



# 2022 Community Health Needs Assessment – Implementation Plan

Mercy Health – Youngstown

# 2023 – 2025 Community Health Needs Assessment – Implementation Plan

Mercy Health – Youngstown Market: St. Elizabeth Youngstown, St. Elizabeth Boardman, and St. Joseph Warren Hospitals.

Adopted by the Youngstown Market Board of Directors, April 20, 2023

Mercy Health has been committed to the communities it serves for nearly two centuries. This long-standing commitment has evolved intentionally based on our communities' most pressing health needs.

The following document is a detailed Community Health Implementation Plan for the Mercy Health Youngstown Market. As a system, Mercy Health is dedicated to our Mission of extending the compassionate ministry of Jesus by improving the health and well-being of our communities and bringing good help to those in need, especially people who are poor, dying and underserved. We strive to create effective strategies to meet the health needs of our community.

Having identified the greatest needs in our community, the Community Health Implementation Plan ensures our resources for outreach, prevention, education, and wellness are directed towards opportunities where the greatest impact can be realized.

Mercy Health -  
Youngstown

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# Introduction

St. Elizabeth Youngstown Hospital (SEYH) is a tertiary care facility that draws patients from the tri-county area, including parts of Trumbull, Mahoning, and Columbiana counties and is also a Level I Trauma Center serving as a trauma site for multiple counties in the surrounding primary service area. SEYH is licensed for 520 beds, 58 ICU beds, and 48 Behavior Health beds. The average daily census in 2021 was 300.

St. Elizabeth Boardman Hospital: St. Elizabeth Boardman Hospital (SEBH) is a community facility primarily serving residents of southern Mahoning and northern Columbiana counties. SEBH also offers Level III maternity services to surrounding counties. SEBH is licensed for 164 adult beds, 18 adult ICU beds, 51 Obstetric level III beds, and 77 Newborn Care level I & II beds for a total of 310 beds. The average daily census in 2021 was 193.

St. Joseph Warren Hospital: St. Joseph Warren Hospital (SJWH) is a community facility primarily serving residents of Trumbull County. SJWH offers Level II maternity services. SJWH is licensed for 220 beds and a level III Trauma Center. SJWH offers ICU, Intermediate Care, Internal Medicine, Maternity, Surgery (specialty and general), Emergency Department, Community Care Ambulatory Center, and a level II OB with a special care nursery.

This Community Health Needs Assessment Implementation Plan will address the prioritized significant community health needs through the CHNA. The Plan indicates which needs the Youngstown Market will address and how, as well as which needs the Youngstown Market won't address and why.

The Youngstown Market intends to take a regional approach to address its CHNA and the identified prioritized needs, and therefore the needs the hospitals intend to take and the strategies outlined in this Community Health Needs Implementation Plan are the same and combined into one plan document.

Beyond programs and strategies outlined in the plan, Youngstown Market: St. Elizabeth Youngstown, St. Elizabeth Boardman, and St. Joseph Warren Hospitals will address the health care needs of the community by continuing to operate in accordance with its mission to extend the healing ministry of Jesus by improving the health of its communities with emphasis on the poor and underserved. This includes providing care for all individuals regardless of their ability to pay.

The strategies in this Implementation Plan will provide the foundation for addressing the community's significant needs between 2023 – 2025. However, the Youngstown Market: St. Elizabeth Youngstown, St. Elizabeth Boardman, and St. Joseph Warren Hospitals anticipates that some strategies and even the needs identified will evolve over that period. The Youngstown Market plans a flexible approach to addressing the significant community needs that will allow for adaptation to changes and collaboration with other community agencies.

