to address the community member mental health challenges and provide insight into unknown challenges that would need to be addressed with additional or new strategies. Through various sources of data (2017-2021), the collaborative hopes to identify trends in chronic use of emergency departments for behavioral healthcare, including the Aultman Alliance Community Hospital and Aultman Hospital emergency departments.

Evaluation of Impact

From September 2021 through April 2022, the Chief Integration Officer conducted six community meetings and 15 small focus groups hosted in the 17 Stark County school districts to ensure information gathering by locality. Community members participated in a virtual facilitated discussion regarding barriers and challenges posed by community social determinants of health and strategies to address them. Long-term plans include the creation of increased outpatient access points for behavioral health services through evidence-based models for integration into the primary care settings. This strategy is hoped to contribute to a decreased emergency department utilization rate for behavioral health conditions.
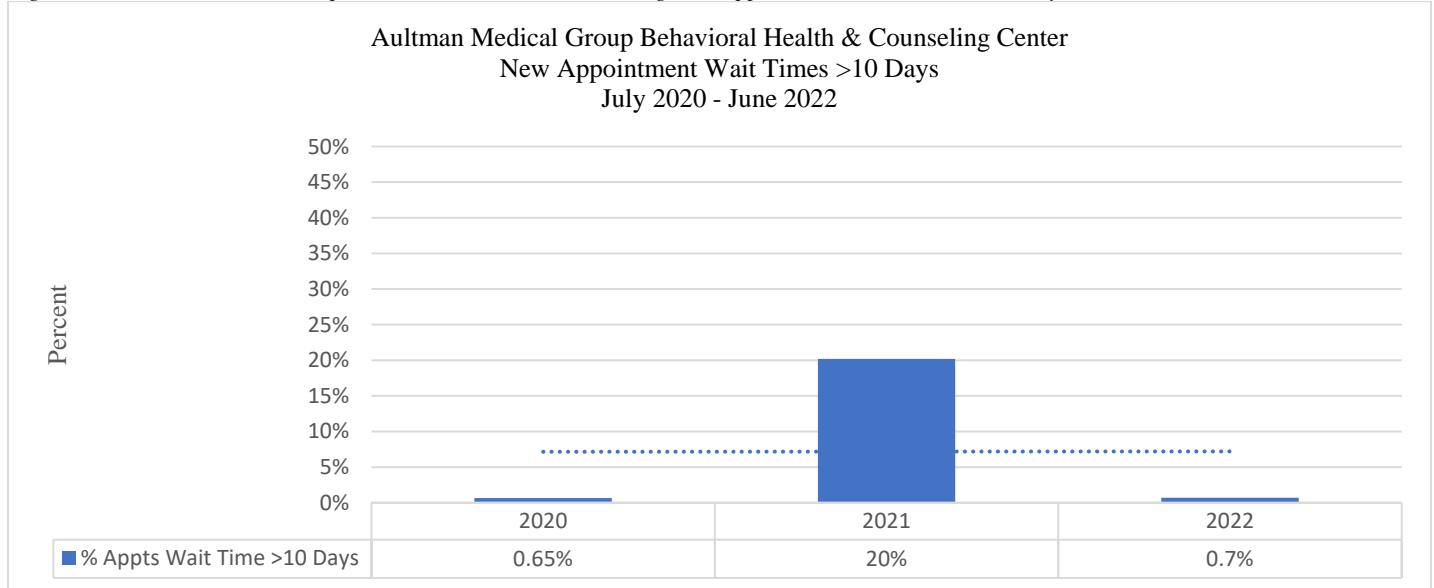
Aultman Medical Group Behavioral Health and Counseling Center

Aultman Medical Group, an Aultman Health Foundation affiliate, offers psychiatric services and other treatments tailored toward the individual patient through a Behavioral Health and Counseling Center. Behavioral health specialists partner with the region's physicians and mental health providers, offering a wide range of services for mental health concerns including anxiety, bipolar disorders, personality disorders and post-traumatic stress disorder. A team of psychiatrists and mental health specialists offer a range of treatment modalities including psychiatric assessments, medication evaluation/management, individual therapy and dialectical behavioral therapy. In 2021, an advanced practice registered nurse joined the practice, and a counselor joined in 2022.

Evaluation of Impact

Aultman Medical Group Behavioral Health and Counseling, an Aultman affiliate, started tracking wait times in July 2020 with a 0.65% wait time greater than 10 days. In 2021, increased demand for services and provider turnover contributed to a wait time greater than 10 days for 20.2% (231/1144) of new appointments. In the first half of 2022, 0.7% (4/588) of new appointments had a wait time greater than 10 days (Figure 59).

Figure 59 Aultman Medical Group Behavioral Health & Counseling New Appointments Wait Times >10 Day

Source: Aultman Medical Group Behavioral Health and Counseling Report

Aultman College of Nursing and Health Sciences Bachelor of Social Work Degree Program

The Bachelor of Social Work program at Aultman College is a four-year degree with fieldwork components that prepares students to become licensed social workers upon graduation. The Social Work Substance Abuse course in the social work program fulfills the educational requirement to sit for the certified chemical dependency assistant phase I exam.

Evaluation of Impact

Aultman College of Nursing and Health Sciences had no social work program students eligible to graduate in 2020 to 2022.

Evaluation of Impact at the Stark County Level

Mental health providers refers to the ratio of the county population to the number of mental health providers including psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists, mental health providers who treat alcohol and other drug abuse and advanced practice nurses specializing in mental healthcare. In the state of Ohio, there is 1 mental health provider for every 350 residents. The ratio in Stark County is slightly better (Figure 60).

Figure 60 Mental Health Providers											
	2017		2018		2019		2020		2021		% Change
	# of Provider	Ratio	# of Provider	Ratio	# of Provider	Ratio	# of Provider	Ratio	# of Provider	Ratio	
Stark County	814	460:1	888	420:1	1,039	360:1	1,093	340:1	1,154	320:1	+41.7
State of Ohio	-	560:1	-	470:1	-	410:1	-	380:1	-	350:1	-
Source: County Health Rankings & Roadmaps. Original Source: HRSA Area Resource File. http://www.countyhealthrankings.org											

Community Partners for Mental Health (Access)

- Akron Children's Hospital
- Aultman Alliance Community Hospital
- AultCare
- Aultman Health Foundation
- Canton City Board of Health
- Coleman Professional Services
- CommQuest Services, Inc.
- Cleveland Clinic Mercy Hospital
- Northeast Ohio Medical University (NEOMED)
- Sisters of Charity Foundation
- Stark County Educational Service Center
- StarkMHAR

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Aultman Hospital Programs and Services: Mental Health (Addiction)

Aultman Hospital implemented the following programs and services to address the priority health need of mental health heroin and opioid use.
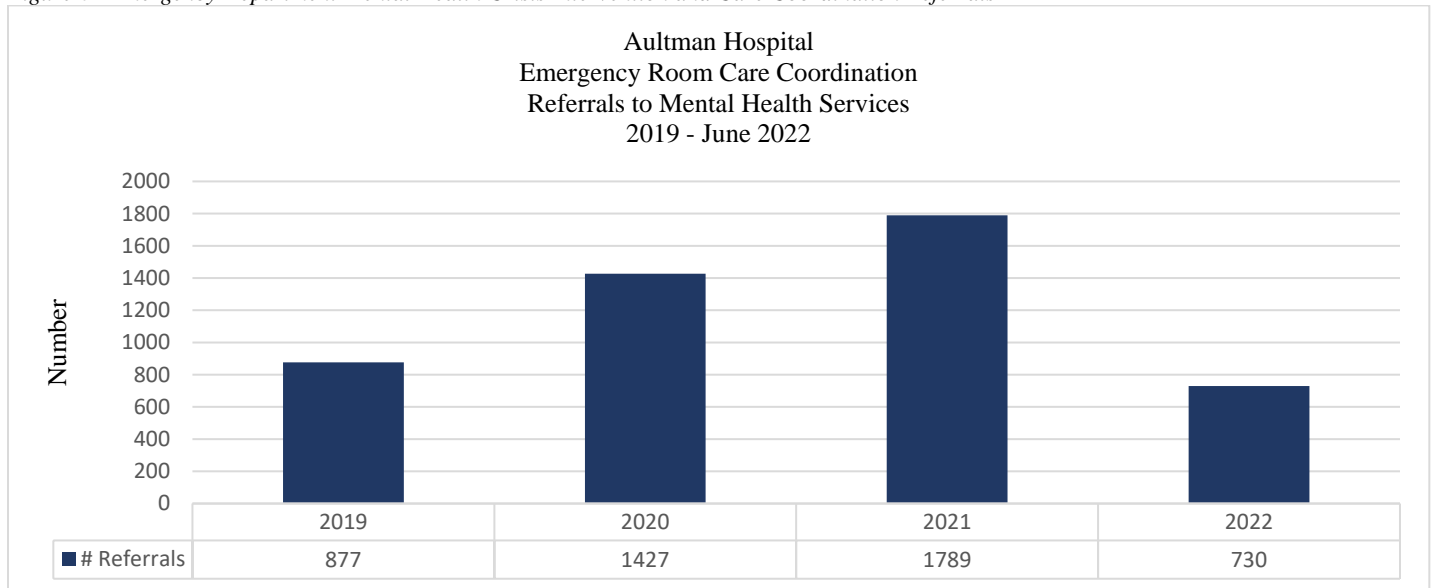
Aultman Hospital Emergency Room Mental Health Crisis Intervention and Care Coordination

Aultman emergency room social workers and a Coleman Professional Services behavioral health navigators provide crisis intervention and care coordination for patients who present to the emergency room with a mental health crisis, including patients who present as an overdose or who seek detox services. The social workers and behavioral health navigators facilitate the placement of patients who seek detox services to inpatient services. They may also refer patients to community Stark County Treatment Accountability for Safer Communities (TASC) peer recovery supporters for coordination of the patient transition to the appropriate community mental health services setting.

Evaluation of Impact

The emergency room care coordination services provided mental health referrals and placements for 50% more emergency department patients (1,789 referrals and placements) in 2021 compared to 877 referrals and placements in 2019. In the first half of 2022, emergency room care coordination services provided mental health referrals and placements for 730 patients (Figure 61).

Figure 61 Emergency Department Mental Health Crisis Intervention and Care Coordination Referrals

	2019	2020	2021	2022
# Referrals	877	1427	1789	730

Aultman Hospital
Emergency Room Care Coordination
Referrals to Mental Health Services
2019 - June 2022

Source: Cerner

## CommQuest Detox and Recovery Unit in Aultman Hospital

In 2020, CommQuest Services and Aultman Hospital partnered to open a withdrawal management unit within Aultman Hospital. Under this partnership agreement, CommQuest Services operates a withdrawal management unit focusing on addiction services, serving individuals who are in crisis and in need of recovery treatment. The new program allows CommQuest and Aultman staff to collaborate and facilitate individual needs related to withdrawal management for those patients who may be treated in the hospital. Previously, CommQuest Services operated detox units at CommQuest's Regional Center for Detox and Recovery (ReCOR) at its Massillon Recovery Campus. Relocating and expanding withdrawal management services allowed CommQuest Services the continued ability to offer 24/7 detox services with no waiting lists. This is a critical component related to ease of access and continuity of care. For many people struggling with addiction, their first contact with care is often due to an overdose. This hospital-based location provides for immediate intake upon release from Aultman Hospital emergency room medical treatment into the CommQuest Detox and Recovery Unit, avoiding care delays.

In 2021, the CommQuest Services closed the detox unit at Aultman Alliance Community Hospital due to a pattern of low patient volumes and lower demand for services during the COVID-19 pandemic and did not renew the lease for 2022. CommQuest transferred patients to CommQuest Detox and Recovery Unit at Aultman Hospital. Calls to the CommQuest Detox Unit at Aultman Alliance Community Hospital are forwarded to the CommQuest Detox and Recovery Unit at Aultman Hospital.

Evaluation of Impact

Opening in March 2020, the CommQuest Detox and Recovery Unit in Aultman Hospital increased community access for inpatient mental health services for addiction recovery care with over 2219 admissions through the first half of 2022 (Figure 62).

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Figure 62 CommQuest Detox and Recovery Unit in Aultman Hospital Patient Volumes

Aultman Hospital
CommQuest Detox and Recovery Unit Patient Volumes
March 2020 - June 2022

	2020	2021	2022
Patient Volumes	759	1055	405
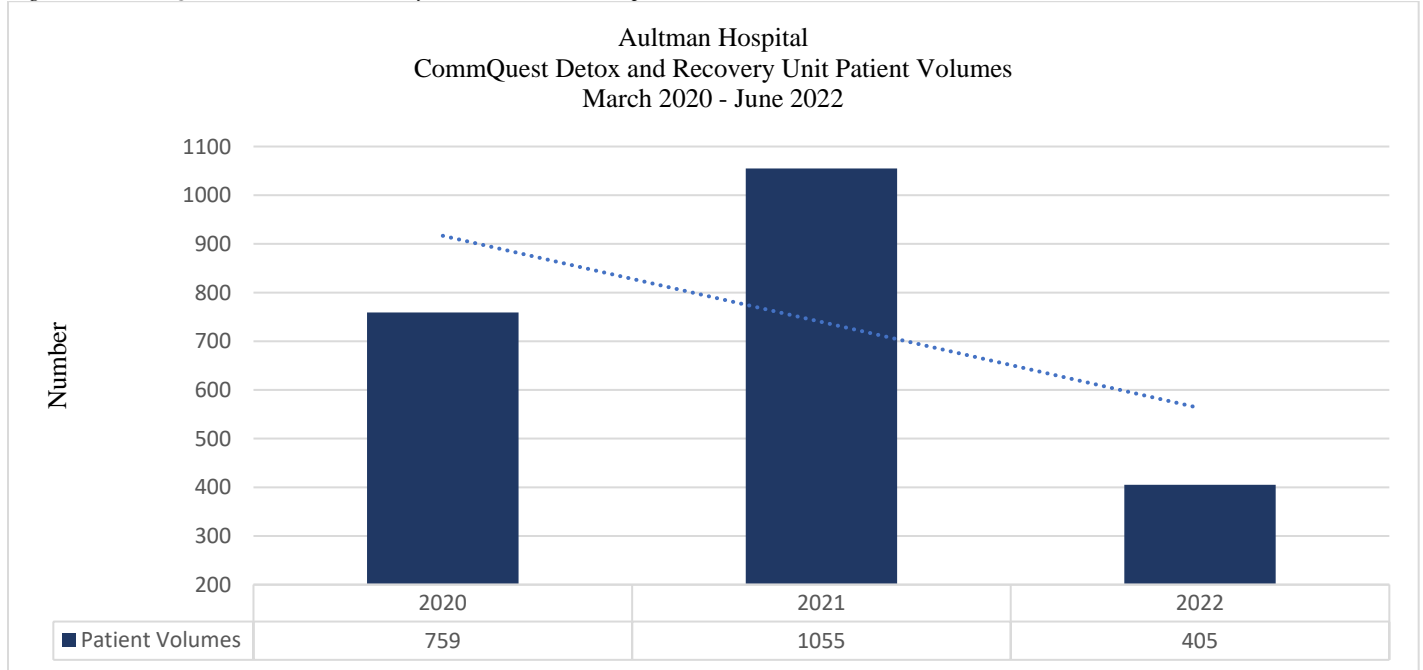
Source: CommQuest Services Report

Aultman Opioid Committee

The Aultman Opioid Committee is an integrated and standardized Aultman-wide committee with subcommittees that address the key drivers of safe opioid prescribing practices. In 2022, committee members will explore additional areas of opportunity identified from a 2021 Ohio Hospital Association Gap Analysis including overdose policies, standard policies and protocols for opioids in the facility, standardized naloxone dispensing, buprenorphine training and cultural competence in the care of patients with opioid use disorder.

Subcommittee Information Technology
The subcommittee aims to enhance transitions between practitioners with the use of safe, effective, optimal use of technology in the clinical setting. Strategies include creating a dashboard for provider feedback (e.g., chronic and acute opioid measures such as benzodiazepine co-prescribing), making recommendations on the use of the Cerner opioid toolkit and facilitating changes to the electronic medical record. The Cerner opioid toolkit includes a central chart location to review opioid-related risk, clinical decision support for opioid management, opioid management analytics to help enable assessment of prescribing patterns, opioid treatment and naloxone provisioning and a predictive model to help inform providers of patients' risk for a future opioid use disorder event.

Subcommittee Acute/Chronic Pain & Regulatory/Compliance
The subcommittee aims to support safe inpatient prescribing practices with adherence to regulatory and compliance standards on pain assessment and management. The subcommittee aims to promote the proper treatment and evaluation of standards of clinical practice and patient care for consistency with evidence-based practice, quality outcomes and regulatory requirements.

Subcommittee Education
The subcommittee aims to educate physicians, nurses, clinicians and patients on the opioid crisis. Subcommittee members secure speakers, determine topics and identify logistics for the healthcare delivery system. Topics include understanding Ohio law, morphine equivalent dose and interpretation of a urine drug screen. Patient education includes safe disposal of medications with the distribution of Drug Disposal Kits on discharge.

Evaluation of Impact

Subcommittee Information Technology
Aultman Hospital implemented the Cerner Opioid Toolkit in 2022.

Subcommittee Education
In 2021, all credentialed employed providers who prescribe opioids completed the safe opioid prescribing education. Source: Medical Staff Office.

Subcommittee Acute/Chronic Pain & Regulatory/Compliance

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In 2020 to June 2022, Aultman Hospital met the committee goal with 99% of prescriptions for opioid pills with a quantity/supply of ≤7 days at discharge (Figure 63).

Figure 63 Opioid Prescription Pill Quantity/Supply ≤7 days at Discharge

Aultman Hospital
Opioid Prescription Pill Quantity/Days Supply ≤7 Days at Discharge
2020 - June 2022

	2020	2021	2022
■ % Opiate Rx supply ≤7 days	99	99	99
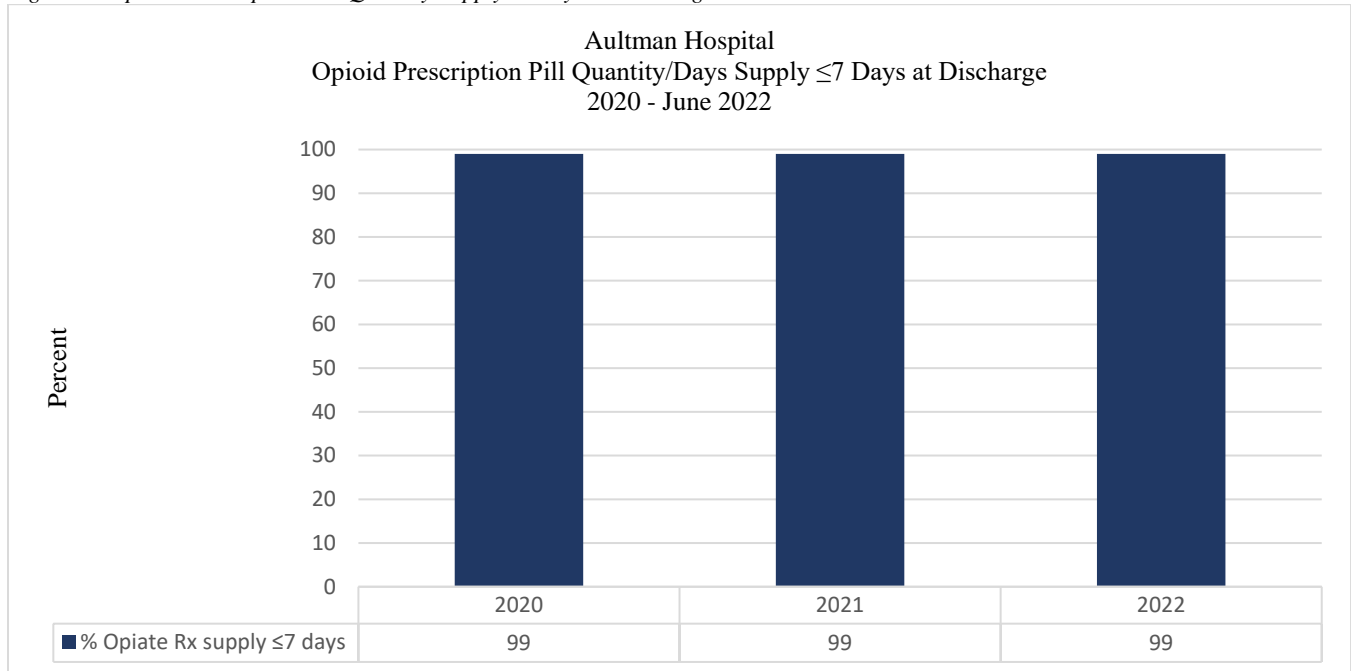
Source: Cerner

The committee achieved the goal of keeping IV push doses of opioids within the acceptable range in 2020 through the first half of 2022 (Figure 64).