## Community Served by the Hospital

Mercy Health Youngstown (MHY) is a health system that includes three hospitals, St. Elizabeth Youngstown Hospital, St. Elizabeth Boardman Hospital and St. Joseph Warren Hospital and multiple facilities primarily serving the tri-county area of Mahoning, Trumbull, and Columbiana counties in northeast Ohio. This is the first time MHY has prepared a joint CHNA report. For the reasons below, we believe it makes more sense to define our community as Mahoning, Trumbull, and Columbiana counties in northeast Ohio and prepare this joint CHIP

- MHY functions as one system with three hospitals working to serve the community's needs in the tri-county area.
- Although St. Elizabeth Youngstown Hospital, St. Elizabeth Boardman Hospital, and St. Joseph Warren Hospital are separately licensed, they jointly meet the needs of the tri-county area.
- The hospitals' joint CHNA was done in partnership with Mahoning and Trumbull County Health Partners (MTCHP). These organizations that have provided input all serve residents in the Mahoning Valley.
- Government agencies participating in the hospitals' joint CHNA operate and provide services in the tri-county area.

MHY aims to serve our patients and associates in ways that reflect our mission and core values. Our mission is to extend the compassionate ministry of Jesus by improving the health and well-being of our communities and bringing good help to those in need, especially people who are poor, dying and underserved.

Our values are human dignity, integrity, compassion, stewardship, and service. Each year MHY provides millions of dollars in community benefits. However, the real value of this contribution lies not in dollars but in the commitment of the staff members, physicians, volunteers, board members and other community leaders who work on behalf of MHY, the people who bring our mission and values to life.

St. Elizabeth Youngstown Hospital: Most of the patients reside in Mahoning County, with an additional portion of the population from Trumbull County. Zip codes include 44515, 44505, 44511, 44512, 44509, 44420, 44406, 44502, 44514, 44446, 44425, 44405, 44484, 44507, 44483, 44471, 44504, 44410, 44510, 44460, 44440, 44481, 44506. Data accessed from Sg2 Market Demographics Census.gov July 2021 racial/ ethnic Tri-County (Columbiana, Mahoning, and Trumbull) gives the following data American Indian/Alaska Native 1,162, Asian 3,581, Black/African American 54,128, Multiple Race 13,066, Native Hawaiian/Pacific Islander 185, other 6,569, and White 440,698 totaling 519,389.

St. Elizabeth Boardman Hospital: The majority reside in Mahoning and Columbiana Counties. Zip codes include 44512, 44514, 44406, 44511, 44471, 44515, 44502, 44408, 44460, 44505, 44405, 44509, 44413, 44442, 44507, 44452, 44436, 43920. At SEBH averages about, approximately 75% of patients were from Mahoning County and about 15% from Columbiana County.

St. Joseph Warren Hospital: Most of the patients reside in Trumbull County. Zip codes include 44483, 44485, 44484, 44446, 44410, 44481, 44444, 44430, 44420, 44473, 44470. Data accessed from Sg2 Market Demographics Census.gov July 2021 racial/ ethnic Tri-County (Columbiana, Mahoning, and Trumbull) demographics American Indian/Alaska Native 1,162, Asian 3,581, Black/African American 54,128, Multiple Race 13,066, Native Hawaiian/Pacific Islander 185, other 6,569, and White 440,698 totaling 519,389.

# Our Mission

As a system Mercy Health is dedicated to extending the compassionate ministry of Jesus by improving the health and well-being of our communities and bring good help to those in need, especially people who are poor, dying and underserved.

# Our Vision

Inspired by God's hope for the world, we will be a ministry where associates want to work, clinicians want to practice, people seek wellness and communities thrive.

# Our Values

## Human Dignity

We commit to upholding the sacredness of life and being respectful and inclusive of everyone.

## Integrity

We commit to acting ethically and modeling right relationships in all of our individual and organizational encounters.

## Compassion

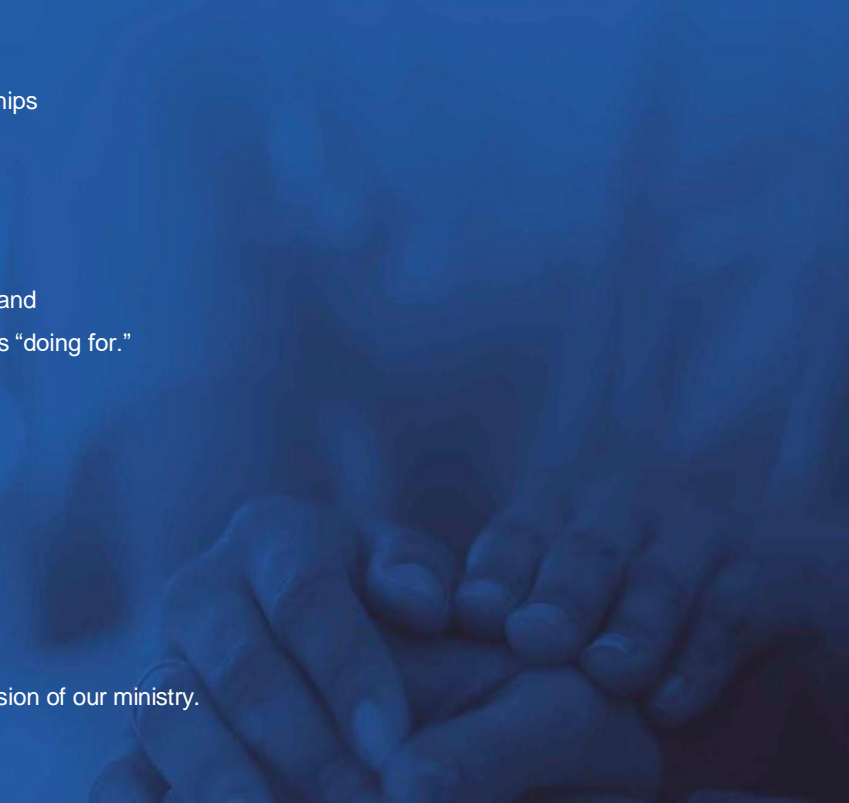
We commit to accompanying those we serve with mercy and tenderness, recognizing that "being with" is as important as "doing for."

## Stewardship

We commit to promoting the responsible use of all human and financial resources, including Earth itself.

## Service

We commit to providing the highest quality in every dimension of our ministry.



# Executive Summary

## Background and Process

The MTCHP team worked from November 2021 to July 2022 to establish an assessment strategy and identify priority populations, collect, and analyze data, present data for discussion to the steering committee and community members, establish priorities, and develop the assessment report. The data collection process included collecting and analyzing primary and secondary data. Primary data is data collected directly from the community and included the Community Health Opinions Survey (CHOS), and the Community Conversation groups. Secondary data is data collected from existing sources; the NCIPH team collected secondary data from federal, state, and local sources such as the Ohio Department of Health and the U.S. Census Bureau. Data walks are presentations of data analysis and trends to the steering committee and community members. These virtual presentations enabled the assessment team to gather real-time feedback from community stakeholders on the data presented.

A two-pronged approach was used to recruit adults in Mahoning and Trumbull counties to participate in the Community Health Opinion Survey (CHOS). The first involved drawing a random sample of 6,000 selected households, 3,000 for each county, with oversampling in census tracts with high social vulnerability index (SVI). Households randomly selected received postcard mailers with a postcard number and a survey link. The random sample was then supplemented with an open-to-the-public convenience survey administered via the same link, which was open for anyone to take even if they did not receive a postcard mailer. The survey link was distributed publicly through 149 organizations and contacts via social media, listservs, businesses, and networks of stakeholders. The survey was approximately 80 questions long and included questions about personal health, access to care and barriers encountered, substance use and other community health issues, and was open for responses from March 2022 to April 2022. A total of 1,761 responses were received, and only 70 responses came from those who received postcard mailers.

An important consideration is that this process was heavily reliant upon the general community survey, given the low response from the random sample. It was critical for the team to evaluate non-response bias and how well the survey respondent demographics align with county demographics. In general, the respondent demographics aligned with demographics of the counties, as the data showed more roughly 85% of respondents identified as non-Hispanic White and 10% identified as Black or African American. While this generally aligns with demographics in Trumbull County, respondent demographics from Mahoning County were lower among Black or African American and among Hispanic or Latino residents. Warren and Youngstown did have a higher percentage of respondents identifying as Black or African American, however.

Eight Community Conversations were held in February and March 2022. Community Conversations were facilitated virtually, while some groups met in person and others all joined via Zoom. Participants were recruited through the networks of the MTCHP and stakeholder team and their constituent organizations. Community Conversations were held primarily in the evening to increase accessibility for community members with daytime commitments. A range of 6 to 18 community members participated in each session.