Figure 64 Opioid IV Push Doses within Acceptable Range Inpatient Settings Excluding ED, OR, End of Life Care

Aultman Hospial
Opioid IV Push Doses within Acceptable Ranges
Inpatient Settings Excluding ED, OR, End of Life Care
2020- June 2022

	2020	2021	2022
■ % IVP Opioid Dose in Range	100%	100%	100%
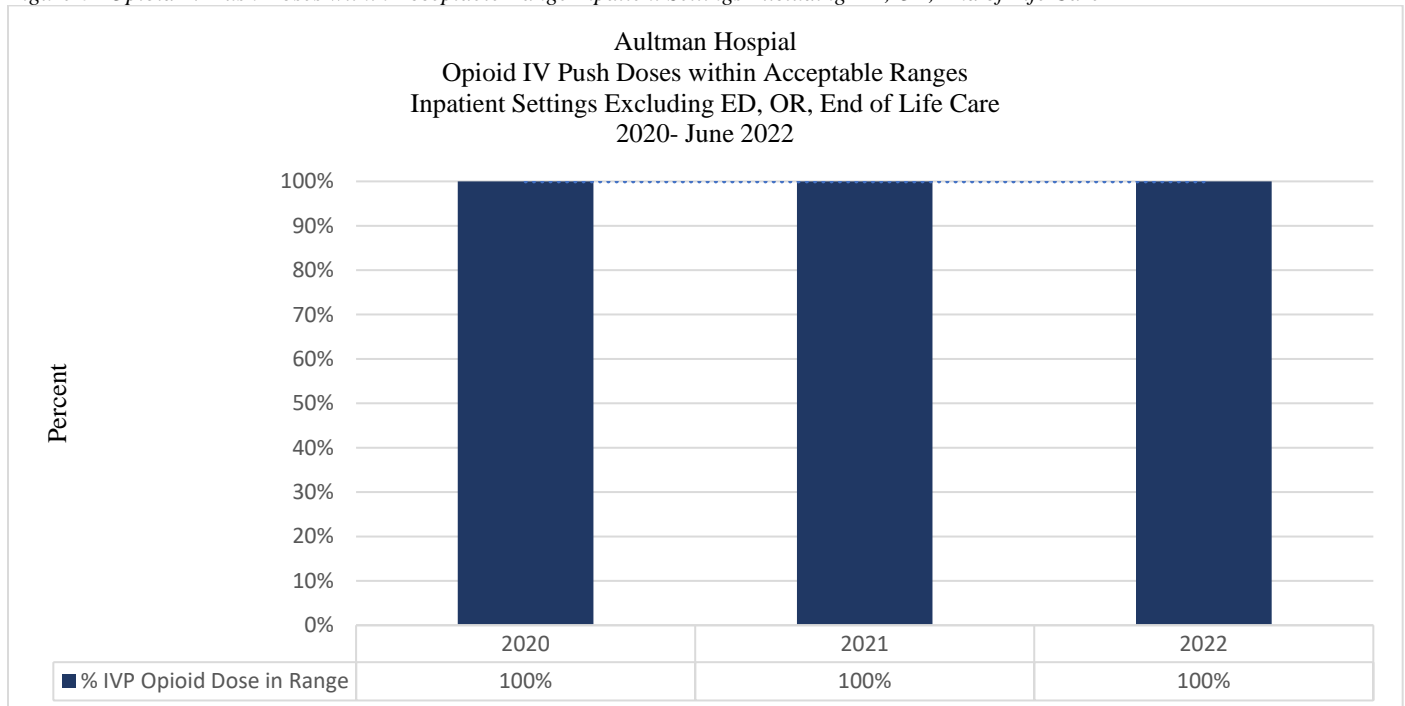
Source: Cerner

In 2020-2021, the committee identified no unusual trends or patterns in naloxone doses, with fewer doses (74) required in 2021 compared to 2020 (122) in inpatient settings excluding the emergency room and operating rooms. In the first half of 2022, 41 naloxone doses were administered in inpatient settings excluding the emergency department and operating rooms (Figure 65).
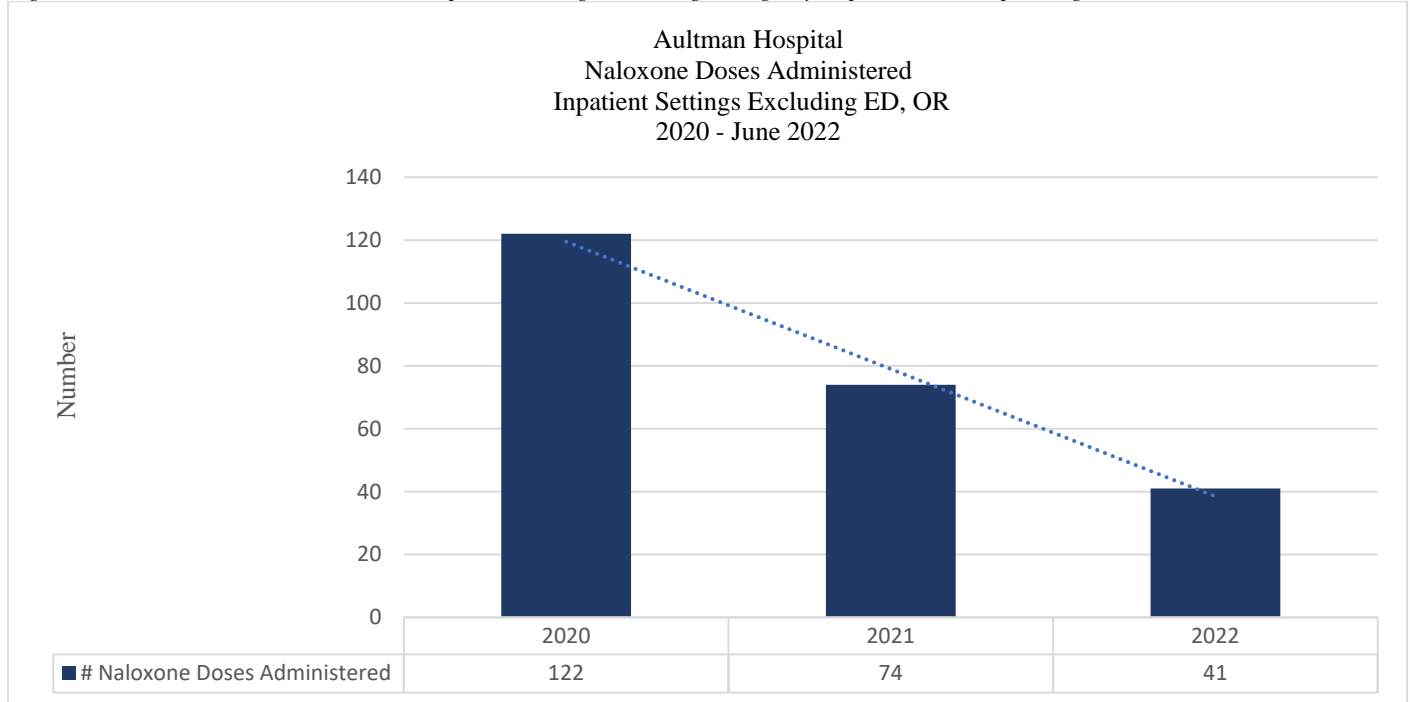
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Aultman Hospital
Naloxone Doses Administered
Inpatient Settings Excluding ED, OR
2020 - June 2022

	2020	2021	2022
# Naloxone Doses Administered	122	74	41

Source: Cerner

Evaluation of Impact at the Stark County Level

Twenty-two percent (22%) of community leaders reported moderate/major progress on reducing overdose deaths (Figure 66).

Figure 66 Community Leader Perceived Progress on Key Measures Addiction
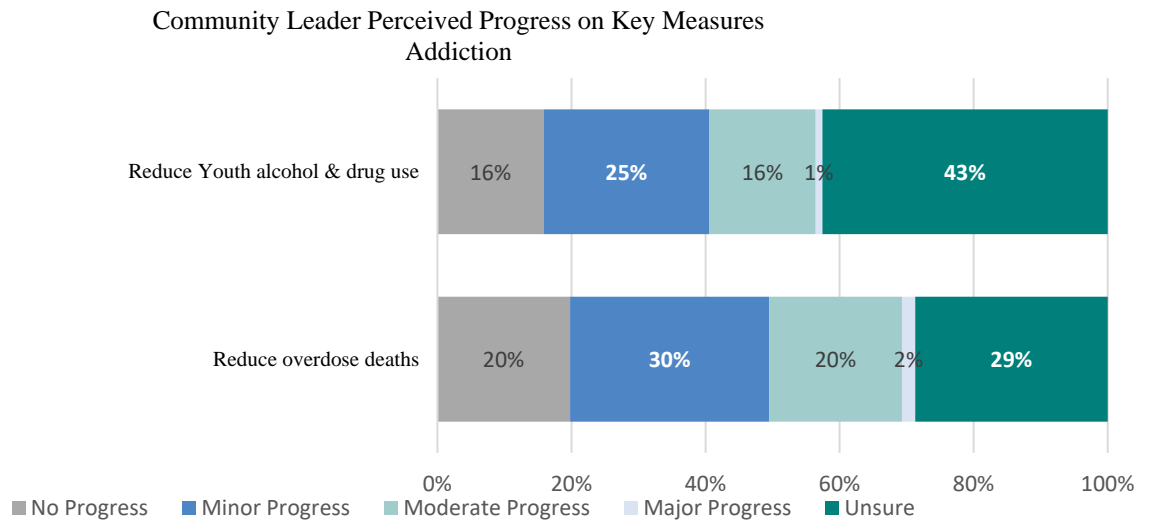
Community Leader Perceived Progress on Key Measures
Addiction

Reduce Youth alcohol & drug use: 16%, 25%, 16%, 1%, 43%

Reduce overdose deaths: 20%, 30%, 20%, 2%, 29%

■ No Progress ■ Minor Progress ■ Moderate Progress ■ Major Progress ■ Unsure

Source: Stark County Community Health Assessment

Community Partners for Mental Health (Addiction)

- Akron Children's Hospital
- AultCare
- Aultman Alliance Community Hospital
- Aultman Orrville Hospital
- Canton City Health
- Coleman Professional Services
- CommQuest Services, Inc.
- Drug Free Stark County

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- Cleveland Clinic Mercy Hospital
- Ohio Board of Nursing
- Ohio Department of Health
- Ohio Hospital Association Opioid Response Initiative
- Overdose Fatality Review Committee
- Stark County Police Departments: Alliance, Canton, Canal Fulton, Hartville, Jackson Township, Louisville, Magnolia, Minerva, North Canton, Perry Township, Uniontown, and Waynesburg
- Stark County Educational Service Center
- Stark County Health Department
- Stark County Mental Health & Addiction Recovery
- Stark County Opiate Task Force
- Stark County Police Chiefs' Association
- Stark County Sheriff's Office
- Stark County TASC
- State Medical Board of Ohio
- State of Ohio Board of Pharmacy
- Stop Heroin from Killing Committee

Aultman Hospital Programs and Services: Mental Health (Youth Suicide)

Aultman Hospital implemented the following programs and services to address the priority health need of mental health youth suicide.

Stark County Suicide Prevention Coalition
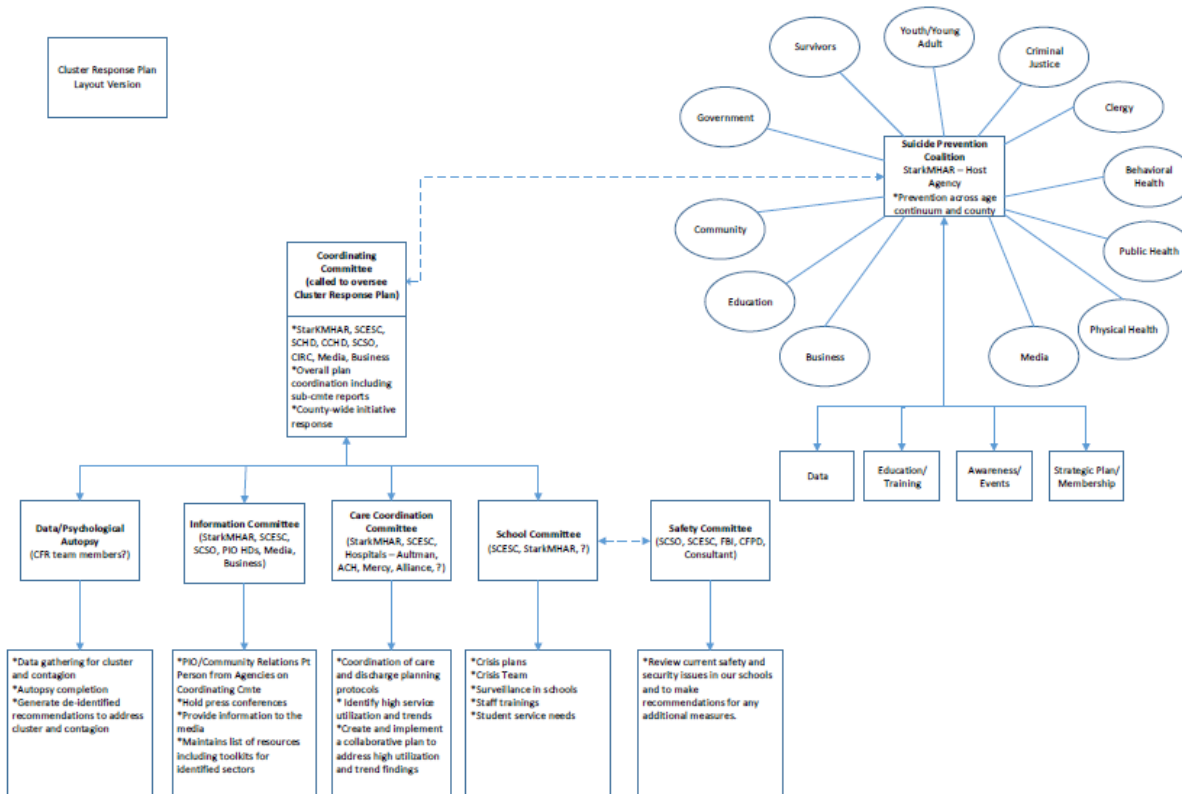
Funded by Stark County Mental Health & Addiction Recovery, the Stark County Suicide Prevention Coalition is a partnership of representatives from more than 20 local community organizations working together to save lives (Figure 67). Active members currently include representatives from community advocacy, behavioral health organizations, survivors of suicide loss, social service organizations, human service agencies, government organizations, medical facilities and educational institutions. The coalition's mission is to provide guidance and expertise to promote hope, wellness and behavioral health as a means of preventing suicide in our community. The main goal is to provide education, guidance and resources to achieve a Stark County community with zero suicides.

Between August 2017 and March 2018, the community of Stark County, Ohio, experienced 12 suicides among middle and high school students. During this timeframe, the suicide rate among youth aged 10–19 years rose to more than seven times the U.S. national rate and 11 times the 2011-2016 Stark County rate. In response, the Ohio Department of Health and Stark County Health Department made a formal request to the Centers for Disease Control and Prevention (CDC) for epidemiologic assistance (Epi-Aid); a rapid, short-term onsite technical assistance and investigation of the urgent public health problem by CDC subject matter experts to meet the following Epi-Aid objectives:

1. Rapidly determine the population in need of prevention services at all affected and at-risk middle and high schools in Stark County through a comprehensive school-based risk screen.
2. Identify precipitating factors for youth suicide that may contribute to ongoing suicidal behaviors among the Stark County youth population to prevent further suicide attempts and suicides.
3. Ascertain the activities, social supports and other factors among the Stark County youth population that are most protective against suicide risk to guide immediate prevention activities.
4. Inventory and catalogue existing suicide prevention initiatives in Stark County and make recommendations on evidence-based suicide prevention programs.

The survey was originally created and administered in April 2018, in collaboration with the Centers for Disease Control and Prevention (CDC) as a component of the Ohio Department of Health's urgent response to the youth suicide cluster in Stark County, with the purpose of preventing further suicide deaths and self-inflicted injuries among youth. Preliminary findings noted that Stark County youth feel more isolated, and communication to parents is more limited than the U.S. average (see 2018 Northeast Ohio Youth Health Survey). In fall of 2021, Stark County Health Department, Ohio Department of Health, Stark County Educational Service Center (Stark County ESC) and Stark County Mental Health & Addiction Recovery (Stark MHAR) partnered to administer the Northeast Ohio Youth Health Surveys to 15,083 7th to 12th grade students from 18 Stark County school districts. The electronic survey was anonymous and included questions about connectedness, social media, mental health, life experiences, friendships, suicidal thoughts, suicidal behavior, resiliency and perceptions of drug and alcohol use. This is the third year that Stark County ESC-affiliated schools have administered the Northeast Ohio Youth Health Survey (see 2021 Northeast Ohio Youth Health Survey).

Figure 67 Stark County Suicide Prevention Coalition and Coordinating Committee Cluster Response Plan

The Stark County Suicide Prevention Coalition and the Coordinating Committee developed a Cluster Response Plan. Chaired by Aultman Health Foundation leadership, the Care Coordination sub-committee developed a standardized process for navigating community mental health resources and systems along the continuum of care. The process helps assure patients have a consistent discharge plan for referral to local mental health resources. Community-wide youth suicide prevention strategies include:

- A standardized hospital process for discharging a youth at risk for suicide.
- Use of the Teen Bullying & Suicide Mental Health Toolkit.
- QPR (Question, Persuade, Refer) Suicide Prevention Training for leadership.
- Accessing Coleman Professional Service's Mobile Youth Response Team as the Stark County After Hospital Care Contact and the first call for local assessment of youth experiencing a behavioral health concern.
- Use of the Zero Suicide framework.
  - Monthly Community of Learning Calls coordinated through StarkMHAR.
  - Use of the Columbia Suicide Severity Rating Scale (C-SSRS) a standard suicide risk screening tool.
  - Staff completed training on the use of the C-SSRS instrument.
  - All patients screened for suicide risk on admission to emergency department, inpatient units and outpatient settings.
  - Use of a companion program.
- Use of the Stark County CARE Team Initiative's school-based Coordinate and Align Resources to Engage, Empower and Educate team model (iC.A.R.E.[3]) for mental health services and resources.
  - An iC.A.R.E.[3] team may be comprised of school principals, counselors, teachers, nurses, resource officers, intervention specialists, psychologists, family support specialists/liaisons, mental health and/or alcohol and drug professionals.
  - In a confidential setting, an iC.A.R.E.[3] team wraps additional supports around a child for a successful transition back into a daily school routine after a hospital visit or stay.
  - Available in 22 school districts, iC.A.R.E.[3] teams develop strategies and align resources to promote physical, social, emotional and intellectual supports when a little extra help is needed in school.
  - A parent, school counselor, teacher, administrator, community agency or any concerned individual may refer a student to a school-based iC.A.R.E.[3] team. Parents learn about the iC.A.R.E.[3] teams in a brochure, *Parental Guide to Your School's iC.A.R.E.[3] Team,* shared after a hospital stay or emergency room visit.

In 2020-2021, Aultman Health Foundation collaborated with StarkMHAR for the implementation of the Counseling on Access to Lethal Means (CALM) program to reduce access to the methods people use to kill themselves. Emergency department staff completed an online course that covered how to: 1) identify people who could benefit from lethal means counseling, 2) ask about their access to lethal methods and 3) work with them – and their families – to reduce access. While this course is primarily designed
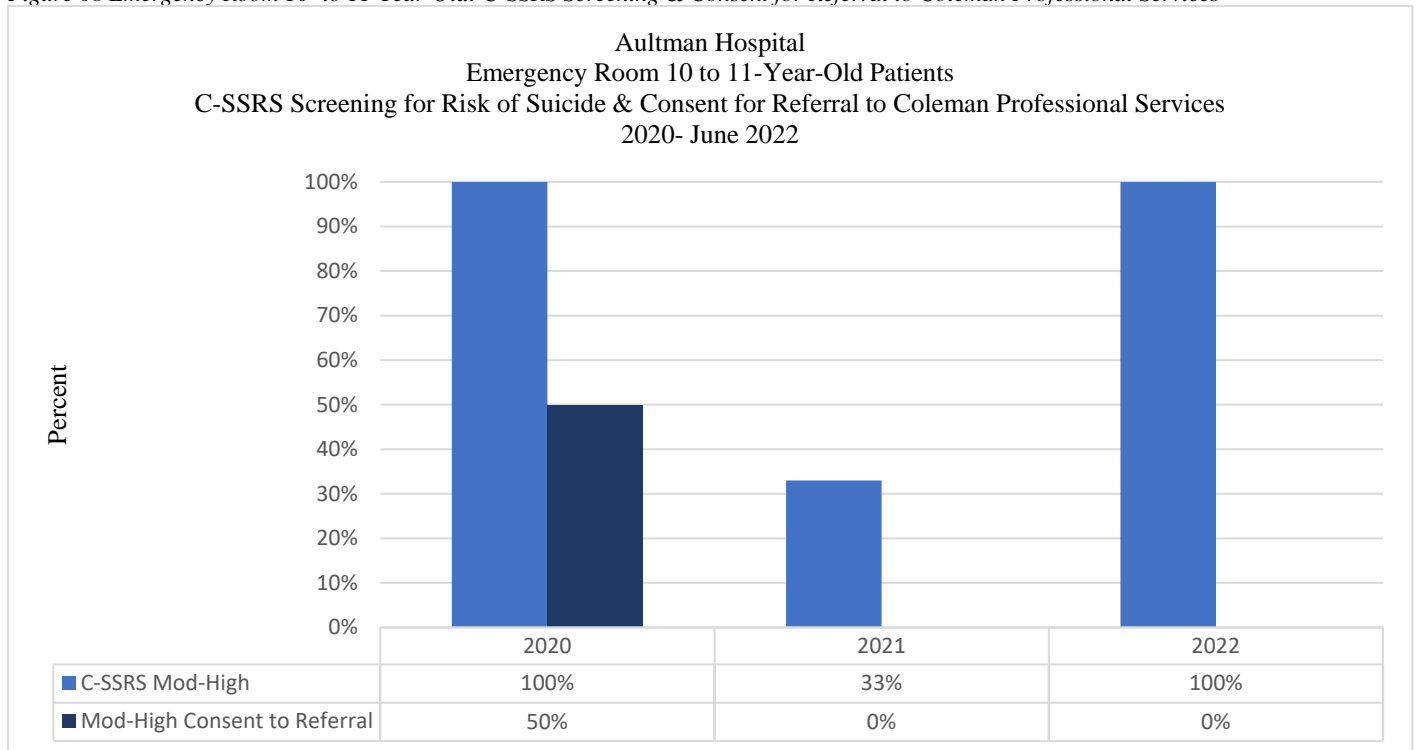
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for mental health professionals, others who work with people at risk for suicide, like social service professionals and healthcare providers, benefit from taking it. In 2021, emergency department staff completed CALM train-the-trainer training with plans to provide professional development training to staff. When assessing a patient for a behavioral issue, CALM-trained staff can intervene if a need for gunlock safety is identified, distribute a gun-locking device and share safe handling and secure storage guidelines. Patients and families can also be referred to Stark County police and sheriff departments to obtain a gun lock. StarkMHAR provides Aultman Hospital, Aultman Alliance Community Hospital and Cleveland Clinic Mercy Hospital with funding for training and resources (e.g., gun locks, Safe Home card) for implementation of CALM through an Ohio Department of Health Child Injury Prevention Grant and community grant funds. In 2021, 14 staff members completed CALM training and implemented the program in the emergency department.

In 2021, the Care Coordination Committee membership determined that the target programs and services were being sustained in practice and the committee achieved the established goals. The committee was subsequently dissolved in November 2021.

Evaluation of Impact

In 2020-2021, Aultman Hospital emergency room met the goal of screening all 10- to 17-year-old patients for risk of suicide using the C-SSRS and identifying community resources for families of children that screened moderate to high risk. In 2020, 100% (2/2) of 10- to 11-year-old children screened moderate to high, and 50% (1/2) of these families consented to a referral to Coleman Professional Services. In 2021, 33% (2/6) of 10- to 11-year-old children screened moderate to high, and none of the families consented to a referral to Coleman Professional Services. In the first half of 2022, 100% (4/4) of 10- to 11-year-old children screened moderate to high, and none of the families consented to a referral to Coleman Professional Services. All families could also consent to transfer for inpatient admission or follow-up with their established primary care provider and/or a private counselor, as appropriate (Figure 68).