Conversations were recorded, and field notes were analyzed to identify common themes in each conversation and across groups. The priority populations for the Community Conversations were people experiencing homelessness, Black community members, people living in rural areas, LGBTQIA+ community members, and Latinx community members.

While Community Conversations provide a great deal of insight into the perspectives and lived experiences of community members in Mahoning and Trumbull Counties, these experiences cannot be generalized to represent the entire county.

## Identifying Significant Needs

Throughout the assessment, when data was available, comparisons were made between indicators in Mahoning, Trumbull, and the state of Ohio as well as Allen, Lorain, and Portage Counties. These peer counties were selected due to similarities in demographic characteristics and rural and urban populations. Data were presented to the MTCHP team and community partners in a series of three presentations as part of the prioritization process described in the section below.

In general, the health and well-being of people living in Mahoning and Trumbull Counties is like that of the state and peer counties. Through these comparisons, highlights emerged where health outcomes in Mahoning and Trumbull Counties were trending in positive directions and better than the state or peers. Infant mortality has been declining in recent years and is lower than the state infant mortality rate of 683.2 infant deaths per 100,000 population, with sharp decreases in Mahoning County (from 985.4 per 100,000 in 2019 to 646.0 per 100,000 in 2021) and Trumbull County (from 1,195.6 per 100,000 in 2017 to 485.0 per 100,000 in 2021). The number of mental health providers has risen considerably in recent years across Ohio between 2016 and 2020, with the providers in Mahoning County climbing from 190.2 providers per 100,000 population to 371.7 per 100,000 and from 111.1 to 167.7 per 100,000 in Trumbull County.

There are, however, concerning trends and disparities in health outcomes and community conditions that reinforce the need for further attention and investment in public health. After considerable declines in the percentage of adults aged 18 to 64 who are uninsured between 2012 and 2016, the percentage of community members without health insurance has increased in both counties to 9.2% and 10.2% in Mahoning and Trumbull Counties, respectively, which is higher than the peer counties. Both Mahoning and Trumbull Counties had mortality rates higher than the state and peer counties in 2021, even after adjustments for age, with rates of 1,052.8 deaths per 100,000 population in Mahoning County and 1,093.9 per 100,000 in Trumbull County. These age-adjusted mortality rates were considerably higher among Black or African American community members, with rates of 1,580 deaths per 100,000 in Mahoning County and 1,384 per 100,000 in Trumbull County. Throughout this CHNA, health inequities and disparities are highlighted to the extent possible based on available data to inform all future community health improvement initiatives.

Data collected from primary and secondary sources were analyzed for this assessment and summarized in eleven data categories, with the community priority areas highlighted. While summarizing the data in categories supports understanding and usability of this report, it is with the recognition that the health outcomes and conditions that support or impede health are complex and interrelated. Based on the community identified needs, there are broader categories of interest to improve community health. Those categories and corresponding needs were identified as; access to care, access to information, access to healthy food & physical activity, chronic disease, community safety, education, infectious disease, mental health, substance use, community conditions, discrimination, and reproductive & child health.



# Implementation Plan

Mercy Health Youngstown (MHY): St. Elizabeth Youngstown Hospital, St. Elizabeth Boardman Hospital and St. Joseph Warren Hospital are committed to addressing the prioritized significant health needs of the community through the strategies described in this Implementation Plan.

## Prioritized Significant Health Needs

The table below lists the prioritized significant health needs that were identified through the CHNA and specifies which needs Mercy Health Youngstown (MHY)/St. Elizabeth Youngstown Hospital, St. Elizabeth Boardman Hospital and St. Joseph Warren Hospital will address.

Prioritized Significant Health Need	Hospital Addressing Need (Y/N)		
	St. Elizabeth Youngstown Hospital	St. Elizabeth Boardman Hospital	St. Joseph Warren Hospital
<b>Mental Health and Substance Abuse</b>	Yes	Yes	Yes
<b>Community Conditions &amp; Safety/Crime</b> (includes chronic disease, infectious disease, reproductive & child health, education, and discrimination)	Yes	Yes	Yes
<b>Access to Care</b> (including access to health care, access to information, access to healthy food & access to physical activity)	Yes	Yes	Yes

The Youngstown Market will address each need with regional strategies that have various activation dates throughout the three-year implementation life cycle. Some of the strategies will take place in communities that are geographically associated/tagged to a specific hospital.