Figure 68 Emergency Room 10- to 11-Year-Old: C-SSRS Screening & Consent for Referral to Coleman Professional Services

Aultman Hospital
Emergency Room 10 to 11-Year-Old Patients
C-SSRS Screening for Risk of Suicide & Consent for Referral to Coleman Professional Services
2020- June 2022

	2020	2021	2022
■ C-SSRS Mod-High	100%	33%	100%
■ Mod-High Consent to Referral	50%	0%	0%

Source: Cerner

In 2020, 77% (76/99) of 12- to 17-year-old children screened moderate to high, and 67% (58/87) of families consented to a referral to Coleman Professional Services. In 2021, 59% (82/138) of 12- to 17-year-old children screened moderate to high, and 3% (3/99) of the families consented to a referral to Coleman Professional Services. In the first half of 2022, 60% (43/72) of 12- to 17-year-old children screened moderate to high, and 1% (1/71) of the families consented to a referral to Coleman Professional Services. Families could also consent to transfer for inpatient admission or follow-up with their established primary care provider and/or a private counselor, as appropriate (Figure 69).
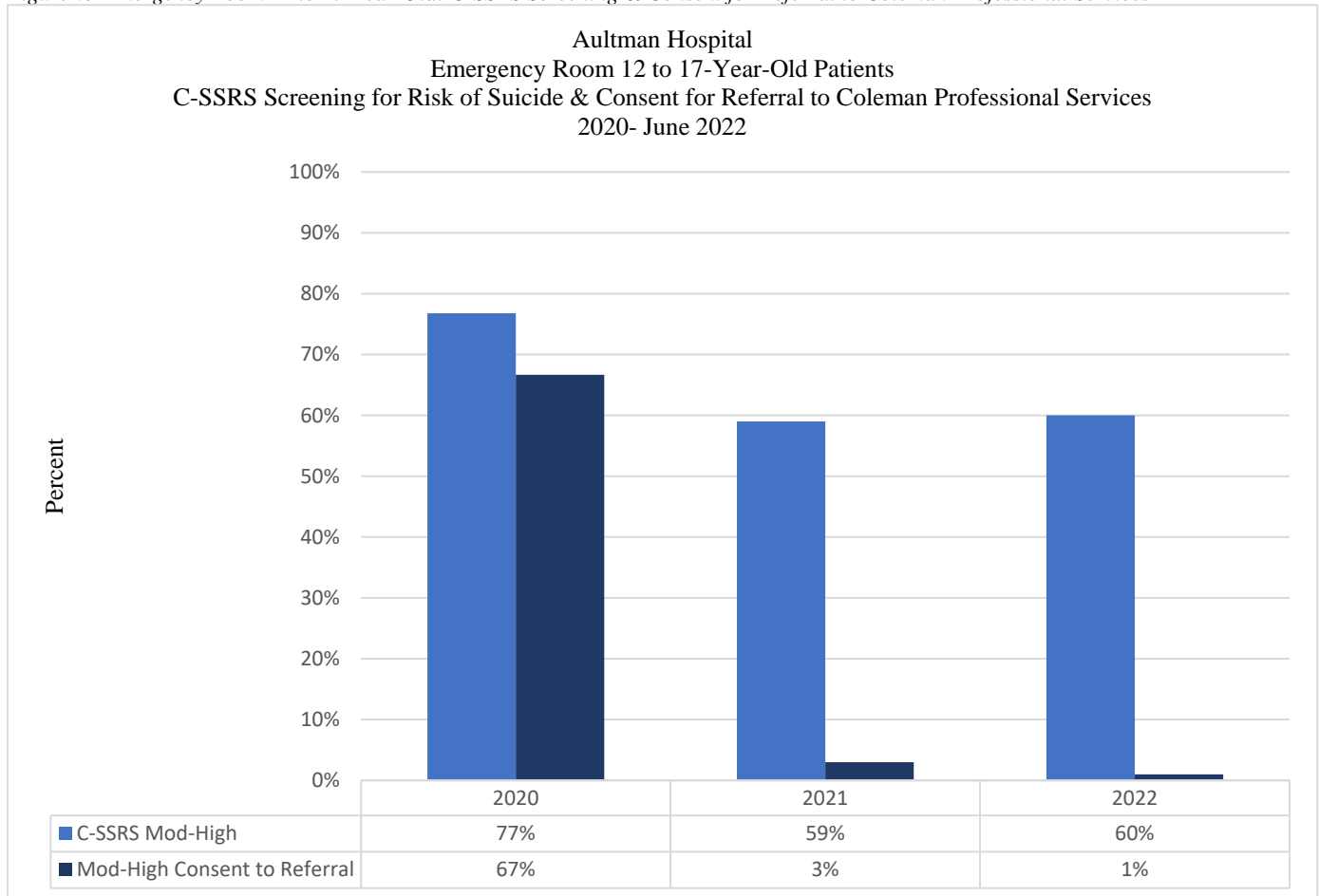
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Figure 69 Emergency Room 12 to 17-Year-Old: C-SSRS Screening & Consent for Referral to Coleman Professional Services

Aultman Hospital
Emergency Room 12 to 17-Year-Old Patients
C-SSRS Screening for Risk of Suicide & Consent for Referral to Coleman Professional Services
2020- June 2022

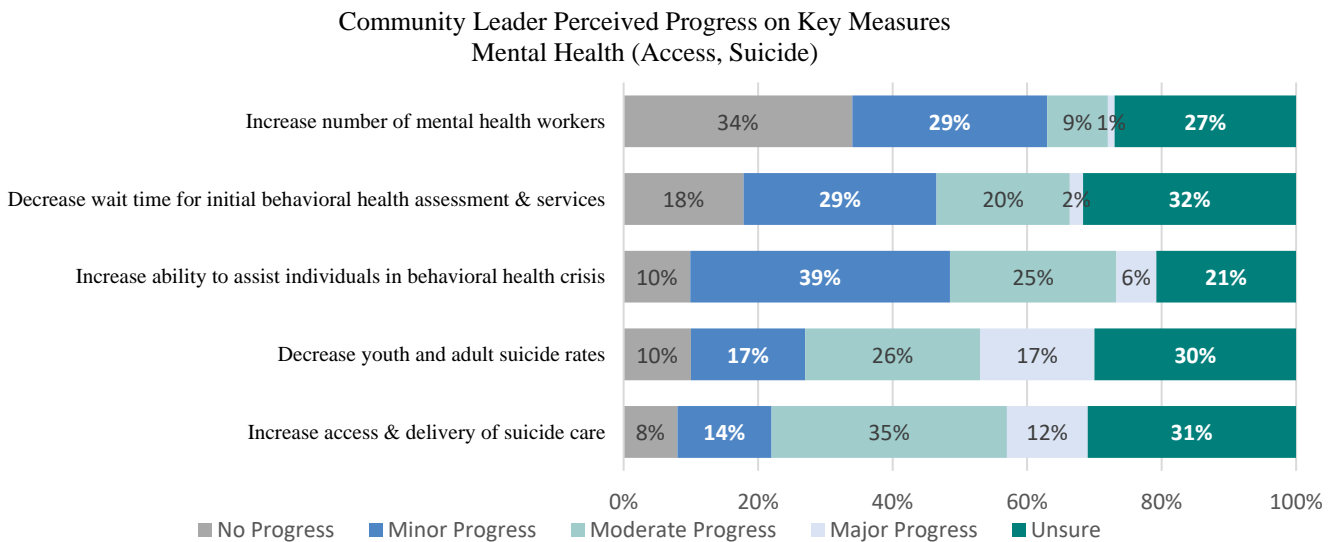|	2020	2021	2022
■ C-SSRS Mod-High	77%	59%	60%
■ Mod-High Consent to Referral	67%	3%	1%

Source: Cerner

Evaluation of Impact at the Stark County Level

Stark County community leaders reported 10% moderate/major progress on increasing the number of mental health workers, 22% moderate/major progress on decreasing the wait time for an initial behavioral health assessment and services, 31% moderate/major progress on increasing the ability to assist individuals in a behavioral health crisis, 43% moderate/major progress on decreasing youth and adult suicide rates and 47% moderate/major progress on increasing access and delivery of suicide care (Figure 70).

Figure 70 Community Leader Perceived Progress on Key Measures Mental Health (Access, Suicide)

Community Leader Perceived Progress on Key Measures
Mental Health (Access, Suicide)

Measure	No Progress	Minor Progress	Moderate Progress	Major Progress	Unsure
Increase number of mental health workers	34%	29%	9%	1%	27%
Decrease wait time for initial behavioral health assessment & services	18%	29%	20%	2%	32%
Increase ability to assist individuals in behavioral health crisis	10%	39%	25%	6%	21%
Decrease youth and adult suicide rates	10%	17%	26%	17%	30%
Increase access & delivery of suicide care	8%	14%	35%	12%	31%

Source: Stark County Community Health Assessment

The most common adverse life experiences that Stark County students have experienced during their lifetime were that their parents are seperated or divorced or that they live with someone who is living with mental illness (e.g., depression, suicidal). For all six life experiences included below, female students reported experiencing each was higher than male students. (Figure 71).

Figure 71 Youth: Adverse Life Experiences
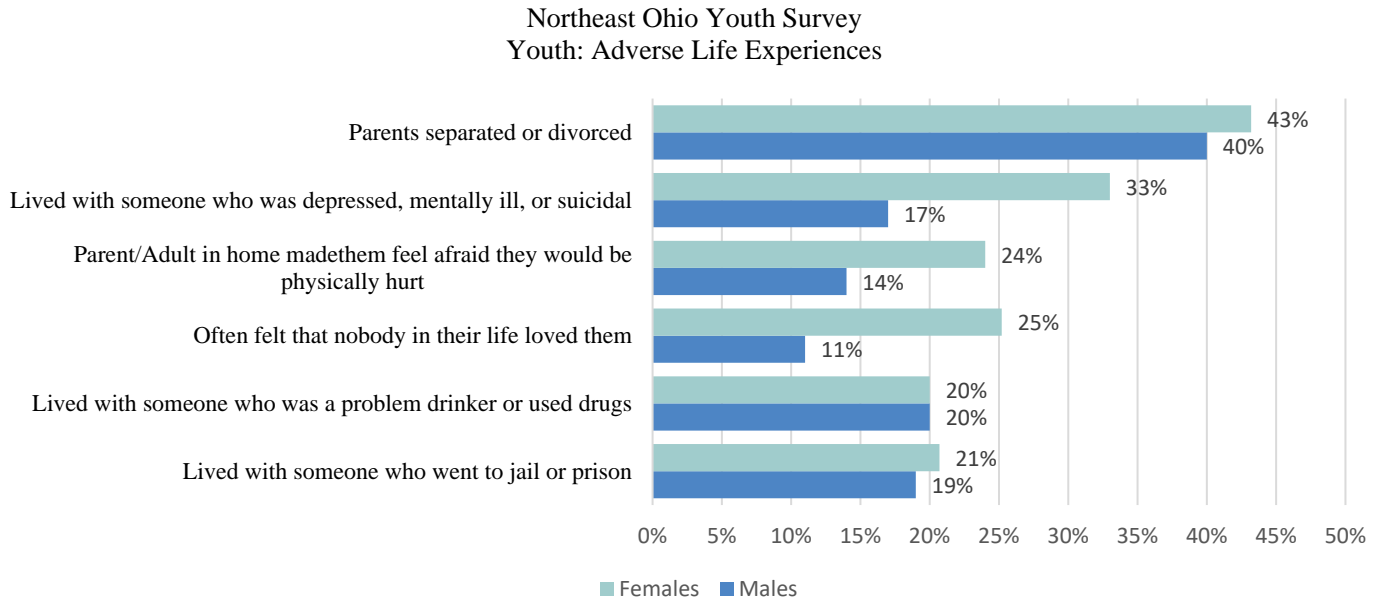
Northeast Ohio Youth Survey
Youth: Adverse Life Experiences

Source: 2021 Northeast Ohio Youth Health Survey

More than a third of students (34.5%), reported that they have been told by a healthcare professional they had a mental health issue before the current s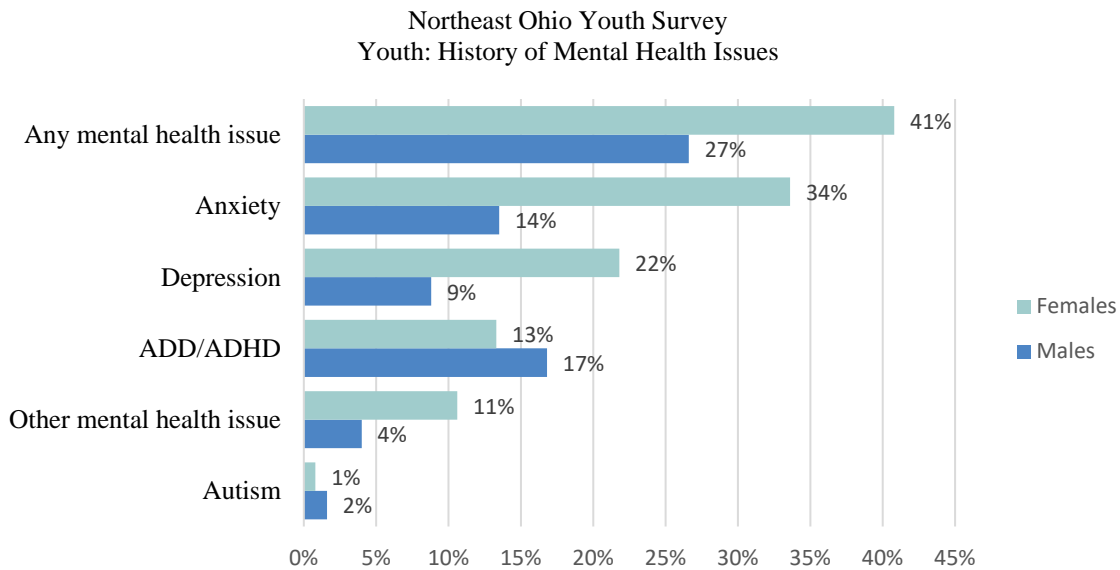chool year. The most common mental health issues for female students were anxiety and depression. For male students, the most common issues were ADD/ADHD and anxiety (Figure 72).

Figure 72 Youth: History of Mental Health Issues

Northeast Ohio Youth Survey
Youth: History of Mental Health Issues

Source: 2021 Northeast Ohio Youth Health Survey

In 2020, suicide was the second leading cause of death among children and adolescents aged 10–14 and adults aged 25–34 years in the U.S. The overall suicide rate declined significantly from 2019 to 2020 in seven states (California, Connecticut, Florida, New Jersey, Ohio, Oregon and Pennsylvania) (Division of Injury Prevention, National Center for Injury Prevention and Control, CDC). The combined age groups suicide death rate in Stark County has decreased over the last five years from 18.8 to 15.3. The suicide death rate for combined age groups in Stark County is still higher than the state of Ohio. In Stark County, the youth suicide rate for ages 14 and under trended down in 2020 and 2021. In Stark County, the youth suicide rate for ages 15-19 was 13.2 in 2020 and 17.7

![AULTMAN logo]

in 2021 compared to 17.4 in 2019. In Stark County, the youth suicide rate for the 15- to 19-year-old age group remains a focused concern (Figure 73).

Figure 73 Ten Year Stark County Age-specific Youth Suicide Death Rate per 100,000 by Age Group										
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
14 & Under	0	4.1	4.2	4.3	4.3	4.4	17.4	4.4	4.4	0
15-19	11.9	8.0	8.1	12.3	8.3	12.6	21.3	17.4	13.2	17.7
Source: Ohio Department of Health, Data Warehouse										

Community Partners for Mental Health (Youth Suicide)

- Akron Children's Hospital
- AultCare
- Aultman Alliance Community Hospital
- Canton City Health
- Centers for Disease Control and Prevention Epi-Aid 2018-025: Increase in youth suicides - Stark County, Ohio, 2018 recommendations. Available at https://www.starkcountyohio.gov/StarkCounty/media/Public-Health/Press%20releases/Stark-EpiAid-Final-Report-April-2019.pdf
- CommQuest Services, Inc.
- Coleman Professional Services
- Cleveland Clinic Mercy Hospital
- Ohio Department of Health
- Stark County Educational Service Center
- Stark County Health Department
- Stark County Opiate Task Force
- Stark County School Districts
- Stark County Suicide Prevention Coalition
- Stark County TASC
- StarkMHAR
- Stark County CARE Team
- Stark County Suicide Prevention Coalition
- StarkMHAR

Priority Health Need 3: Infant Mortality

Description

Infant mortality, defined as an infant death before the first birthday, serves as an indicator of a society's overall health. Ohio ranks 41st in the nation in overall infant mortality rate (IMR) or the number of infant deaths per 1,000 live births. In 2019, infant deaths decreased for the third straight year. In 2019, the Ohio Department of Health reported that 929 Ohio infants died before their first birthday. In 2019, the Ohio infant mortality across all races was 6.9 per 1,000 live births, the same as in 2018. The number of white infants who died was 518, the lowest number in the past 10 years. In 2019, there were 356 Black infant deaths, an increase of 17 from 2018. However, this is still lower than 2015, 2016 and 2017. The Black IMR was 14.3 in 2019, up from 13.9 in 2018. Black infants were more than 2.8 times more likely to die than white infants.

In 2019, Stark County had an overall IMR of 5.4 infant deaths per 1,000 live births (Ohio Department of Health, 2020). In 2019, the Ohio Department of Health did not report a Black IMR for Stark County since the number of Black infant deaths was less than 10 in multiple years. In 2019, the white IMR was 3.8.

In 2021, the Eliminating Disparities in Infant Mortality Task Force worked closely with the Ohio Department of Health to focus on advancing health equity and establish Ohio as a model for justice, equity, opportunity and resilience as part of Governor DeWine's action plan. Ohio Department of Health and Centers for Medicare and Medicaid Services will provide additional funding to Stark County for THRIVE initiatives.

Aultman Hospital Programs and Services: Infant Mortality

Aultman Hospital implemented the following programs and services to address the priority health need infant mortality.

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## Stark County Toward Health Resiliency for Infant Vitality & Equity (THRIVE) Collaborative

Based on a national Institute for Equity in Birth Outcomes model, nine Ohio communities make up the Ohio Institute for Equity in Birth Outcomes (Ohio Equity Institute), a community-driven effort to reduce infant deaths. In 2013, the nine Ohio communities, Ohio Equity Institute, the Ohio Department of Health and CityMatCH partnered to improve the infant mortality rate (IMR) and reduce racial disparities. The Stark County Fetal Infant Mortality Review Committee reviews infant mortality data, determines preventable deaths, identifies opportunities for improvement in care or services and makes recommendations to the THRIVE Collaborative on interventions needed to prevent future infant deaths. The Stark County THRIVE Evaluation Team & Pathways HUB Quality Improvement team analyzes and reports the Stark County Pathways HUB data to THRIVE Collaborative members. Although THRIVE serves all Stark County, the initiative prioritizes women residing in southeast and northeast Canton, central Massillon and eastern Alliance based on county IMR and disparity rate data. THRIVE focuses on two interventions for the greatest possible impact on the IMR and disparities.

1. *CenteringPregnancy® prenatal care and community-based care coordination* with the goals of increasing awareness of the value of early prenatal care, linking women to prenatal services, addressing barriers to prenatal care and meeting socio-economic needs. Aultman providers refer patients to the My Community Health Center CenteringPregnancy® program.
   a. Certified Community Health Workers (CHWs) and Stark County THRIVE Pathways HUB. Ten care coordination agencies employ 26 THRIVE CHWs who are representative of the communities and individuals that they serve. The CHWs complete Ohio Board of Nursing approved training. The Stark County THRIVE Pathways HUB implements 20 pathways that address social determinants of health (e.g., affordable housing, substance use, prenatal care, social service needs, medication assistance and health insurance). CHWs make in-home visits to assess a client's needs, coordinate care, provide evidence-based health education and support the client in accessing and completing treatment as appropriate. CHWs typically work one-on-one with families, visiting them at home and accompanying the new mothers to medical appointments. During the pandemic, CHWs kept in touch with expectant families via video conferencing and phone calls.
   b. Racism, cultural competency and humility. Partnerships with Stark Mental Health & Addiction Recovery and Mary Church Terrell Federated Club provide support for community partners, service providers and clients to address barriers and challenges related to racism and offer culturally appropriate services.
   c. Stark County Fatherhood Coalition and Early Childhood Resource Center provides mentoring programs and access to resources to fathers in supporting meaningful engagement with children and mothers.
   d. Community Legal Aid provides the Health Education Advocacy and Law Program, which is a partnership between Community Legal Aid to help patients overcome legal problems that interfere with their health.
   e. THRIVE Tenant-Based Rental Assistance Program. CHW clients experiencing housing barriers have access to a Tenant Based Rental Assistance Program funded by the city of Canton Department of Community Development in partnership with the YWCA of Canton.
2. *Safe Sleep* education, policies and resources create awareness and enculturate safe sleep policies and practices. Aultman adopted safe sleep policies per Ohio law and monitors reliable use and modeling of safe sleep practices. On average, more than three Ohio infants die each week due to sleep-related causes, which is why Aultman follows the current safe sleep standards and actively educates its young patient parents and caregivers on their importance. The standards include the "ABCs of Sleep," reminding parents and caregivers that infants should sleep alone, on their backs and in a crib, among other important facts. Aultman partners with hospitals and organizations around the county to educate on safe sleep practices. During hospital stays, nurses share safe sleep information with families in the Birth Center. Additional strategies include:
   - Birth Center family engagement nurses provide patient referrals to community health worker services and Canton City Health public health nurses for newborn home visits.
   - Using a Safe Sleep Toolkit (i.e., floor talkers, changing table stickers, crib cards) with one consistent message for countywide distribution at community venues (e.g., physician practices, grocery stores, hospitals, health fairs, faith-based groups).
   - Participation in the Stark County Health Department *Cribs for Kids* program with distribution of Safe Sleep kits to eligible families in the Birth Center.
   - Community Outreach education by Working on Wellness (WOW) Team nurses. In 2020, the WOW Team program community outreach education was suspended during the pandemic.

Evaluation of Impact

In 2020 through June 2022, Aultman Hospital exceeded the goal of 80% completed documentation of a safe sleep environment for infants in inpatient settings (Figure 74).