## Prioritized Significant Social Determinant of Health Needs Implementation Strategies: Impact Health and Wellbeing

### Mental Health & Substance Abuse

#### Description

As detailed in the hospital's Community Health Needs Assessment Report: Meeting the need for mental health and addiction services is a significant need in our community. The number of inpatient behavioral health beds is inadequate to meet the needs of the community, which can require residents to travel out of the area to receive care. The number of psychiatric providers and prescribers is inadequate to meet the needs of the community and there are not enough residential service providers. Internal navigation of existing mental health resources for individuals needing support. Low/improper utilization of existing mental health services. Additionally, our CHNA showed that:

- **Mental Health** ranked the #1 priority in community voting, both counties
- Mental health ranked #1 in stakeholder prioritization voting
- Across Community Conversations, mental health was identified as a concern and area of need
- Almost 40% of Community Health Opinion Survey respondents reported either they or a member of their household experienced feeling down or sad for more than 2 weeks in the past 6 months
- National indicators of mental health, particularly youth mental health, suggest mental health may have been declining in past two years
- **Substance use** ranked as 5<sup>th</sup> overall priority in community voting, but #2 among Trumbull County respondents
- Natural alignment of substance use and mental health because of overlapping root causes, comorbidities, and integration of service providers

#### Goal

A healthy community reducing the incidences of those reporting mental health & substance use issues. A community where there are no barriers to accessing and utilizing affordable, culturally relevant, holistic care when and where and how it is needed.

#### Expected impact

To reduce the use, deaths, and impact of opioid use in the community  
To increase knowledge and education of behavioral health resources and tools  
To increase positive behavioral health outcomes  
To increase the provider referrals and use of resources

#### Targeted populations

Mercy Health patients and clients who are diagnosed with mental health or substance abuse, minority and underserved communities and at-risk pregnant mothers

#### Strategies

##### Strategy 1

Leverage community resources to implement evidence-based mental health & substance use preventative practices. Over the long term, reduce fatalities related to overdose & suicide, and build competent mental health assessments in communities to strengthen resilience by educating primary care providers on screening tools and evidence-based treatment for mental health and addiction to combat substance use.

### **Strategic measures**

- Year 1 - Collect baseline data for assessments being done at primary care offices, track usage of in-person assessment versus telehealth.
- Year 2 - Increase those linked to services by 5%. Collect baseline of referrals internally and how many first appointments are completed.
- Year 3 - Increase those linked to services by 5%. Increase number of completed first appointments with internal providers by 5%.

### **Strategy 2**

Continue to implement training programs to reduce unnecessary hospitalizations and to improve outcomes of crisis situations for patients with mental illness. Require BHI, ED, and Protective Services to be CPI certified/trained.

### **Strategic measures**

- Year 1 - Train all BHI, ED, Protective Services (target 75% and stretch 90%) of the previous year.
- Year 2 - All those trained in 2022 to complete 2-hour refresher within that first year after initial training; provide full training for any new associates in those identified area.
- Year 3 - all those trained in 2023 to complete 2-hour refresher within that first year after initial training; provide full training for any new associates in those identified areas and continue annual rotation as described.

### **Strategy 3**

Continue participation in a mobilized dedicated team to address utilization and resource navigation. Promote the use of 211, 988, as well as other a community resources to remove barriers to informational support services.

### **Strategic measures**

- Year 1 - Identify and update list of resources and services available. Promote and disseminate materials for Mercy programs and services as well as related community partners. 2023 opening of new Mercy facility to provide increase access to mental health programs, counseling services and pregnancy addiction program.
- Year 2 - Increase those linked to services by 5%. Collect baseline of referrals internally and how many first appointments are completed. Increase number of participants enrolled in the pregnancy addiction program by 5%.
- Year 3 - Increase those linked to services by 5%. Increase number of completed first appointments with internal providers by 5%. Increase number of participants that complete the pregnancy addiction program by 5%.