Figure 74 Documented Safe Sleep Environment for Infants in Inpatient Settings

Aultman Hospital
Documented Safe Sleep Environment
2020 - June 2022

	2020	2021	Jan - June 2022
% Documented Safe Sleep	97%	97%	96%
Goal	80%	80%	80%
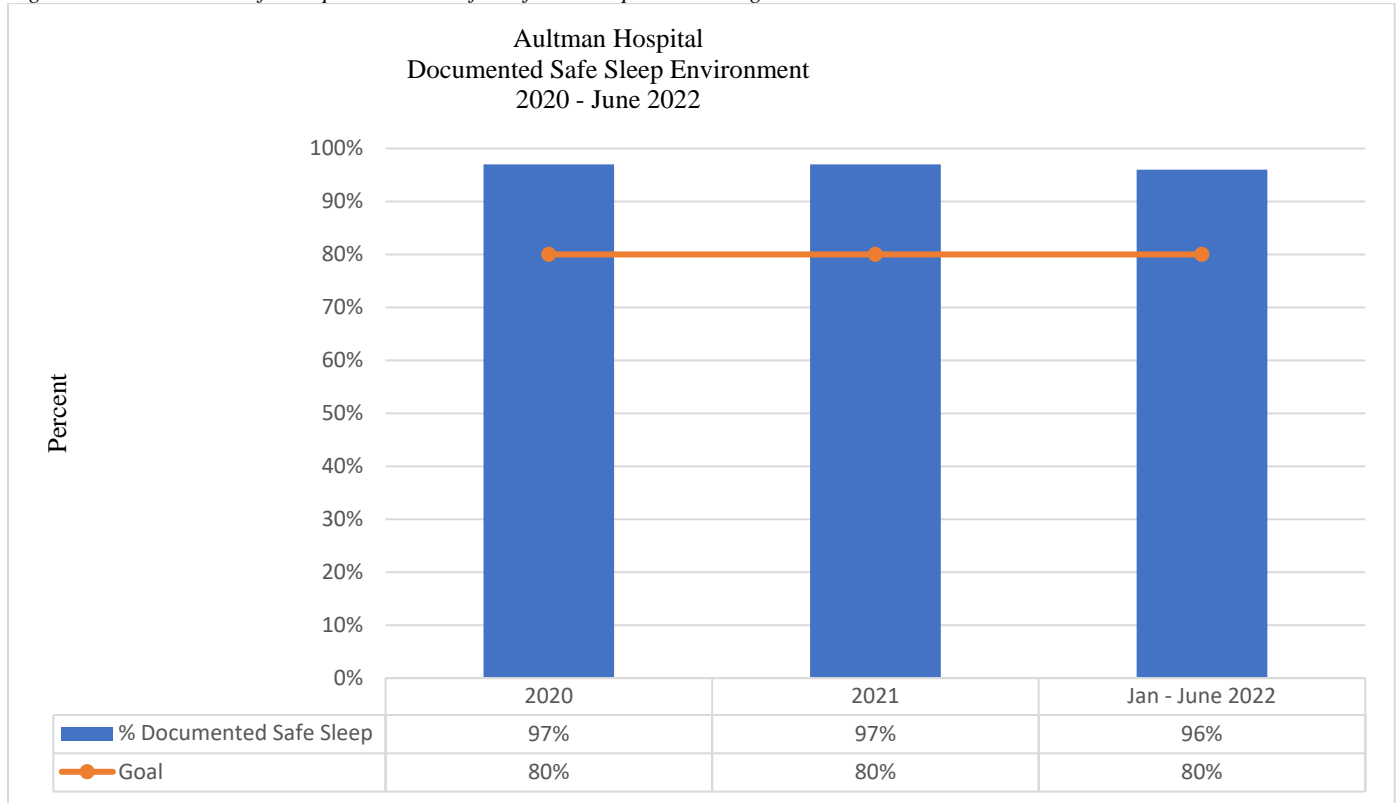
Source: Cerner

In 2020 through the first half of 2022, Aultman Hospital social workers met the goal of screening all families of infants for eligibility for the Cribs for Kids Program and offered all eligible families a Graco Pack N Play (41 total) for use as a safe sleep environment (Figure 75).

Figure 75 Aultman Hospital Cribs for Kids Program

Aultman Hospital
Cribs for Kids Program Pack n Plays Distributed
2020 - June 2022

	2020	2021	2022
# Pack N Plays Distributed	18	15	8
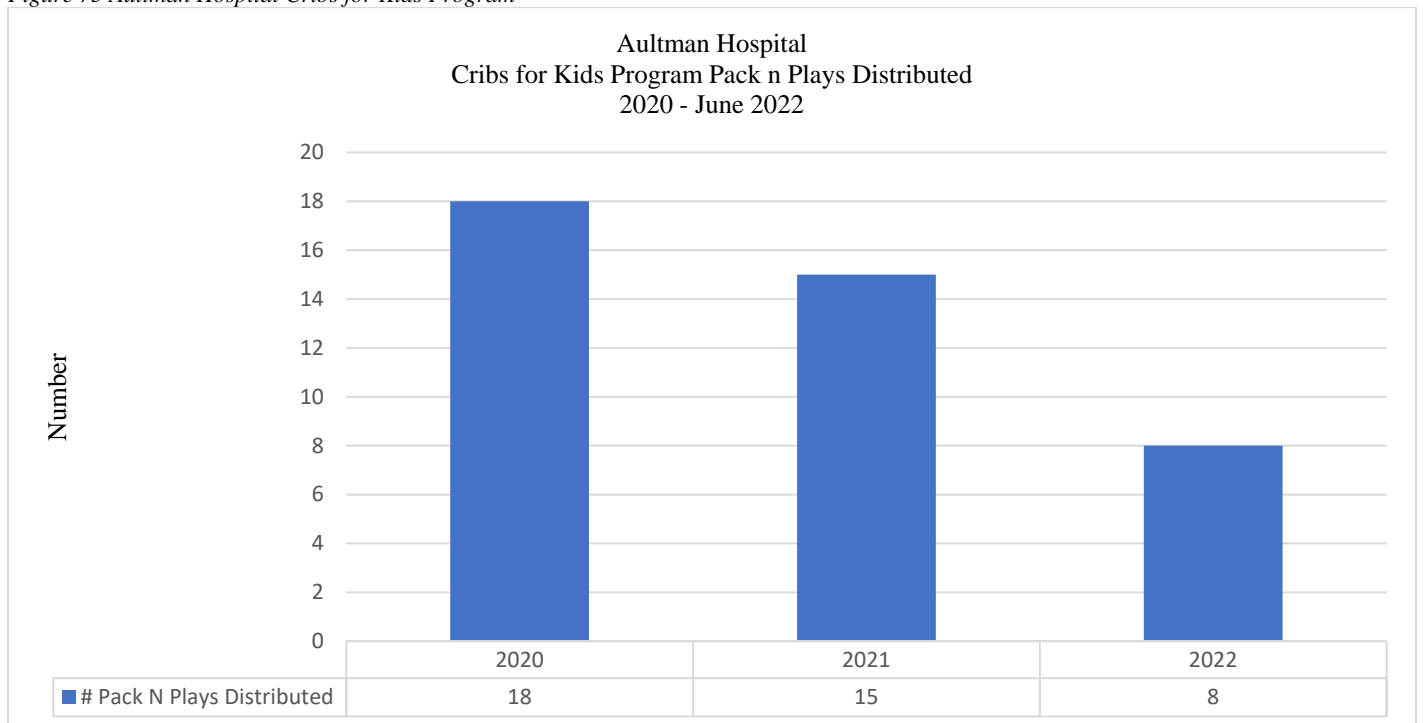
Source: Aultman Hospital Social Services

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Evaluation of Impact at the Stark County Level

For six years, Canton City Public Health has led an effort to reduce infant mortality and disparity rates through a countywide THRIVE collaborative. In 2019, the American Hospital Association recognized Aultman Hospital and the THRIVE collaborative with the Dick Davidson NOVA Award for innovative collaborations that engage hospitals to bring better health to the populations they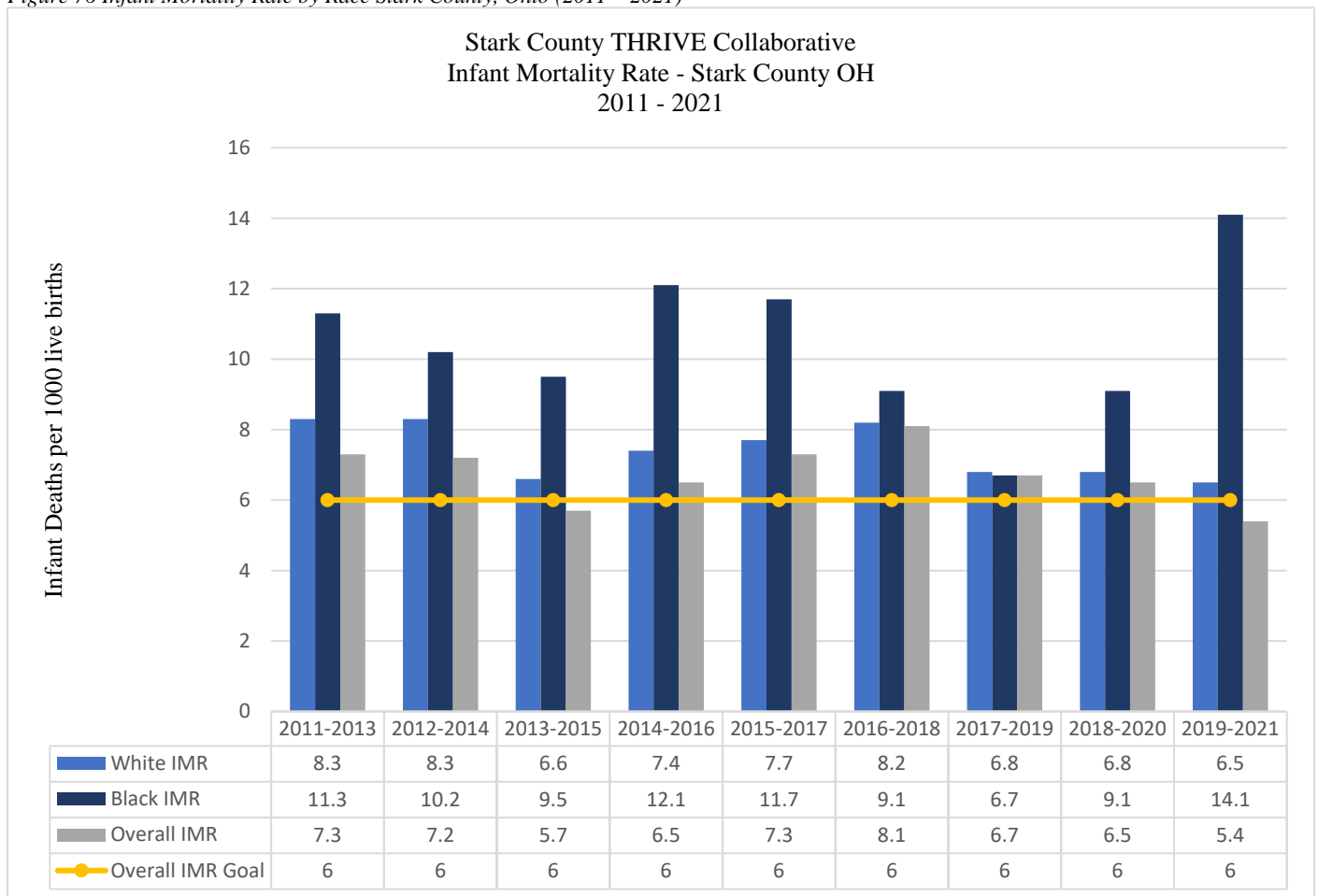 serve. THRIVE members have gained a much deeper understanding of the nature of Stark County's infant mortality problem using data. Infant mortality rates (IMR) are calculated by the number of infant deaths divided by the number of live births, multiplied by 1,000. This calculation of rates helps to compare populations.

To help minimize fluctuations in infant mortality rates over time, Stark County Ohio Equity Institute reviews three-year data groupings. Each data point in the graph shows a combination of three years of births and deaths to each group. When a new year is added, the oldest year is dropped off to keep the grouping at three years (Figure 76). Using this method allows the Ohio Equity Institute to look at larger and therefore more stable counts (Canton City Public Health Stark County THRIVE Fiscal Year 2021 Annual Report).
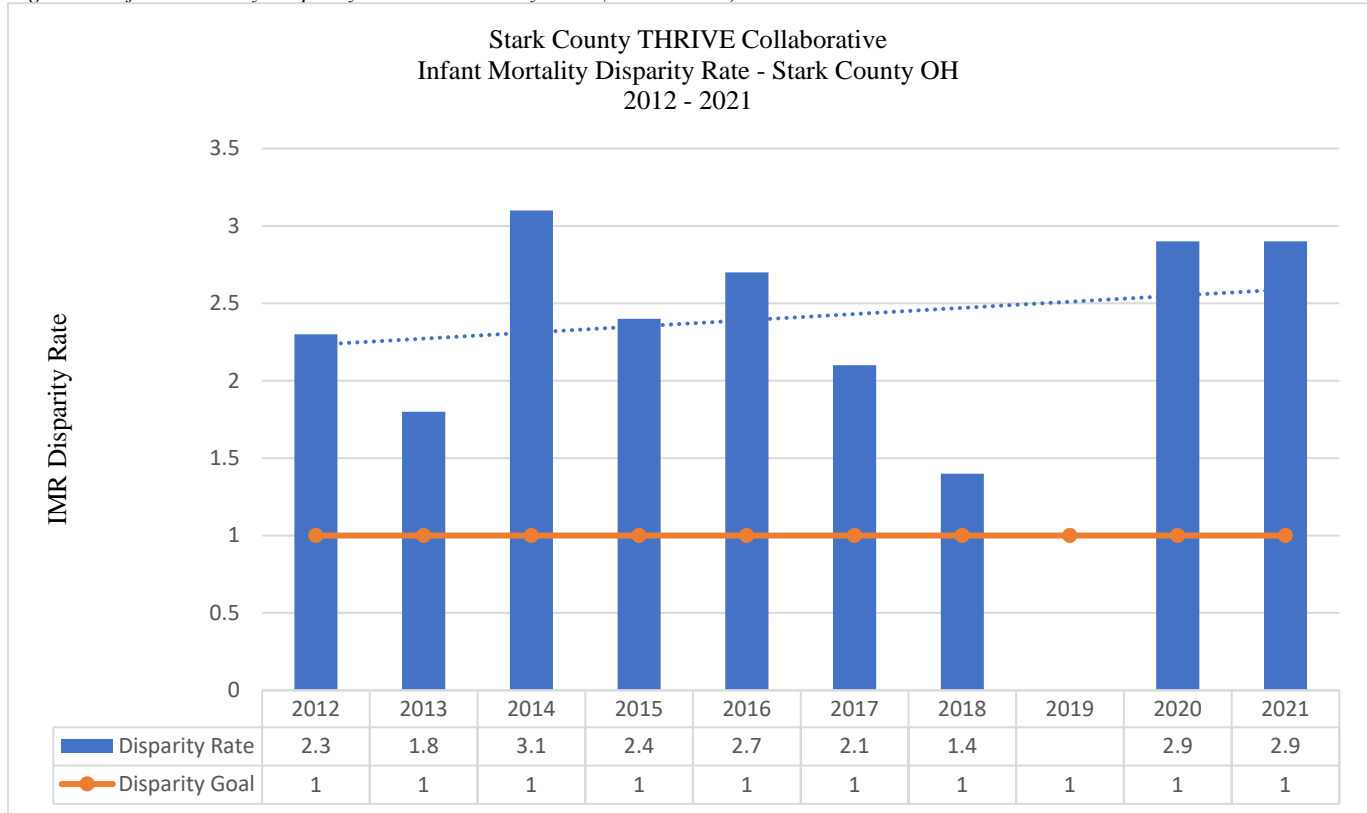
The white IMR in Stark County since 2011 has fluctuated between 6.5 per 1,000 live births and 8.3 per 1,000 live births. The Black IMR in Stark County since 2011 has fluctuated between 6.7 per 1,000 live births and 14.1 per 1,000 live births. The overall IMR in Stark County since 2011 has fluctuated between 5.4 per 1,000 live births and 8.1 per 1,000 live births (Figure 76). Stark County has ongoing work to continue to improve the IMR and reduce disparity to achieve the Healthy People 2030 IMR goal of 5.0 per 1,000 live births (Canton City Public Health THRIVE Fiscal Year 2021 Annual Report) (Figure 77). Race/ethnicity of infant deaths is based on race/ethnicity documented at birth.

Figure 76 Infant Mortality Rate by Race Stark County, Ohio (2011 – 2021)

Stark County THRIVE Collaborative
Infant Mortality Rate - Stark County OH
2011 - 2021

	2011-2013	2012-2014	2013-2015	2014-2016	2015-2017	2016-2018	2017-2019	2018-2020	2019-2021
White IMR	8.3	8.3	6.6	7.4	7.7	8.2	6.8	6.8	6.5
Black IMR	11.3	10.2	9.5	12.1	11.7	9.1	6.7	9.1	14.1
Overall IMR	7.3	7.2	5.7	6.5	7.3	8.1	6.7	6.5	5.4
Overall IMR Goal	6	6	6	6	6	6	6	6	6

Source: 2022 Stark County THRIVE Collaborative. "These data were provided by the Ohio Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations, or conclusions." 2020 and 2021 data is preliminary and subject to change. Data is reviewed monthly. For questions regarding this data, please contact Epidemiologist jboley@cantonhealth.org.

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Figure 77 Infant Mortality Disparity Rate Stark County Ohio (2012 – 2021)

Stark County THRIVE Collaborative
Infant Mortality Disparity Rate - Stark County OH
2012 - 2021

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Disparity Rate	2.3	1.8	3.1	2.4	2.7	2.1	1.4		2.9	2.9
Disparity Goal	1	1	1	1	1	1	1	1	1	1

Source: 2022 Stark County THRIVE Collaborative. "These data were provided by the Ohio Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations, or conclusions." 2020 and 2021 data is preliminary and subject to change. Data is reviewed monthly. For questions regarding this data, please contact Epidemiologist jboley@cantonhealth.org.
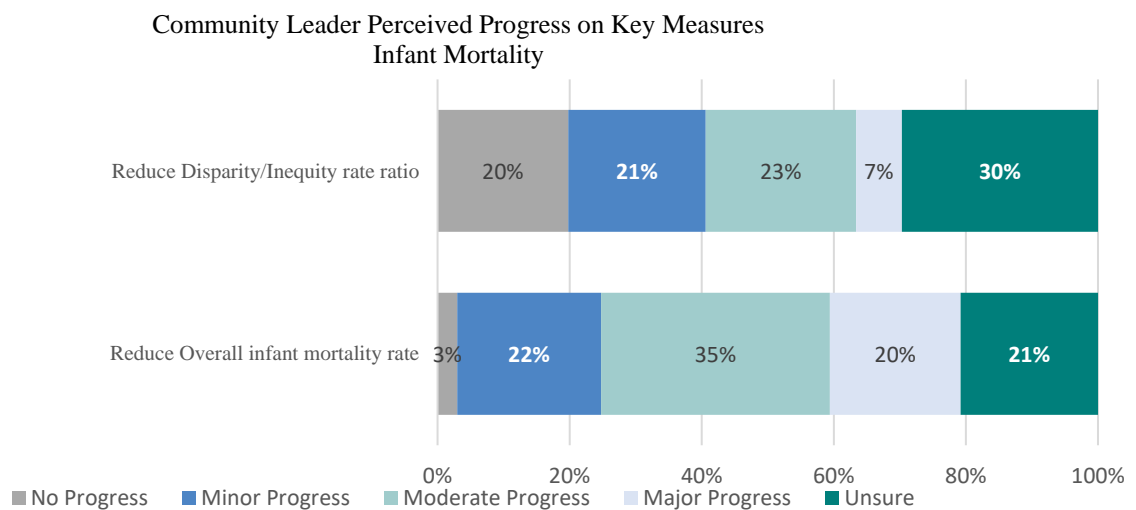
Thirty percent (30%) of community leaders report that moderate/major progress has been made to reduce the infant mortality disparity/inequity ratio, and fifty-five percent (55%) of community leaders report that moderate/major progress has been made to reduce the overall infant mortality rate (Figure 78).

Figure 78 Community Leader Perceived Progress on Key Measures Infant Mortality

Community Leader Perceived Progress on Key Measures
Infant Mortality

	No Progress	Minor Progress	Moderate Progress	Major Progress	Unsure
Reduce Disparity/Inequity rate ratio	20%	21%	23%	7%	30%
Reduce Overall infant mortality rate	3%	22%	35%	20%	21%

Source: Stark County Community Health Assessment

Community Partners for Infant Mortality

- Abide Ministries: New Baltimore Community Church
- Access Health Stark County
- Akron Children's Hospital

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- Alliance City Health Department
- Alliance Family Health Center
- Aultman Alliance Community Hospital
- Beacon Pharmacy
- Buckeye Health Plan
- Canton Calvary Mission
- Canton City Public Health
- Canton City School District
- CareSource
- Catholic Charities
- City of Canton, Department of Community Development
- CommQuest
- Domestic Violence Project
- Early Childhood Resource Center
- Faith-Based & Grassroots Organizations
- Family Empowerment Ministries
- George Dunwoody Foundation
- Hannah's House 119
- JRC, Inc.
- Margaret B. Shipley Child Health Clinic
- Mary Church Terrell Federated Club
- Massillon City Health Department
- Cleveland Clinic Mercy Hospital
- Molina
- My Community Health Center
- Ohio Collaborative to Prevent Infant Mortality
- Ohio Department of Medicaid
- Ohio Guidestone
- Ohio Means Jobs
- Paramount Health Plan
- Perry Local School District
- Pregnancy Choices
- Stark County Department of Job & Family Services
- Stark County District Library
- Stark County Health Department
- Stark County Homeless Hotline
- Stark County TASC, Inc.
- Stark County THRIVE Collaborative
- Stark Mental Health & Addiction Recovery
- Stark Metropolitan Housing Authority
- Stark Community Support Network
- The Ohio State University - Extension Services
- United Healthcare
- United Way of Greater Stark County
- Women, Infants, and Children (WIC) Clinics
- YWCA Canton

Priority Health Need 4: Obesity and Healthy Lifestyle

Description

Promotion of healthy lifestyle choices and prevention and management of chronic diseases and conditions such as obesity, type 2 diabetes, hypertension, heart disease, stroke and cancer.

Aultman Hospital Programs and Services: Obesity and Healthy Lifestyle

Aultman Hospital implemented the following programs and services to address the priority health need obesity and healthy lifestyle choices.

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Bee Healthy Wellness Program

Bee Healthy is a voluntary program that promotes health, wellness and preventive strategies to our colleagues supporting Aultman's mission of leading the community to improved health. Staff members have opportunities to earn incentives while engaging in a healthy and fit lifestyle. In 2020, due to the pandemic, the Bee Healthy Wellness Program suspended activities, and all colleagues received reduced premiums for 2021 AultCare health plans.

Evaluation of Impact

In 2019, 71% and in 2021, 81% of eligible Aultman Hospital colleagues completed the five required components of the Bee Healthy Wellness Program. Source: Cerner Bee Healthy System.

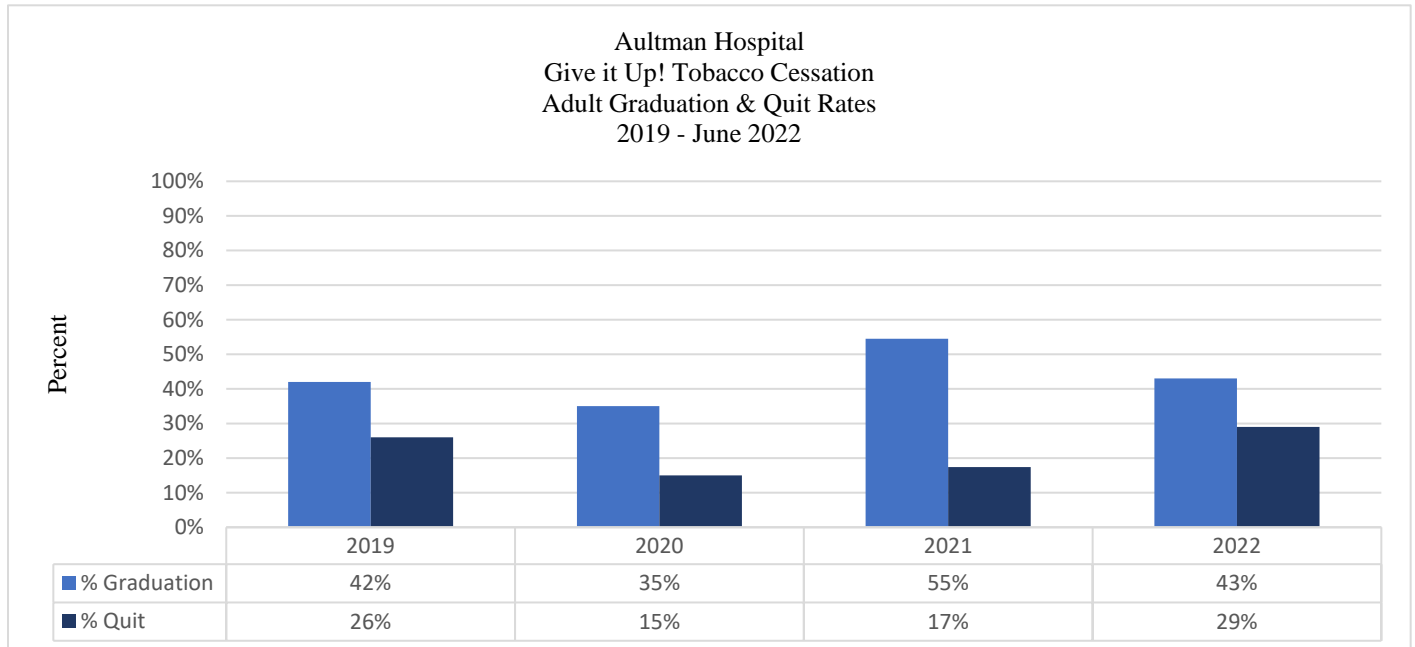## Give It Up! Tobacco Cessation Program

Nurses screen adult patients in inpatient settings for tobacco use and make referrals to the respiratory therapy department for tobacco cessation counseling. Tobacco cessation specialists worked with physician offices to standardize education materials and streamline the physician referral process by integration into the electronic health record. Aultman commits resources (e.g., staff, tobacco cessation aides and education material) free of charge. At no charge, community members can participate in group sessions offered each year. The free one-hour, once-a-week session meets for six weeks at Aultman Hospital. Led by tobacco treatment specialists in face-to-face or virtual sessions, the *Give It Up*! program covers topics ranging from how to create a quit "plan" to tips on staying tobacco-free. During sessions, participants:

- Examine their tobacco use history.
- Identify barriers to quitting tobacco.
- Create a quit plan that includes a specific date to stop using.
- Learn about medication that might help (e.g., the patch or Chantix).
- Learn to combat the obstacles such as weight gain, stress, withdrawal and cravings.
- Prepare to stay tobacco-free for good and form a support network.
- Attend additional counseling sessions or call for support after program completion.

Evaluation of Impact

In 2020, 15% (3/20) of Give it Up! program graduates, in 2021, 17% (4/23) of program graduates and in the first half of 2022, 29% (2/7) of program graduates achieved quit success as measured by self-reported adherence to a quit date (Figure 79).

Figure 79 Give it Up! Program Graduation and Quit Success Rates

Aultman Hospital
Give it Up! Tobacco Cessation
Adult Graduation & Quit Rates
2019 - June 2022

	2019	2020	2021	2022
% Graduation	42%	35%	55%	43%
% Quit	26%	15%	17%	29%

Source: Give it Up! Tobacco and Vaping Cessation Program

Evaluation of Impact at the Stark County Level

Adult smoking prevalence is the estimated percent of the adult population that currently smokes every day or "most days" and has smoked at least 100 cigarettes in their lifetime. Nearly a quarter of adults in Stark County currently smoke, a 4% increase over the past five years. The percentage of adults who smoke is higher in Stark County than it is in the state (Figure 80).

Figure 80 Percent of Adults that Currently Smoke					
	2015	**2016**	**2017**	**2018**	**2019**	**Change**
Stark County	19%	20%	19%	24%	23%	**+4.0%**
State of Ohio	22%	23%	21%	21%	22%	**0.0%**
Source: County Health Rankings & Roadmaps						

Aultman Hospital Adolescent Give It Up! Tobacco and Vaping Cessation Program

Aultman offers a free program designed for adolescents who have started cigarette smoking or "vaping." A certified tobacco treatment specialist leads two face-to-face or virtual telehealth group sessions held approximately two weeks apart. Each session meets for 45 minutes. The program welcomes all adolescents. If requested, a certificate of course completion will be sent to the requested school/court system. The program aims to help adolescents:

- Learn current information about vaping concerns and the hazards of nicotine, especially in relation to the adolescent brain.
- Understand the long-term effects of cigarette/vaping use.
- Help the user verbalize their risks and the actions they can take to quit.
- Be prepared to be tobacco-free for good.

Evaluation of Impact

In 2020 through the first half of 2022, no adolescents were enrolled in tobacco and vaping cessation sessions. Source: Give it Up! Tobacco and Vaping Cessation Program

Aultman Weight Management

Aultman Weight Management offers three comprehensive weight-loss programs based on client weight, lifestyle and needs: New Direction, New Outlook and New Choices. Each program combines the key components of weight-loss success: nutrition, behavior modification, physical activity and emotional support. Each offers clients a team of healthcare professionals (physicians, nurse practitioners, licensed dietitians and licensed behavioral counselors).

- *New Direction* is a three-phase, medically monitored, very low-calorie diet designed for people with at least 40 pounds to lose. The average weight loss is 2-5 pounds per week. The sole meal source is nutritionally complete supplements, offered in 15 different flavors of beverages, puddings, soups or fudge bars. A healthcare team guides clients through safe, rapid weight loss. Weekly educational classes focus on nutrition, behavior change and physical activity. The program teaches skills to achieve a healthier weight and eat healthier. Ongoing group support helps clients achieve their goals and sustain weight loss.
- *New Outlook* is a three-phase medically monitored low-calorie diet for people wanting to lose 20 pounds or more. The average weight loss is 2-3 pounds per week. This program combines two New Direction meal supplements plus one balanced meal and snacks per day purchased from the grocery store. A healthcare team guides clients through all phases of the program. Weekly educational classes focus on nutrition, behavior change and physical activity. The program teaches skills to achieve a healthier weight and eat healthier. Ongoing group support helps clients stay on track to achieve their goals and sustain weight loss.
- *New Choices* is based on well-balanced meals and healthy snacks from grocery store food. Participants also have the option to use one New Direction meal supplement per day. This program is for anyone with any amount of weight to lose. The average weight loss is 0.5 to 2 pounds per week. Participants may attend weekly clinics and education classes or schedule one-on-one visits with a dietitian. Follow-up visits to monitor weight, and food logs help keep participants accountable and on track to achieve goals.

In late 2019, Aultman Health Foundation introduced AultmanWM, a mobile app that empowers individuals to securely journal meals, exercise, hydration and weight as part of an Aultman Weight Management program or as a stand-alone resource. The app may also be paired with an Aultman Bluetooth scale for even more daily biometric collection. Weight Management Program staff may use the app data to better engage with clients on their weight loss journey at office visits or in conjunction with telehealth visits. AultmanWM app functionalities include:
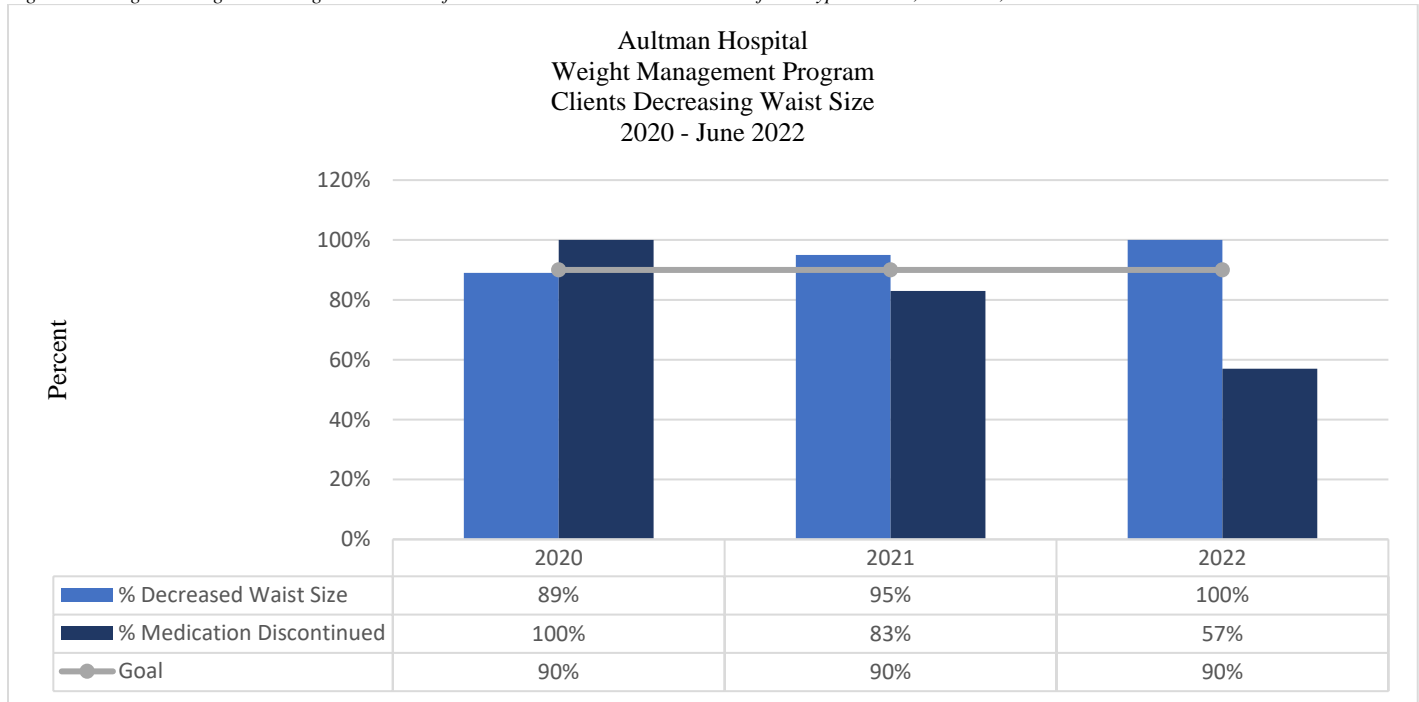1. Third-party integration with Apple HealthKit.
2. HIPAA-compliant messaging & scheduling.
3. Progress tracking.
4. Hydration & supplement tracking.
5. Meal logging.
6. Digital content.

Evaluation of Impact

In 2020, the COVID-19 pandemic severely affected the operation of the Aultman Weight Management Program with closure for 4.5 months in compliance with health regulations. In 2020, 100% of enrolled clients discontinued or reduced the dose of an antihypertensive, diabetes or cholesterol medication, and 89% achieved a decrease in their average waist size. In 2021, 83% of enrolled clients discontinued or reduced the dose of an antihypertensive, diabetes or cholesterol medication, and 95% achieved a

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decrease in their average waist size. In the first half of 2022, 57% (8/14) of enrolled clients discontinued or reduced the dose of an antihypertensive, diabetes or cholesterol medication, and 100% (23/23) achieved a decrease in their average waist size (Figure 81).

Figure 81 Weight Management Program Percent of Clients Discontinue/Reduce Dose of Antihypertensive, Diabetes, and/or Cholesterol Medication

Aultman Hospital
Weight Management Program
Clients Decreasing Waist Size
2020 - June 2022

	2020	2021	2022
% Decreased Waist Size	89%	95%	100%
% Medication Discontinued	100%	83%	57%
Goal	90%	90%	90%

Source: Aultman Weight Management Program

Aultman Generations Program

The Aultman Generations Program engages community members 50 and older to stay active and live a healthy life. Generations offers free and low-cost social activities, wellness classes, health screenings and educational opportunities specifically designed for seniors. An online event calendar lists the program events.

Evaluation of Impact

In 2020-2021, more than 14,700 members (age 50 and over) enjoyed program benefits, and up to 350 seniors regularly volunteered. Due to the pandemic, Generations programming experienced interruptions to in-person events in 2020-2021.
Source: Aultman Generations Program.

Aultman Ambassador Program

Initiated in 2012, the Aultman Ambassador Program has the vision of making Greater Stark County Schools the healthiest in the state of Ohio by the year 2032. The program has a mission to improve the overall health and well-being of youth by implementing ongoing health promotion and prevention, resulting in a healthier community. The Aultman Ambassador Program partners with area colleges, universities and high schools to influence healthy lifestyle choices among the student population. The Aultman Ambassador Program, in partnership with The Alliance for a Healthier Generation, uses the evidence-based Healthy Schools Program framework in 16 Stark County high schools, four Wayne County high schools and one middle school and one Mahoning County High School. An Aultman wellness coordinator leads the initiative providing coaching and mentoring of high school and university teams on use of the Healthy Schools Program framework, cycle, tools and resources. Participating schools complete an assessment and implement an action plan to influence a culture of health and instill healthy lifestyle habits.
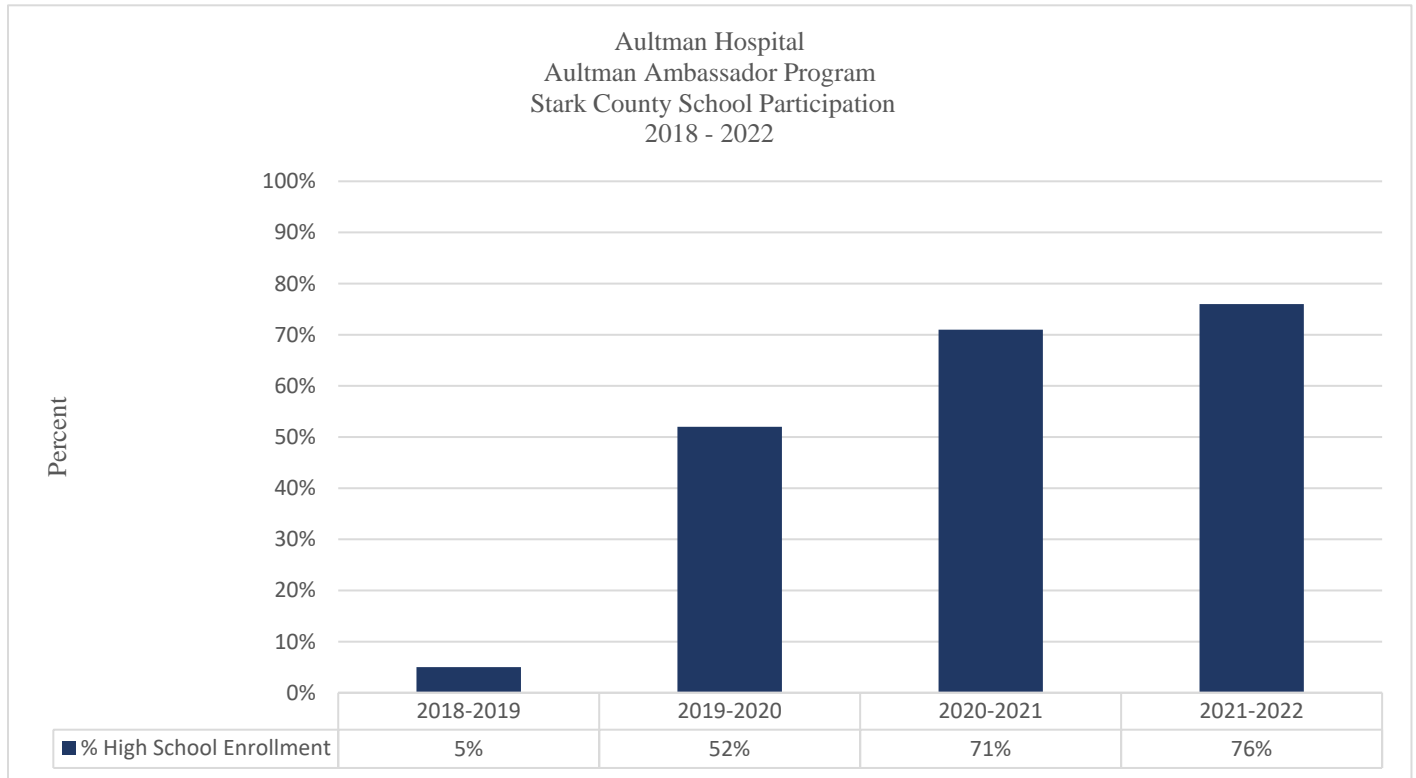
The Aultman Ambassador Program empowers high school students through an opportunity to serve as an Aultman Ambassador to engage their peers, families and communities in healthy lifestyle habits. Students in all participating schools show steady interest to serve as Aultman Ambassadors with three hundred and fifty-three (353) students using peer-to-peer mentoring to promote the program's core principles of nutritious meals and snacks, water hydration, active lifestyle, sleep habits and stress management. The teams at each enrolled school follow an annual cycle to conduct an assessment, develop an action plan, implement the action plan and evaluate the impact of the action plan. The assessment identifies priority healthy school topic areas at each school. The action plan is built based on needs. Health promotion activities detailed in the action plan (e.g., walking and hydration challenges, staff professional development wellness activities, mental health days) are implemented throughout the school year. The evaluation phase measures accomplishment of goals to help guide the next steps. In 2020, in-person participation was suspended during the pandemic and virtual activities were implemented. At year-end 2021 to 2022, Aultman Health Foundation recognized school participation

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with certificates, social media posts and a press release. In 2021-2022, Aultman awarded 23 Aultman Ambassador Scholarships, 16 Ambassador of the Year Scholarships and 14 High School Health Grants.

Evaluation of Impact

Seventy-six percent (16/21) of Stark County High Schools participate in the Aultman Ambassador Program (Figure 82).

Figure 82 Aultman Ambassador Program Stark County High School Participation Rate

Aultman Hospital
Aultman Ambassador Program
Stark County School Participation
2018 - 2022

	2018-2019	2019-2020	2020-2021	2021-2022
■ % High School Enrollment	5%	52%	71%	76%

Source: Aultman Ambassador Program

Of participating schools, all schools completed an assessment of priority healthy school topic areas in their school, and 72% of schools developed, implemented and evaluated an Action Plan. In 2021, 87% of participating schools completed an assessment and 60% developed, implemented and evaluated an action plan (Figure 83).

Figure 83 Stark County Schools - Healthy Schools Program Cycle

	2019-2020	2020-2021	2021-2022
■ % Assessment	100%	87%	88%
■ % Action Plan	100%	60%	93%
■ % Evaluation	100%	60%	88%
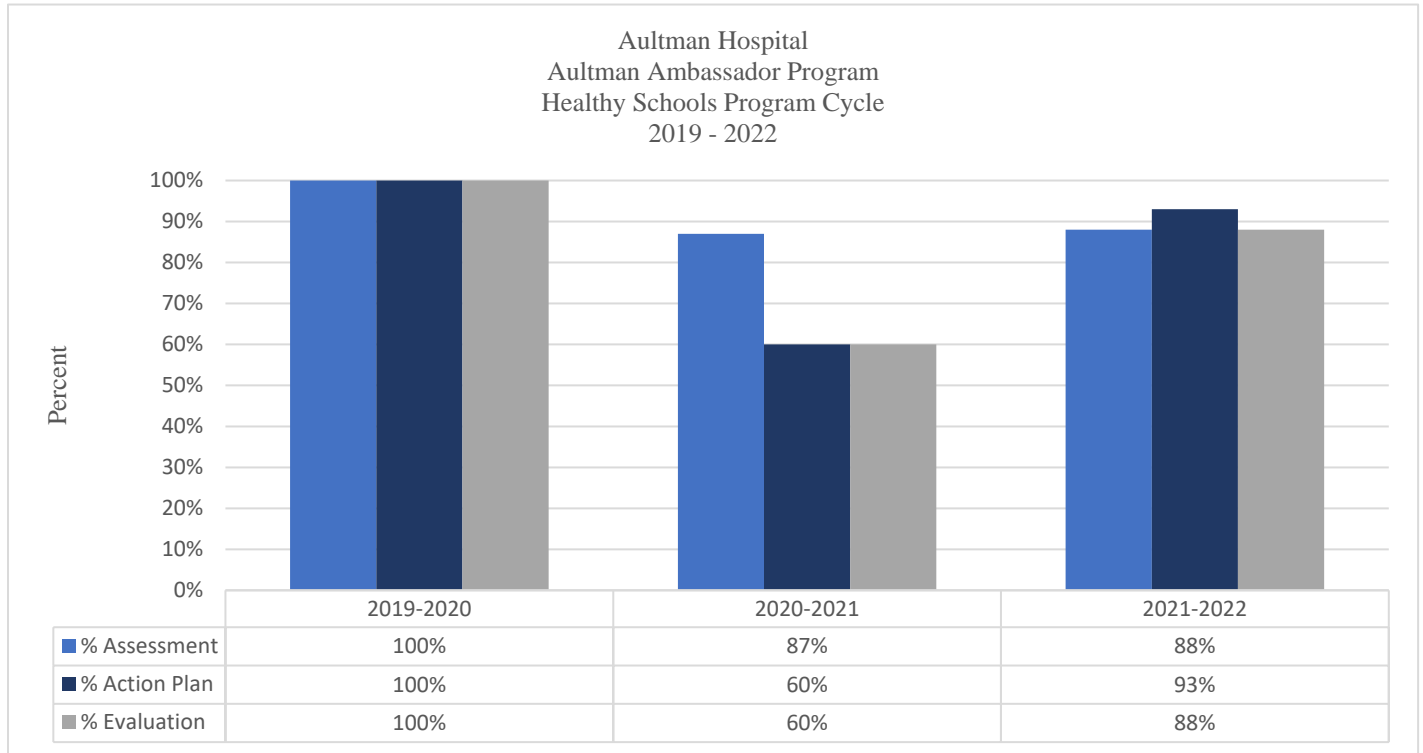
Source: The Alliance for a Healthier Generation Healthy Schools Program Action Center

Aultman Food Insecurity Committee

Because only 20% of health can be attributed to medical care, Aultman's population health strategy has invested in the identification of social determinants of health such as food insecurity as a significant population health issue. According to the USDA, food insecurity represents a household-level economic and social condition of limited or uncertain access to adequate food for an active and healthy life. Hunger may result from food insecurity. Feeding America estimates a Stark County food insecurity rate of 17.5% of the total population, a 30% increase due to the pandemic. The Stark County child food insecurity rate is 27.6%, a 39% increase due to the pandemic. Food insecurity can increase the risk of:

- Physical health issues including hypertension, asthma, tooth decay, anemia, infection and birth defects.
- Behavioral health issues including depression and anxiety.
- Chronic health conditions including obesity and diabetes.