### **Strategy 4**

Mercy Health Youngstown and LifePoint Health have agreed to a joint venture to own and operate a new behavioral health hospital in the Youngstown market. The new behavioral health hospital will have approximately 72 inpatient beds. The hospital will provide inpatient services for geriatric and adults struggling with depression, anxiety, suicidal ideation, substance use disorder and other mental health issues.

### **Strategic measures**

- Year 1 - Enter agreement to a joint venture between Mercy Health Youngstown and LifePoint Hospital to increase the number of inpatient beds at Mercy Health Youngstown to treat behavioral health and substance abuse issues. Identify location for the new facility and begin construction.
- Year 2 - Open new hospital to begin accepting patients for treatment of behavioral and substance abuse issues. Establish baseline of those receiving treatment.
- Year 3 - Increase the number of those receiving inpatient treatment by 5%; reduce the number of overdoses and deaths by suicide.

### **Community collaborations**

- Trauma Informed Care committees in Mahoning and Trumbull Counties
- Behavioral health providers in the community
- Primary care providers

### **Community resources available**

The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

- Alta Behavioral Healthcare
- Behavioral Medicine and Wellness at Salem Regional Medical Center
- Belmont Pines Hospital
- Coleman Professional Services
- Community Support Network
- COMPASS Family and Community Services
- Counseling Center of Columbiana
- East Liverpool City Hospital
- Family Recovery Center
- First Step Recovery
- Generations Behavioral Health
- Glenbeigh
- Mahoning County Mental Health and Recovery Board
- Mahoning County Public Health
- Mercy Health Behavioral Health
- Mercy Health Foundation Mahoning Valley
- Mercy Health Regional Tobacco Treatment Center
- Meridian Healthcare
- Neil Kennedy Recovery Center
- New Day Recovery
- New Start Treatment Center
- On Demand Counseling and Drug Testing
- PsyCare
- Serenity Center
- St. Elizabeth Boardman Hospital
- St. Elizabeth Youngstown Hospital
- St. Joseph Warren Hospital

### Community resources available (continued)

- TRAVCO Behavioral Health
- Trumbull County Combined Health District
- Trumbull County Mental Health and Recovery Board
- Trumbull Regional Medical Center
- Valley Counseling
- Veterans Clinic
- Warren City Health District
- Youngstown City Health District

## Prioritized Significant Social Health Needs Implementation Strategies

### Community Conditions & Safety & Crime

#### Description

As detailed in the hospital's Community Health Needs Assessment Report: Among Community Health Opinion Survey respondents, approximately 90% of respondents in both Mahoning and Trumbull counties said they feel safe in their neighborhood. Within Trumbull County, 82.1% of respondents who live in the city of Warren also reported feeling safe in their neighborhood; however, within Mahoning County, only 71.4% of respondents in Youngstown reported feeling safe where they live. Safety was expressed as a major concern across several conversations. Additionally, our CHNA showed that:

- **Community Conditions** ranked as the #4 priority among respondents who identify as Black/African American or Hispanic/Latino in community voting
- Recognition by stakeholder group of how community conditions (housing, transportation, economic opportunity) drive health outcomes and may be root causes of many health disparities
- Children under 5 face the highest rates of poverty at 34.6% in Mahoning and 36.2% in Trumbull; this is a higher percentage than in the state and peer counties
- **Community Safety** ranked at #2 priority in community voting overall, and #1 among Black/African American respondents
- Community Safety ranked #2 in stakeholder prioritization voting
- Community safety was raised as a major concern in Community Conversations, highlighting recent increase in crimes, particularly homicides; unsafe conditions for LGBTQ+ community members is a barrier to services and mental health

#### Goal

A thriving region where organizations and individuals work together in trusting, community-driven relationships to create a safe, healthy, prosperous, and inclusive environment.

### **Expected impact**

To have patients/clients feel physically safe and free from harm

### **Targeted populations**

Patients/clients, employees, and visitors of Mercy Health Youngstown Market entities

### **Strategies**

#### **Strategy 1**

Strengthen at-risk identification by engaging and supporting safety projects and initiatives.