From 2019 to 2021, the Aultman Food Insecurity Committee, comprised of hospital and community partner members, addressed hospital-based strategies to address Stark County food insecurity and mitigate the impact food insecurity has on health and health outcomes for patient populations served. Aultman used the American Hospital Association's Role of Hospitals in Food Insecurity as a framework. The Aultman Food Insecurity Committee aimed to improve community health by implementing upstream affordable, patient-centered, equitable interventions. The population health strategy integrated evidence-based clinical and non-clinical interventions that lead to a sustainable impact on reducing the prevalence of food insecurity and related health conditions. Benefits of implementing clinical interventions include identifying the target population, reducing the prevalence of food insecurity and its related health conditions, advancing culturally competent care and promoting a healthier environment. Benefits of implementing nonclinical interventions include leveraging partnerships with local food organizations and overcoming the stigma associated with food insecurity. In November 2021, the committee was dissolved, and Aultman Health Foundation will contribute to ongoing community needs as a member of the Stark County Food Council.

In 2019-2022, the Aultman Food Insecurity Committee partners implemented and sustained the following programs and services to meet local community food needs: Screening for Food Insecurity, Little Flower Family Practice Produce Perks Midwest Produce Prescription Grant, Cedar Elementary School Food Assistance Programs, Akron-Canton Regional Foodbank – Canton Campus and StarkFresh Mobile Grocery Market.

Screening for Food Insecurity

Aultman integrated the Hunger Vital Sign™ food insecurity screening items in the electronic medical record (EMR) to guide system-wide identification of food insecure patients. Integrating screening items in the EMR helps determine a patient's eligibility for food assistance programs, allows tracking of food insecurity status, helps identify patients at follow-up visits to discuss changes

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or ongoing needs and supports data analysis over time to measure readmissions, as well as other healthcare utilization rates. Screening for food insecurity allows Aultman social workers, physicians and other clinicians to assist patients experiencing food insecurity by:

- Referring patients to support for access to community food resources.
- Increasing awareness of and use of federal nutrition programs.
- Discussing associated physical or social conditions.
- Educating patients about nutrition and strategies to improve food security.
- Providing tailored clinical care based on a patient's needs, food security status and financial stability.

Evaluation of Impact

In 2020, Aultman Hospital patient screening identified 3.1% (1106/35,622) of patients who experienced food insecurity and provided referrals to community food resources; in 2021, 1.8% (562/30,778) more than half as many as in 2020. In the first half of 2022, 1.9% (183/9408) of patients screened as food insecure. Social workers offered to link these patients to community food programs and services (Figure 84).

Figure 84 Patients Screening Positive for Food Insecurity in Inpatient Settings

Aultman Hospital
Food Insecurity Screening
Patients Screened as Food Insecure (Inpatient Setting)
2020- June 2022

	2020	2021	2022
% Patients Food Insecure	3.1%	1.8%	1.9%
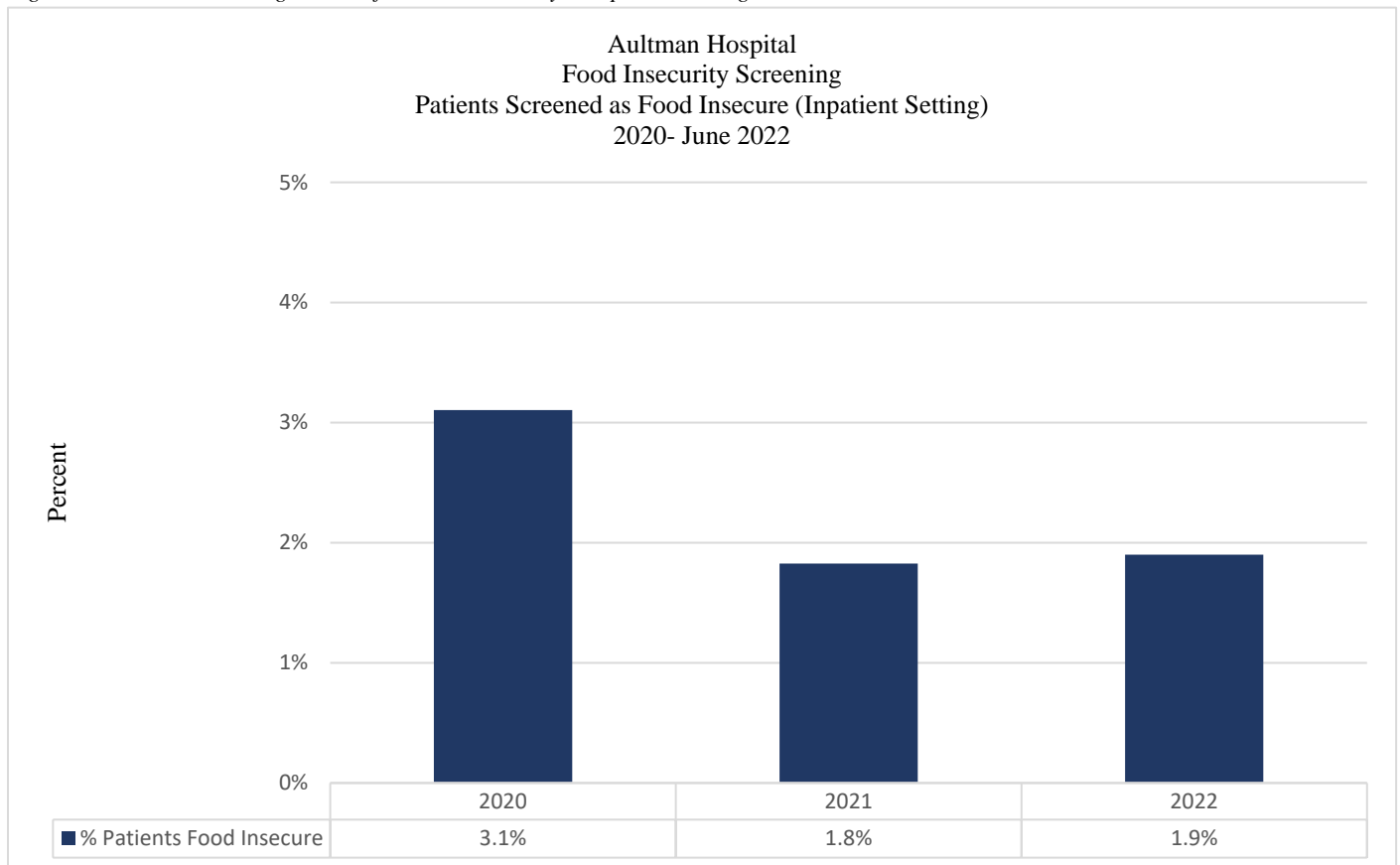
Source: Cerner

Evaluation of Impact at the Stark County Level

The Food Environment Index equally weights two indicators of the food environment: 1) limited access to healthy foods, which estimates the percentage of the population who are low income and do not live close to a grocery store and 2) food insecurity, which estimates the percentage of the population who did not have access to a reliable source of food during the past year. The Food Environment Index ranges from 0 (worst) to 10 (best). The Food Environmental Index is slightly better in Stark County than the state of Ohio (Figure 85).

Figure 85 Food Environment Index						
	2015	**2016**	**2017**	**2018**	**2019**	**% Change**
Stark County	7.3	7.4	7.3	7.4	7.4	**+0.3%**
State of Ohio	6.6	6.7	6.7	6.8	6.8	**-0.2%**
Source: County Health Rankings						

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Stark County has nearly the same percentage of the population who are food insecure or do not have access to a grocery store as the state of Ohio (Figure 86).

Figure 86 Food Insecurity Rate				
	2017	2018	2019	% Change
Stark County	14.2%	13.5%	13.4%	-0.8%
State of Ohio	14.5%	13.9%	13.2%	-1.3%
Source: Feeding America, Map the Meal Gap				

Little Flower Family Practice: Produce Perks Midwest Produce Prescription Grant

In 2019, Aultman Health Foundation, Stark County Health Department and Produce Perks Midwest partnered to implement a grant-funded six-month Produce Prescription (PRx) program as a strategy to help mitigate food insecurity in Stark County. Little Flower Family Practice served as the program site with the potential to reach a vulnerable target population of patients diagnosed with diet-related diseases who would benefit from nutrition and food preparation education. A healthcare provider recruited and enrolled 37 adult patients (142 family members) in two PRx program cohorts: diabetes and obesity. The patients attended monthly visits with their provider to receive nutrition education, have health metrics collected and complete pre-and post-surveys. Patients received monthly PRx prescriptions. Patients and family members redeemed the PRx prescriptions for $1,309 worth of fruits and vegetables at participating Produce Perks Midwest redemption site partners (i.e., Canton Farmers' Market, Fishers Foods, StarkFresh Mobile Grocery Market). By thinking upstream about a social determinant of health, the PRx program helped foster circumstances and environments that promoted health and well-being for vulnerable patients.

Evaluation of Impact

Thirty-seven Little Flower Family Practice adult patients and their families benefitted from enhanced nutrition and education to reach health goals (Figure 87).

Figure 87 Produce Perks Midwest Produce Prescription Grant Health Metrics

Metric	Percent (Number/37)
Completed the program	78%
Increased daily vegetable consumption	60%
Increased daily fruit consumption	44%
Improved healthy meal preparation ability	24%
Lost weight	59%
Lowered triglycerides	43%
Lowered A1C	36%

Source: Produce Perks Midwest Grant Report

Cedar Elementary School Food Assistance Programs

Aultman Health Foundation has a special interest in supporting Cedar Elementary School (Canton City Schools), located in the Aultman Hospital neighborhood. A reported 89.32% of students enrolled at Cedar Elementary School qualify for the federal National School Lunch Program free and reduced lunches during the school week. The Stark County Hunger Task Force Backpack for Kids Program provides qualifying students with "backpacks" with four healthy, child-friendly meals for weekends. In 2019-2020, Aultman colleagues volunteered with the Backpack for Kids Program. In October 2019, Stark County Hunger Task Force and Aultman leadership helped Cedar Elementary School launch a food distribution site to further meet family needs. In 2020, Aultman leadership facilitated the transition of the Cedar Elementary School food distribution site to a food pantry operated by FeedKids First. During the pandemic, Aultman colleagues volunteered to assist with drive-by food distribution to eligible families. In 2021, all food assistance programs continue to be offered to eligible students and their families.

Evaluation of Impact

In 2019-2021, the Backpacks for Kids Program served 255 Cedar Elementary School students. From August 2020-2021, the Cedar Elementary School Food Pantry served 36 families during the school day.
Source: Stark County Hunger Taskforce, FeedKids First.

Akron-Canton Regional Foodbank - Canton Campus

Aultman supports strategic and financial plans for food-related programs and resources in disadvantaged locations. Currently, the Akron-Canton Regional Foodbank assists hunger-relief programs in Stark, Summit, Carroll, Holmes, Medina, Portage, Tuscarawas and Wayne counties. In 2020, the foodbank distributed more than 9 million pounds of food and essential items to Stark County families in need, the equivalent of more than 7.3 million meals. Over 1.7 million pounds were fresh, nutritious produce distributed for free (Akron-Canton Regional Foodbank, 2021). The Akron-Canton Regional Foodbank opted to expand services with a Canton

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campus to meet long-standing community needs. The campus will include food pickup and delivery docks, a food storage warehouse section, a marketplace with food from grocers and retailers and a 400-square-foot cooler, a patio for outdoor markets, four collaborative offices and a food pantry that offers online order placement for curbside pickup. Aultman Health Foundation provided funding for the Akron-Canton Regional Foodbank Canton building campaign. An on-site Aultman Health Foundation Resource Room will provide access to community services based on community resident identified needs. In August 2021, the new campus opened.

Evaluation of Impact

In 2021, the Akron-Canton Regional Foodbank – Canton Campus served 3,214 families (9,855 individuals) with the distribution of 95,747 pounds of food items distributed.

StarkFresh Mobile Grocery Market

In 2021, Aultman Hospital partnered with StarkFresh to establish a Mobile Grocery Market near the hospital for easy access to low-cost, nutritious food products by colleagues and community residents.

Evaluation of Impact

Newly implemented at the Aultman Hospital campus in 2021, the StarkFresh Mobile Grocery Market increased colleague and community resident access to fresh produce with 20 visits and 146 transactions for fresh produce (Figure 88).

*Figure 88 StarkFresh Mobile Grocery Market Visits and Transactions: Aultman Hospital Campus*
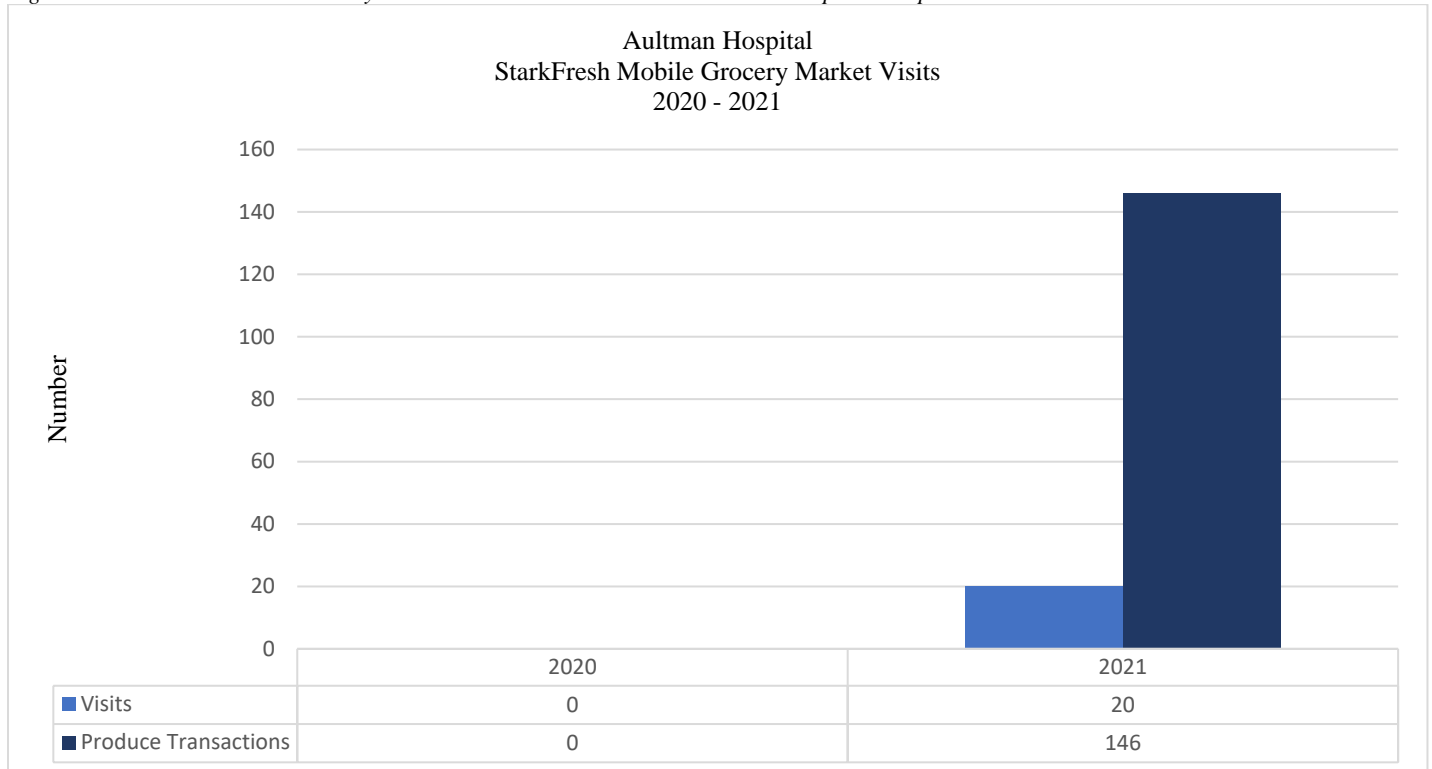
	2020	2021
■ Visits	0	20
■ Produce Transactions	0	146

Source: StarkFresh

Evaluation of Impact at the Stark County Level

Eleven percent (11%) of community leaders reported moderate/major progress on increasing the number of residents participating in physical activity. Twenty-three (23%) of community leaders reported moderate/major progress on increasing the number of residents consuming fruits and vegetables. Fifteen percent (15%) of community leaders reported moderate/major progress on increasing the percentage of residents who report their health as excellent or good (Figure 89).

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Figure 89 Community Leader Perceived Progress on Key Measures Obesity & Healthy Lifestyles
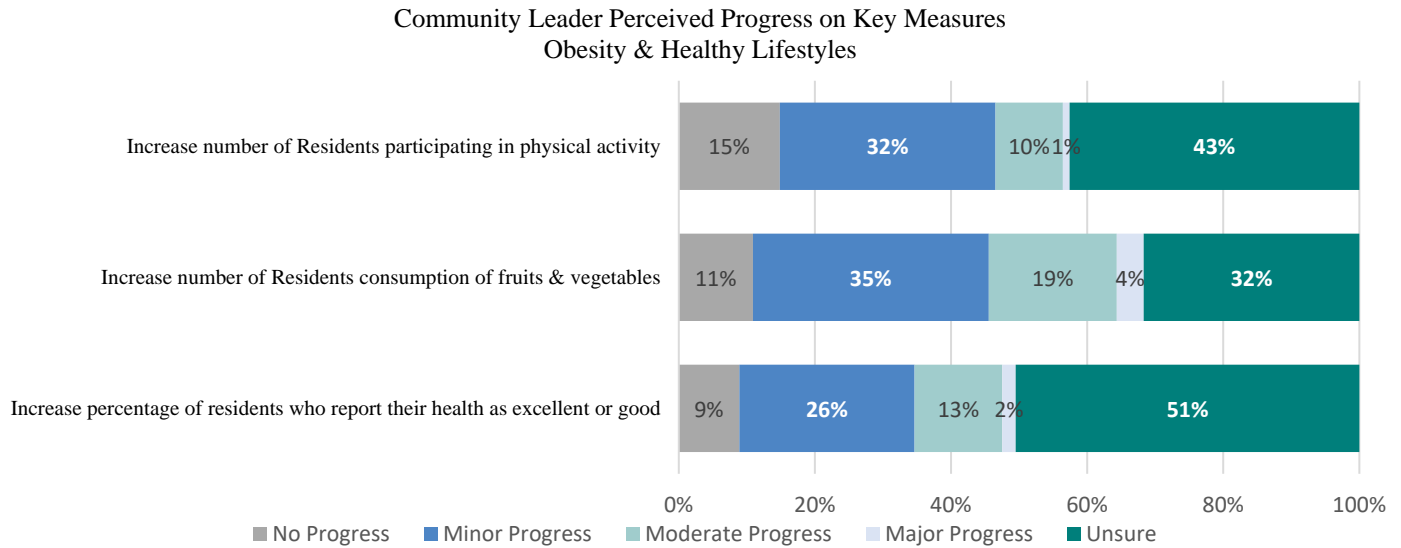
Community Leader Perceived Progress on Key Measures
Obesity & Healthy Lifestyles

Source: Stark County Community Health Assessment

Community leaders were also asked what challenges they feel people in the community face when trying to maintain a healthy lifestyle (Figure 90). This was an open-ended question in which the respondent could give multiple responses. The most common responses mentioned were access to healthy food (44%), affordability (38%), safe outdoor green space (28%), health literacy/information overload (20%), time/busy schedules (14%), transportation (11%), social determinants of health (11%) and motivation (11%).

Figure 90 Challenges that Keep People from Being Healthy	Responses	% of Community Leaders
Nutritious food to buy and prepare	49	44.1%
Affordability	42	37.8%
Safe outdoor green space	31	27.9%
Health Literacy	22	19.8%
Time	15	13.5%
Transportation	12	10.8%
Social determinants	12	10.8%
Motivation	12	10.8%
Indoor facility for physical activity	10	9.0%
Support system	10	9.0%
Health problems	7	6.3%
Social norms	6	5.4%
Ability to see healthcare worker	5	4.5%
Scheduled activities	5	4.5%
Childcare	3	2.7%
Total	244	(n=109)

Source: Stark County Community Health Assessment
Survey Question: What challenges do you feel people in the community face when trying to maintain a healthy lifestyle?

Community Partners for Obesity and Healthy Lifestyle

- Access Health Stark County
- Akron-Canton Regional Food Bank
- Alliance for a Healthier Generation
- Alliance High School
- Aultcare
- Aultman College of Nursing & Health Sciences
- Aultman Health Foundation
- Aultman Medical Group Cardiovascular Consultants
- Aultman Orrville Hospital

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- Canton Local Schools
- Canton South High School
- Canton Urban League
- Canton Farmers' Market
- Dueber United Methodist Church
- Cedar Elementary School
- Fairless High School
- FeedKids First
- Fishers Foods
- Integrative Health Collaborative
- Jackson High School
- Kent State University at Stark
- Lake High School
- Little Flower Family Practice
- Louisville High School
- Marlington High School
- McKinley High School
- Meals on Wheels of Northeast Ohio, a program of Vantage Aging
- Minerva High School
- North Canton Hoover High School
- Norwayne High School
- Norwayne Middle School
- Ohio State University Extension Office
- Orrville High School
- Perry High School
- Produce Perks Midwest
- Project School Nutrition
- Rittman High School
- Sandy Valley High School
- Stark County Educational Service Center
- Stark County Health Department
- Stark County Hunger Task Force
- Stark County Park District
- StarkFresh Mobile Grocery Market
- Tuslaw High School
- University of Akron - Wayne College
- University of Mount Union
- Walsh University
- Washington High School
- Waynedale High School
- West Branch High School

Social Determinants of Health - Housing

Description

Where and how people live directly affect their well-being. Housing instability, a term for the continuum between homelessness and stable, secure housing, includes substandard housing structures, unaffordable housing or severe rent burden. Research shows that individuals experiencing housing instability have limited access to preventive care and are more likely to have chronic health conditions including diabetes, cardiovascular disease and chronic obstructive pulmonary disease. A web of interconnected socio-economic factors contributes to housing instability and influences health outcomes. Housing stability leads to improved health outcomes through stable housing, employment, economic stability, social service programs and neighborhood safety. Lack of well-maintained and affordable housing contributes to a range of physical and mental health problems, including toxic and persistent stress and exposure to harmful contaminants such as lead and mold. High housing costs make it more difficult for families with low incomes to pay for other necessities, such as food and medical care, which also has a direct and negative impact on health (Ohio's State Health Improvement Plan, 2020).

Aultman Hospital Programs and Services: Social Determinants of Health - Housing

Aultman Hospital implemented the following program and service to address the social determinant of health housing.

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Aultman Campus Plan/Aultman Area Neighborhood Revitalization Committee

Supporting the city of Canton's 2016 comprehensive plan for economic transformation and serving the Aultman mission of leading our community to improved health, the Aultman Health Foundation works collaboratively with community partners to advance the goals of transforming the Aultman campus and revitalizing the identified Aultman area neighborhood. Aultman Health Foundation, as an anchor institution in Stark County, leads the committee and contributes community benefit funding in support of the identified Aultman Area Neighborhood initiative. The Healthy Neighborhoods Framework serves as a roadmap for leading and directing the neighborhood revitalization planning efforts. The framework focuses on four elements of neighborhood stability: a positive neighborhood image and identity to residents and visitors, a viable real estate market, good physical property conditions and strong social connections with resident investment in the neighborhood. The committee partners develop the revitalization strategy and contribute interventions based on their strengths. The partnership continues to explore campus transformation opportunities and work collaboratively with both public and private partners to revitalize the neighborhood.

Stark Community Foundation supports initiatives to strengthen neighborhoods. In October 2021, Stark Community Foundation, in partnership with Community Building Partnership of Stark County, Inc., launched the Stark County Neighborhood Partnership Program in partnership with Neighborworks America to improve and expand neighborhood revitalization efforts in Stark County. This new program provides neighborhood associations and community organizations with additional programming, training opportunities, expanded communication and financial support.

Community Building Partnership of Stark County, Inc. promotes the revitalization of neighborhoods in Stark County with a current focus on the neighborhoods of the city of Canton, including the identified Aultman Area Neighborhood, through programs and services that:
- Engage residents and stakeholders to work in partnership to create and implement targeted, neighborhood renewal plans.
- Provide financial and technical support for programs that implement these neighborhood revitalization plans.
- Provide local policy support and assistance to local governments and foundations.
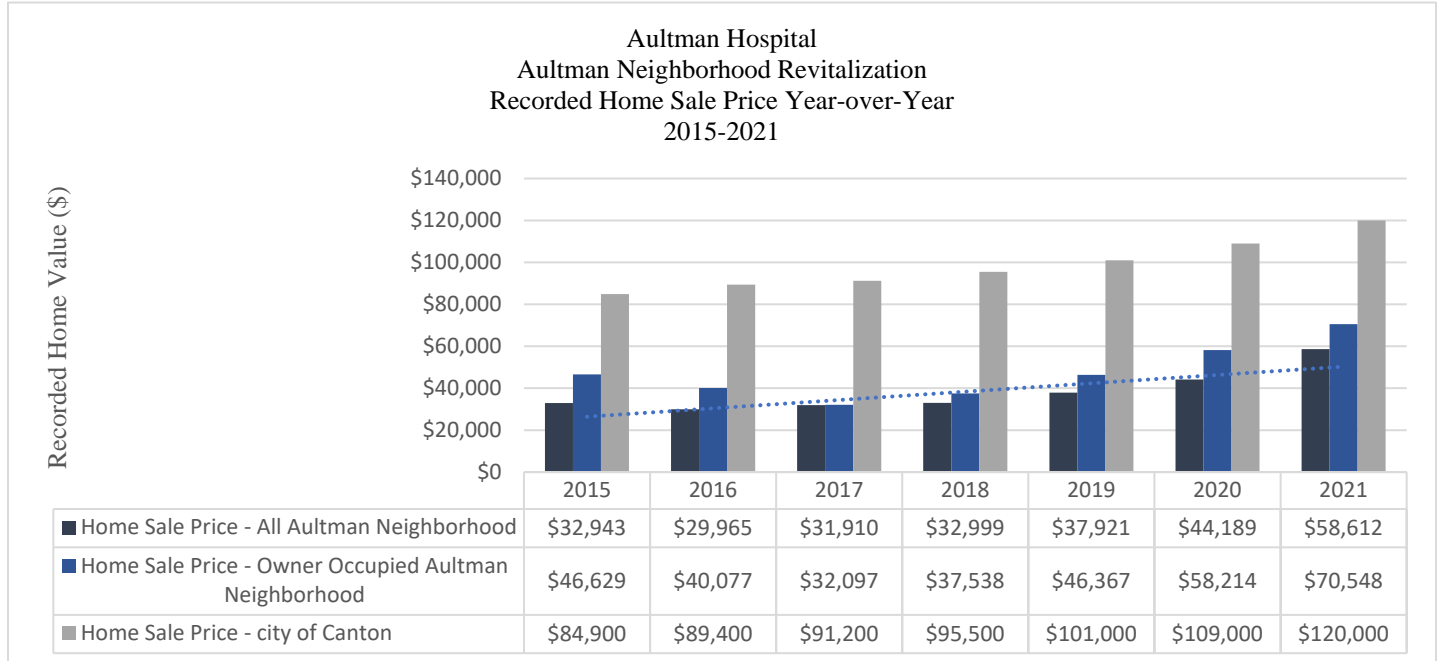
The committee has realized the following accomplishments:
- The city of Canton and other community businesses contribute funding to Community Building Partnership of Stark County, Inc. to provide down payment assistance to empower residents to achieve homeownership in the city of Canton. Programs that build community member financial literacy and offer down payment assistance options for prospective homebuyers enhance market confidence, evidenced by an increasing trend for homeownership and higher market sales. In 2020-2021, 86% of the identified Aultman Area Neighborhood was residential (1,230 homes). In 2021, 54% of residents were homeowners, a 4% increase in homeownership since 2018. Additionally, Aultman continues to transform the surrounding neighborhood by working with community residents through the Aultman Area Neighborhood Association to invest in their neighborhood.
- In 2020, the Stark Community Foundation awarded a $3,000 grant to the Aultman Area Neighborhood Association, which was used for a virtual platform to host meetings during the pandemic.
- Aultman Health Foundation contributes funding to Community Building Partnership of Stark County for the home exterior renovations grants. From 2017-2021, 41 community residents invested more than $483,277 for exterior renovation of their properties and received exterior house renovation grants for an additional $53,190 to use for exterior home renovations.
- Aultman Health Foundation contributes funding to Community Building Partnership of Stark County for colleagues accepting rental incentive to live in the Aultman Area Neighborhood (Figure 92).
- From 2017-to 2021, the city of Canton completed more than 300 code enforcement cases, 28 HUD-funded City Rehabilitation and Emergency Projects and demolished 15 blighted properties.
- In 2020, the city of Canton received a $3.3 million HUD lead abatement program grant to mitigate home lead. In 2021, lead abatement was completed for four homes in the city of Canton.

Evaluation of Impact

Investments in neighborhood properties have positively impacted recorded single-family home sale prices. In the five years following the initiation of the Aultman Campus Plan/Neighborhood Revitalization Committee (2017-2021), owner-occupied, single-family properties in the Aultman neighborhood had a more than 45% ($32,097/$70,548) change in home sale price (Figure 91).
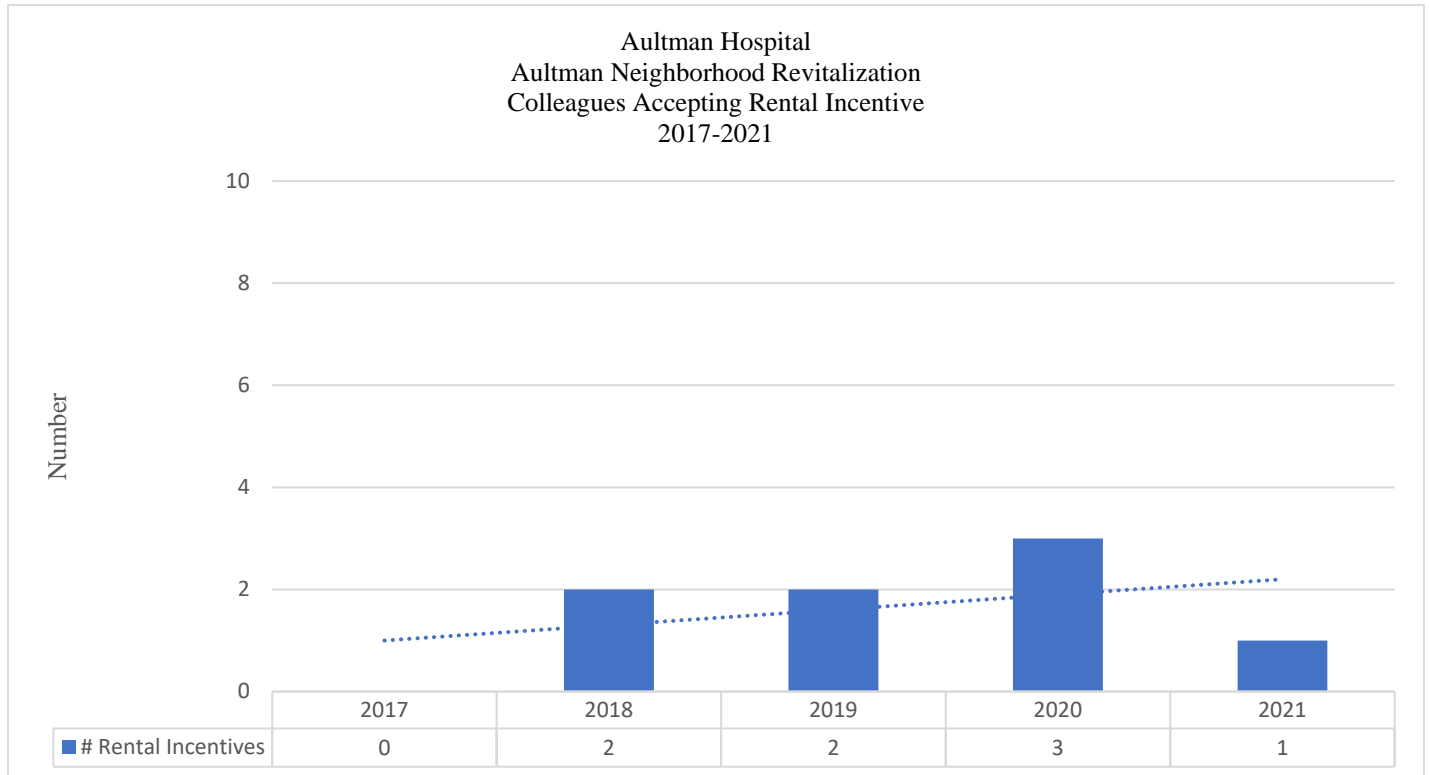
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Figure 91 Aultman Neighborhood Revitalization Single Family Recorded Home Sale Prices Year-Over-Year

Aultman Hospital
Aultman Neighborhood Revitalization
Recorded Home Sale Price Year-over-Year
2015-2021

	2015	2016	2017	2018	2019	2020	2021
■ Home Sale Price - All Aultman Neighborhood	$32,943	$29,965	$31,910	$32,999	$37,921	$44,189	$58,612
■ Home Sale Price - Owner Occupied Aultman Neighborhood	$46,629	$40,077	$32,097	$37,538	$46,367	$58,214	$70,548
■ Home Sale Price - city of Canton	$84,900	$89,400	$91,200	$95,500	$101,000	$109,000	$120,000

Source: Stark County Auditor

From 2017 to 2022, eight Aultman colleagues accepted rental incentives ($3,500) to apply toward the rental deposit on rental properties in the Aultman neighborhood (Figure 92).
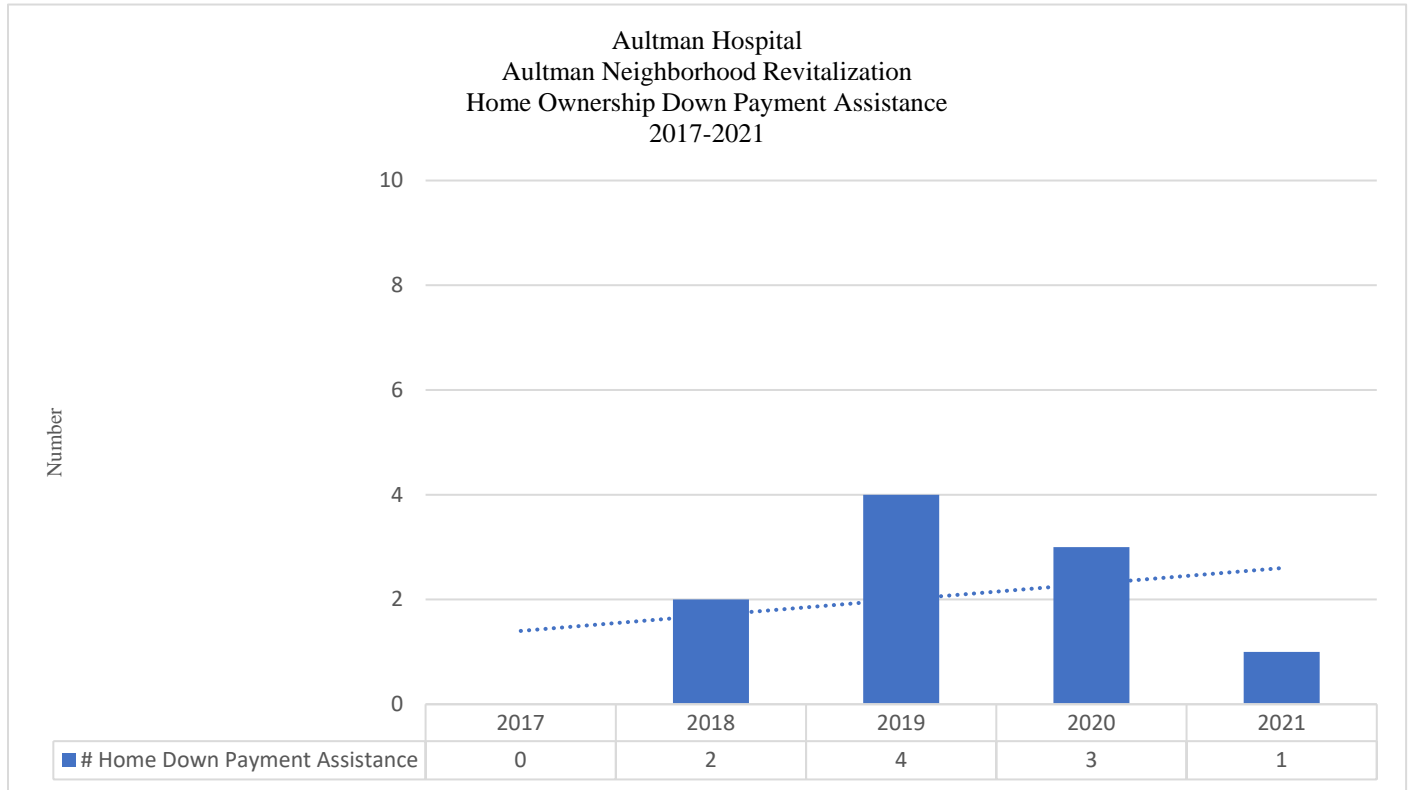
Figure 92 Aultman Neighborhood Revitalization Rental Incentives

Aultman Hospital
Aultman Neighborhood Revitalization
Colleagues Accepting Rental Incentive
2017-2021

	2017	2018	2019	2020	2021
■ # Rental Incentives	0	2	2	3	1

Source: Community Building Partnership of Stark County

From 2017 to 2021, ten community residents received down payment assistance for homeownership totaling $100,000 (Figure 93). 2022 data pending.

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Figure 93 Aultman Neighborhood Revitalization Down Payment Assistance

Aultman Hospital
Aultman Neighborhood Revitalization
Home Ownership Down Payment Assistance
2017-2021

	2017	2018	2019	2020	2021
■ # Home Down Payment Assistance	0	2	4	3	1

Source: Community Building Partnership of Stark County

Evaluation of Impact at the Stark County Level

The median monthly housing costs for mortgage holders as a percent of household income (homeowners) as well as median gross rent as a percent of household income (renters) is nearly identical for the state and the county. Severe renter cost burden means that at least half of household income is spent on housing. In Ohio, nearly a quarter of renters suffer from severe renter cost burdens. For the county, the percentage is slightly lower (Figure 94).

Figure 94 Homeowner and Renter Affordability (2019)

Homeowner Affordability, 2019		
	Median Monthly Housing Cost for Mortgage Holders	Median Monthly Housing Cost for Mortgage Holders as % of Household Income
Stark County	$1,146	18.7%
State of Ohio	$1,248	19.1%
^FHA guidelines state that a household should avoid buying a home that costs more than 2.5 times its annual income. Numbers in red are above the 2.5 threshold.		

Renter Affordability, 2019		
	Median Monthly Gross Rent	Median Gross Rent as % of Household Income	Severe Renter Cost Burden
Stark County	$728	27.1%	20.5%
State of Ohio	$797	27.6%	23.0%
Source: OHFA, Draft Ohio Housing Needs Assessment, Fiscal Year 2021 Annual Plan		

Community Partners for Social Determinant of Health - Housing

- A List Properties
- Aultman College of Nursing and Health Sciences
- Aultman Health Foundation
- Aultman Area Neighborhood Association (AANA)
- City of Canton, Ohio
- Citizens Charitable Foundation
- Community Building Partnership of Stark County, Inc.
- Dominion Energy
- Housing and Urban Development (HUD)

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- Huntington Bank
- Neighborworks America
- Stark Community Foundation
- Stark County Neighborhood Partnership Program
- The Deuble Foundation

Aultman Specialty Hospital

Priority Health Need 1: Access to Healthcare

Description

Access to high-quality, affordable, holistic and culturally relevant care. Aultman aims to expand its presence in the community, work to reduce barriers impacting access to care and improve coordination of care to ensure community members have equitable access to high-quality primary, acute, specialized, urgent and emergency care in appropriate settings.

Aultman Specialty Hospital Programs and Services: Access to Healthcare

Aultman Specialty Hospital chose not to address Access to Healthcare directly. A long-term acute care hospital, Aultman Specialty Hospital does not possess the expertise to address these needs. Aultman Specialty Hospital will rely on the expertise of other organizations, including its affiliates Aultman Hospital and Aultman Health Foundation, to address these needs. Other programs, facilities and organizations with more applicable expertise and resources exist within the community, as identified in the 2019 Aultman CHNA report, to address these needs.

Priority Health Need 2: Mental Health

Description

The mental health priority health need encompasses access to mental health services, heroin/opioid use and youth suicide. Access to mental healthcare focuses on the integration of mental health services in primary care, substance abuse treatment and violence prevention. The misuse of and addiction to heroin and opioids (including prescription pain relievers and synthetic opioids such as fentanyl) continues to be a national crisis. The Centers for Disease Control and Prevention estimates the "economic burden" at $78.5 billion a year (National Institute on Drug Abuse, 2019). Youth suicide prevention remains a priority focus in Stark County.

AultCare, an Aultman Health Foundation affiliate, launched the You Matter campaign to increase community awareness of the importance of mental health and decrease the stigma associated with mental illness. The message has spread across all corners of our communities. From our hospitals to the school systems, You Matter shares that everyone matters. In 2020-2021, AultCare collaborated with Child & Adolescence Behavioral Health to promote the message of You Matter from elementary school to high school students including support for the annual Stark County Children's Mental Health Awareness Week. In 2021, more than 42,500 students in 10 school districts benefited from the third annual Stark County Children's Mental Health Awareness Week. During this week, a unity video featured 21 high school mental health champions from the partnership school districts. AultCare provided You Matter messaging materials for Child & Adolescence Behavioral Health staff members and more than 350 Stark County school administrators including You Matter T-shirts, posters and notepads to reinforce the positive message to students. AultCare awarded 41 scholarships in 2020 and 40 scholarships in 2021 to one graduating senior from each high school in the five-county primary service area to recognize the students' resilience despite significant sacrifices.

Aultman Specialty Hospital Programs and Services: Mental Health (Access)

Aultman Specialty Hospital chose not to address Mental Health - Access to Care directly. A long-term acute care hospital, Aultman Specialty Hospital does not possess the expertise to address these needs. Aultman Specialty Hospital will rely on the expertise of other organizations, including its affiliates Aultman Hospital and Aultman Health Foundation, to address these needs. Other programs, facilities and organizations with more applicable expertise and resources exist within the community, as identified in the 2019 Aultman CHNA report, to address these needs.

Evaluation of Impact
Not applicable.
Community Partners for Mental Health (Access)
Not applicable.

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Aultman Specialty Hospital Programs and Services: Mental Health (Addiction)

Aultman Specialty Hospital implemented the following programs and services to address the priority health need of mental health heroin and opioid use.

Aultman Opioid Committee

Aultman Opioid Committee is an integrated and standardized system-wide committee with subcommittees that address the key drivers of safe opioid prescribing practices. In 2022, committee members will explore additional areas of opportunity identified from a 2021 Ohio Hospital Association Gap Analysis including overdose policies, standard policies and protocols for opioids in the facility, standardized naloxone dispensing, buprenorphine training and cultural competence in the care of patients with opioid use disorder.

Subcommittee Information Technology
The subcommittee aims to enhance transitions between practitioners with the use of safe, effective, optimal use of technology in the clinical setting. Strategies include creating a dashboard for provider feedback (e.g., chronic and acute opioid measures such as benzodiazepine co-prescribing), making recommendations on the use of the Cerner opioid toolkit and facilitating changes to the electronic medical record. The Cerner opioid toolkit includes a central chart location to review opioid-related risk, clinical decision support for opioid management, opioid management analytics to help enable assessment of prescribing patterns, opioid treatment and naloxone provisioning and a predictive model to help inform providers of patients' risk for a future opioid use disorder event.

Subcommittee Acute/Chronic Pain & Regulatory/Compliance
The subcommittee aims to support safe inpatient prescribing practices with adherence to regulatory and compliance standards on pain assessment and management. The subcommittee aims to promote the proper treatment and evaluation of standards of clinical practice and patient care for consistency with evidence-based practice, quality outcomes and regulatory requirements.

Subcommittee Education
The subcommittee aims to educate physicians, nurses, clinicians and patients on the opioid crisis. Subcommittee members secure speakers, determine topics and identify logistics for the healthcare delivery system. Topics include understanding Ohio law, morphine equivalent dose and interpretation of a urine drug screen. Patient education includes safe disposal of medications with distribution of Drug Disposal Kits on discharge.

Evaluation of Impact

Subcommittee Information Technology
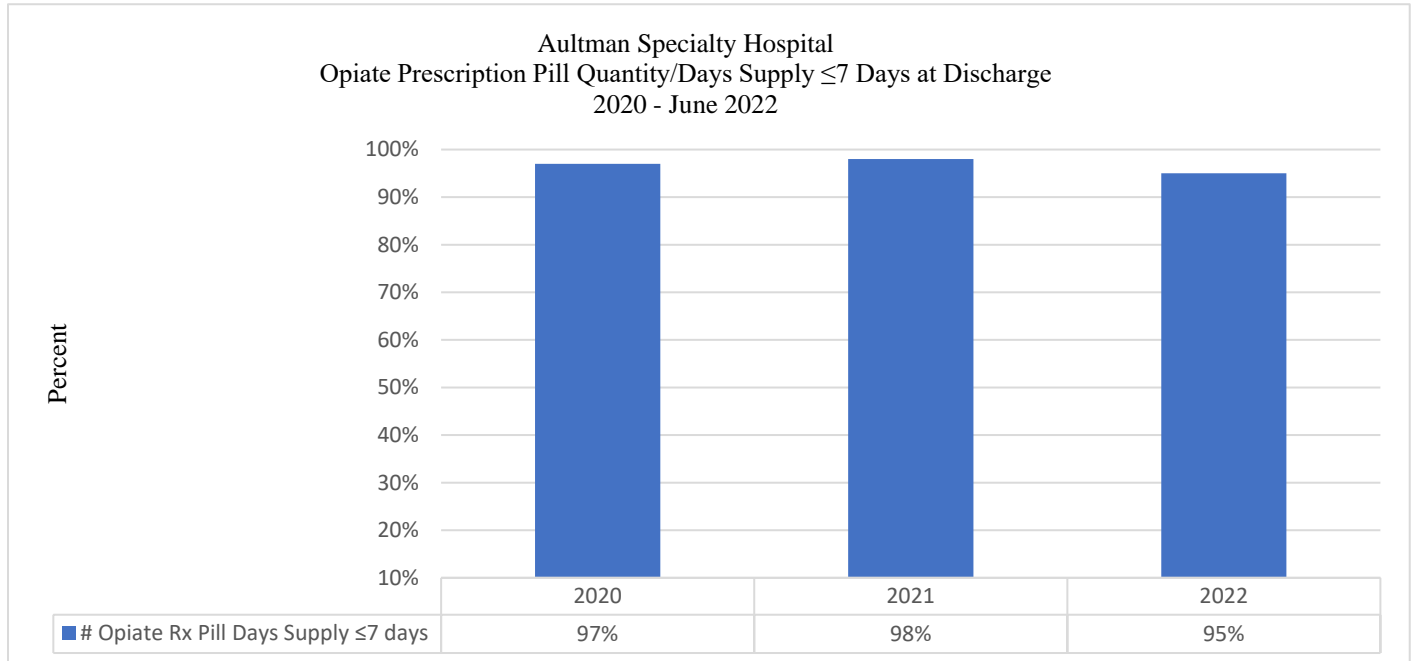Aultman Specialty Hospital implemented the Cerner Opioid Toolkit in 2022.

Subcommittee Education
In 2020 to June 2022, 100% of Aultman Specialty Hospital credentialed employed providers who prescribe opioids completed safe opioid prescribing education. Source: Medical Staff Office.

Subcommittee Acute/Chronic Pain & Regulatory/Compliance
In 2020 to June 2022, Aultman Specialty Hospital met the goal of opioid prescription pill quantity ≤7 days at discharge for 95-98% of prescriptions (Figure 95).
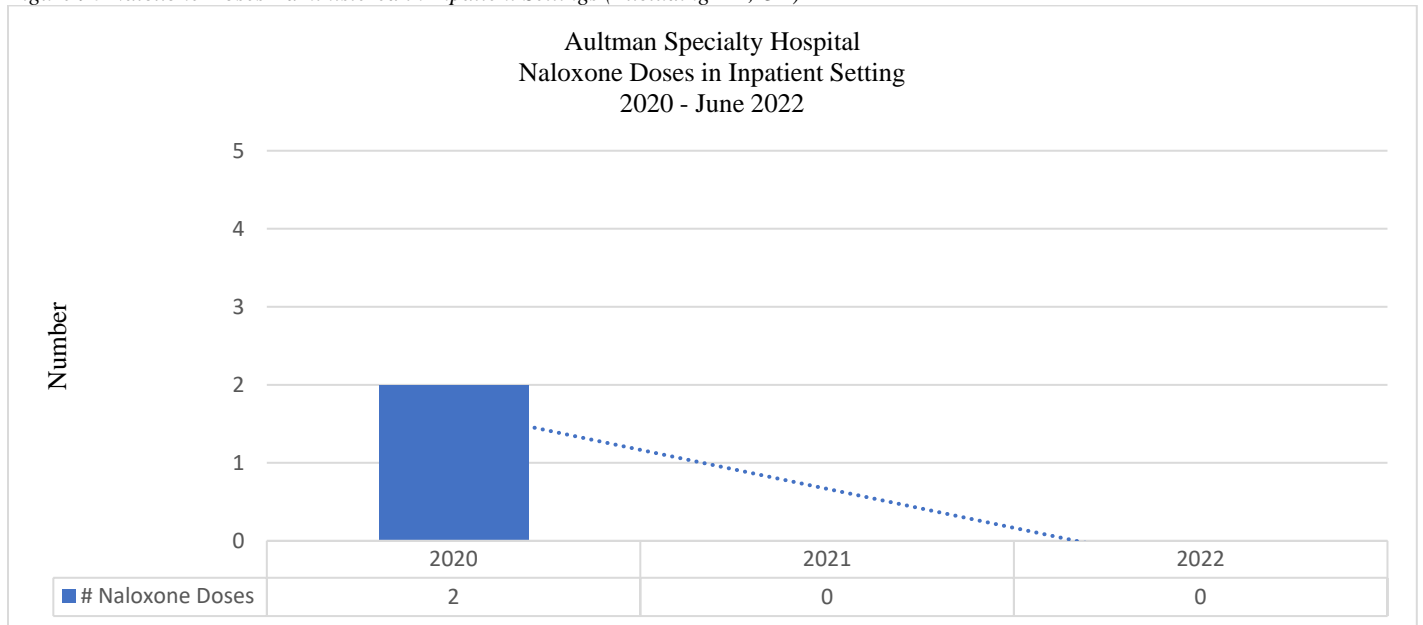
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Figure 95 Percent of Prescription Opioid Pill Quantity/Supply ≤7 days at Patient Discharge

Aultman Specialty Hospital
Opiate Prescription Pill Quantity/Days Supply ≤7 Days at Discharge
2020 - June 2022

	2020	2021	2022
# Opiate Rx Pill Days Supply ≤7 days	97%	98%	95%

Source: Cerner

In 2020 to June 2022, the committee identified no unusual trends in naloxone doses administered with no naloxone doses required in 2021 (Figure 96).

Figure 96 Naloxone Doses Administered in Inpatient Settings (Excluding ED, OR)

Aultman Specialty Hospital
Naloxone Doses in Inpatient Setting
2020 - June 2022

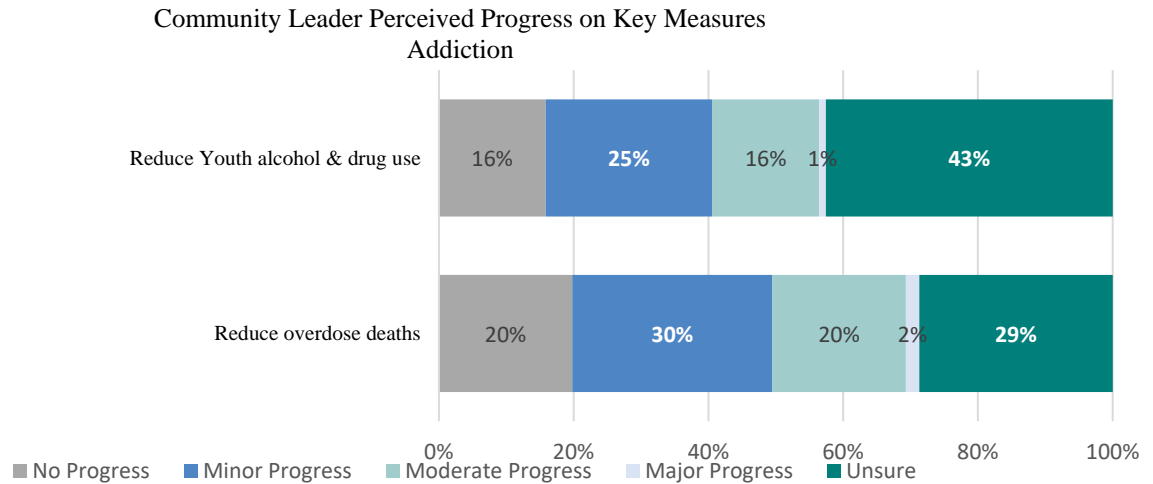|	2020	2021	2022
# Naloxone Doses	2	0	0

Source: Cerner

Evaluation of Impact at the Stark County Level

Twenty-two percent (22%) of community leaders reported moderate/major progress on reducing overdose deaths (Figure 97).

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Figure 97 Community Leader Perceived Progress on Key Measures Addiction

Community Leader Perceived Progress on Key Measures
Addiction

Reduce Youth alcohol & drug use: No Progress 16%, Minor Progress 25%, Moderate Progress 16%, Major Progress 1%, Unsure 43%

Reduce overdose deaths: No Progress 20%, Minor Progress 30%, Moderate Progress 20%, Major Progress 2%, Unsure 29%

Legend: No Progress, Minor Progress, Moderate Progress, Major Progress, Unsure

Source: Stark County Community Health Assessment

Community Partners for Mental Health (Addiction)

▪ Aultman Medical Group
▪ Aultman Orrville Hospital
▪ Ohio Board of Nursing
▪ Ohio Department of Health New Strategies to Combat the Opiate Crisis in Ohio (2018). LINK
▪ Ohio Hospital Association – smartRX
▪ Stark Mental Health Addiction & Recovery
▪ Stark County Health Department
▪ State Medical Board of Ohio
▪ State of Ohio Board of Pharmacy

Aultman Specialty Hospital Programs and Services: Mental Health (Youth Suicide)

Aultman Specialty Hospital chose not to address Mental Health – Youth Suicide directly. A long-term acute care hospital, Aultman Specialty Hospital does not possess the expertise to address these needs. Aultman Specialty Hospital will rely on the expertise of other organizations, including its affiliates Aultman Hospital and Aultman Health Foundation, to address these needs. Other programs, facilities and organizations with more applicable expertise and resources exist within the community, as identified in the 2019 Aultman CHNA report, to address these needs.

Evaluation of Impact

Not applicable.

Community Partners for Mental Health (Youth Suicide)

Not applicable.

Priority Health Need 3: Infant Mortality

Description

Infant mortality, defined as an infant death before the first birthday, serves as an important indicator of a society's overall health. Ohio ranks 41st in the nation in overall infant mortality rate (IMR) or the number of infant deaths per 1,000 live births. In 2019, infant deaths decreased for the third straight year. In 2019, the Ohio Department of Health reported that 929 Ohio infants died before their first birthday. In 2019, the Ohio infant mortality across all races was 6.9 per 1,000 live births, the same as it was in 2018. The number of white infants who died was 518, the lowest number in the past 10 years. In 2019, there were 356 Black infant deaths in Ohio, an increase of 17 from 2018. However, this is still lower than 2015, 2016 and 2017. The Black IMR was 14.3 in 2019, up from 13.9 in 2018. Black infants were more than 2.8 times more likely to die than white infants.

In 2019, Stark County had an overall IMR of 5.4 infant deaths per 1,000 live births (Ohio Department of Health, 2020). In 2019, the Ohio Department of Health did not report a Black IMR for Stark County since the number of Black infant deaths was less than 10 in multiple years. In 2019, the white IMR was 3.8.

In 2021, the Eliminating Disparities in Infant Mortality Task Force will work closely with the Ohio Department of Health to focus on advancing health equity and establish Ohio as a model for justice, equity, opportunity and resilience as part of Governor DeWine's action plan. Ohio Department of Health and Centers for Medicare and Medicaid Services will provide additional funding to Stark County for THRIVE initiatives.

Aultman Specialty Hospital Programs and Services for Infant Mortality

Aultman Specialty Hospital chose not to address Infant Mortality directly. As a long-term acute care hospital, Aultman Specialty Hospital does not possess the expertise to address this need. Aultman Specialty Hospital will rely on the expertise of other organizations, including its affiliates Aultman Hospital and Aultman Health Foundation, to address this need. Other programs, facilities and organizations with more applicable expertise and resources exist within the community, as identified in the 2019 Aultman CHNA report, to address this need.

Evaluation of Impact

Not applicable.

Community Partners for Infant Mortality

Not applicable.

Priority Health Need 4: Obesity and Healthy Lifestyle

Description

Promotion of healthy lifestyle choices and prevention and management of chronic diseases and conditions such as obesity, type 2 diabetes, hypertension, heart disease, stroke and cancer.

Aultman Specialty Hospital Programs and Services for Obesity and Health Lifestyle

Aultman Specialty Hospital implemented the following program for the priority health need obesity and healthy lifestyle.

Bee Healthy Wellness Program

Bee Healthy is a voluntary program that promotes health, wellness and preventive strategies to our colleagues. This is one very important way our staff can support Aultman's mission of leading the community to improved health. Staff members are provided with the opportunity to earn incentives while engaging in a healthy and fit lifestyle. In 2020, the Bee Healthy Wellness Program suspended activities due to the pandemic, and all colleagues received reduced premiums for 2021 AultCare health plans.

Evaluation of Impact

In 2019, 71% and in 2021, 81% of eligible Aultman Specialty Hospital colleagues completed the five required components of the Bee Healthy Wellness Program. Source: Cerner Bee Healthy System.

Evaluation of Impact at the Stark County Level

Eleven percent (11%) of community leaders reported moderate/major progress on increasing the number of residents participating in physical activity. Twenty-three (23%) of community leaders reported moderate/major progress on increasing the number of residents consuming fruits and vegetables. Fifteen percent (15%) of community leaders reported moderate/major progress on increasing the percentage of residents who report their health as excellent or good (Figure 98).

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Figure 98 Community Leader Perceived Progress on Key Measures Obesity & Healthy Lifestyles
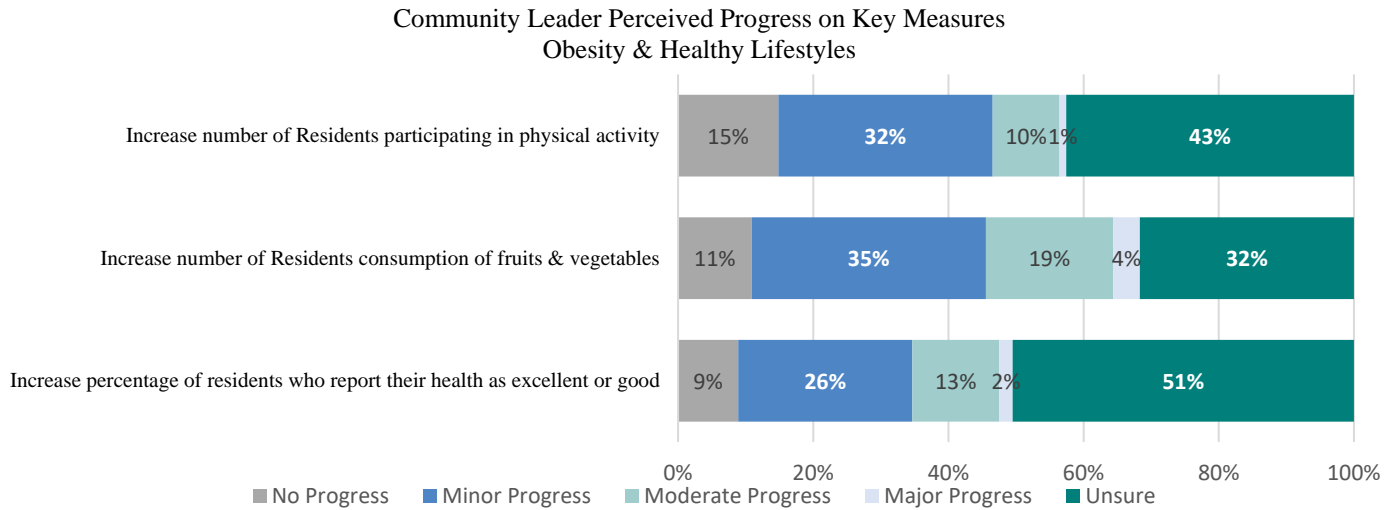
Community Leader Perceived Progress on Key Measures
Obesity & Healthy Lifestyles

Source: Stark County Community Health Assessment

Community leaders were also asked what challenges they feel people in the community face when trying to maintain a healthy lifestyle. This was an open-ended question in which the respondent could give multiple responses. The most common responses mentioned were access to healthy food (44%), affordability (38%), safe outdoor green space (28%), health literacy/information overload (20%), time/busy schedules (14%), transportation (11%), social determinants of health (11%) and motivation (11%) (Figure 99).

Figure 99 Challenges that Keep People from Being Healthy		
	Responses	% of Community Leaders
Nutritious food to buy and prepare	49	44.1%
Affordability	42	37.8%
Safe outdoor green space	31	27.9%
Health Literacy	22	19.8%
Time	15	13.5%
Transportation	12	10.8%
Social determinants	12	10.8%
Motivation	12	10.8%
Indoor facility for physical activity	10	9.0%
Support system	10	9.0%
Health problems	7	6.3%
Social norms	6	5.4%
Ability to see healthcare worker	5	4.5%
Scheduled activities	5	4.5%
Childcare	3	2.7%
Total	244	(n=109)
Survey Question: What challenges do you feel people in the community face when trying to maintain a healthy lifestyle?		

Source: Stark County Community Health Assessment

Community Partners for Obesity and Healthy Lifestyle

- AultCare
- Aultman Hospital

Social Determinants of Health - Housing

Description

Where and how people live directly affect their well-being. Housing instability, a term for the continuum between homelessness and stable, secure housing, includes substandard housing structures, unaffordable housing or severe rent burden. Research shows that individuals experiencing housing instability have limited access to preventive care and are more likely to have chronic health

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conditions including diabetes, cardiovascular disease and chronic obstructive pulmonary disease. A web of interconnected socio-economic factors contributes to housing instability and influences health outcomes. Housing stability leads to improved health outcomes through stable housing, employment, economic stability, social service programs and neighborhood safety. Lack of well-maintained and affordable housing contributes to a range of physical and mental health problems, including toxic and persistent stress and exposure to harmful contaminants such as lead and mold. High housing costs make it more difficult for families with low incomes to pay for other necessities, such as food and medical care, which also has a direct and negative impact on health (Ohio's State Health Improvement Plan, 2020).

Aultman Hospital Programs and Services: Social Determinant of Health - Housing

Aultman Specialty Hospital chose not to address safe, affordable housing directly. As a long-term acute care hospital, Aultman Specialty Hospital does not possess the expertise to address this need. Aultman Specialty Hospital will rely on the expertise of other organizations, including its affiliates Aultman Hospital and Aultman Health Foundation, to address this need. Other programs, facilities and organizations with more applicable expertise and resources exist within the community, as identified in the 2019 Aultman CHNA report, to address this need.

Evaluation of Impact

Not applicable.

Community Partners for Social Determinant of Health - Housing

Not applicable.

Conclusion

As the COVID-19 pandemic continues to evolve, we remain proud of Stark County's frontline heroes and leadership teams who continue to care for and make decisions based on the best interests of our community during the pandemic. We are also grateful for the unprecedented collaboration between our community partners that have opened lines of communication, helped to disseminate critical information to the community and strengthened our response to the crisis and the priority need initiatives.

Appendices

Appendix 1 Organizations that Assisted as a member of the Stark County Community Health Assessment Advisory Committee

Organizations	Agency
Access Health Stark County	Meals on Wheels Northeast Ohio
Alliance City Health Department	My Community Health Center
Alliance Family Health Center	OSU Extension
Aultman Alliance Community Hospital	Salvation Army of Canton Citadel
Aultman Health Foundation	Stark Community Foundation
Aultman Hospital	StarkFresh
Aultman Specialty Hospital	Stark Parks
Beacon Charitable Pharmacy	Stark County Community Action Agency
Canton City Public Health	Stark County Family Council
Cleveland Clinic Mercy Hospital	Stark County Health Department
Domestic Violence Project Inc	Stark County Jobs and Family Services
Jackson Twp Fire	Stark County Mental Health & Addiction Recovery (StarkMHAR)
Lifecare Family Health and Dental Center	United Way of Greater Stark County
Massillon City Health Department	Youngstown State University
Source: Stark County Community Health Needs Assessment	

Appendix 2 Aultman Health Foundation Community Health Needs Assessment Advisory Committee Members

Member	Organization
Amy J. Antonacci	Chief Nursing Officer, Aultman Alliance Community Hospital
Kay Conley	Director, Stark County Health Department
Liz Edmunds	Vice President Population Health, Aultman Health Foundation
David L. Ellis	Finance, Aultman Hospital
Lynn Gastin	Director of Care Coordination, Aultman Hospital

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Lisa M. Geiger	Chief Financial Officer, Aultman Alliance Community Hospital
Nicole Kolacz	Chief Nursing Officer, Aultman Hospital
Anju Mader	Chief Integration Officer, Behavioral Health Access and Integration Collaborative
Mona J. Meenan	Financial Analyst, Aultman Alliance Community Hospital
Kevin Pete	Chief Operating Officer, AultPlan
Anne P. Taylor	Executive Director Financial Savings, Aultman Health Foundation
Lisa M. Vacha	Clinical Director, Aultman Specialty Hospital
Melissa A. Warrington	Vice President Corporate Controller, Aultman Health Foundation
Katie Wright	Vice President Healthcare Delivery System Care Coordination
Lisa M. Zellers	Vice President Foundation Services, Aultman Health Foundation
Source: Aultman Health Foundation Community Health Needs Assessment Advisory Committee Roster	

References and Resources

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