#### **Strategic measures**

- Year 1 - Collaborate with hospital leaders and safety services to identify an effective document and lock box placement for patients, visitors, and employees to use to anonymously report crimes occurring in the community that can then be collected by safety services and turned over to police officials.
- Year 2 - Increase those making reports by 5%. Identifying baseline of reports the first year.
- Year 3 - Increase those reports by 5% of year 2.

#### **Strategy 2**

Improve existing green spaces and provide new green spaces in the community and on Mercy Health Youngstown grounds to promote engagement.

#### **Strategic measures**

- Year 1 - Collaborate with hospital leaders to identify eligible spaces to green. Seek funding sources to make improvements and enhance green spaces that are inviting, usable and accessible to residents/clients, visitors, and staff.
- Year 2 - Work on enhancing and expanding spaces through outside funders and partnerships.
- Year 3 - Continue to identify areas that can be improved and maintain green grounds.

#### **Strategy 3**

Maintain a safe working/treatment environment for patients, visitors, and staff by having staff learn methods of de-escalation by implementing training programs to reduce and improve outcomes of crisis situations. Require BHI, ED, and Protective Services to be CPI certified/trained. Target is to have 75% of all required associates trained each year and 90% for a stretch goal. The reason the stretch goal is not 100% is because of LOA's etc.

#### **Strategic measures**

- Year 1 -Train all BHI, ED, Protective Services (target 75% and stretch 90%)
- Year 2 - All trained in 2022 to complete 2-hour refresher within that first year after initial training; provide full training for any new associates in those identified area
- Year 3 - all trained in 2023 to complete 2-hour refresher within that first year after initial training; provide full training for any new associates in those identified areas and continue annual rotation as described.

### Community collaborations

- Police and City Officials
- Mercy Health Safety Services
- Mercy Health Leadership
- Mercy Health Foundations
- other local foundations

### Community resources available

The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

- Trumbull Neighborhood Partnership
- Youngstown Neighborhood Development Corporation
- Healthy Community Partnership

## Prioritized Significant Clinical Health Needs Implementation Strategies

### Access to Care (includes access to health care, access to information and resources)

#### Description

As detailed in the hospital's Community Health Needs Assessment Report: Access to healthcare is a key determinant of a community's health. Healthcare serves an important role in preventing illness and providing diagnosis and treatment. A community's access to healthcare can be challenged by barriers such as lack of health insurance, high cost of care, few providers, limited transportation to healthcare facilities, a lack of access to information, health foods, and physical activity. Additionally, our CHNA showed that:

- **Access to Care** ranked as #3 in community voting and #2 among respondents who identify as Hispanic/Latino
- Access to Care ranked #3 in stakeholder prioritization voting
- Community Conversations highlighted access to care as an area of concern and source of inequities; limited availability of appointments, transportation, cost of care, and lack of adequate care for LGBTQ+ community members were cited as major barriers  
Community Health Opinion Survey respondents who reported an income below \$50,000 experienced more problems seeking care in the past year than higher-income respondents

## Goal

A community that meets the needs of everyone with services that are high-quality, accessible, effective, and well-communicated for all and delivered in an equitable way by addressing barriers to care.

## Expected impact

- To improve the health outcomes of residents, patients/clients, and community members in the Youngstown Market.
- Increase health screenings, primary care services, & maternal health programs for underserved areas and populations.
- Reduce health disparities for minority and low-income populations
- Improve access to health for at risk populations (African American, low income, Hispanic/Latino, LGBTQIA+, older adult).

## Targeted populations

Residents and patients/clients in the Youngstown Market particularly those who are minority, underserved, or members of at-risk populations/communities.

## Strategies

### Strategy 1

Mercy Community Health will provide primary healthcare, including preventative screenings, to at-risk populations via the Mobile Medical Clinic.

### Strategic measures

- Year 1 - Secure grant funding and make improvements to mobile unit. Train behavioral health nurse. Launch program in Feb/March.
- Year 2 - Mobile Clinic is deployed on a rotating basis to locations on the Eastside. Staff will include a behavioral health nurse, nurse practitioner, Resident, Resident Instructor, RN, and community health worker. Referrals will be made for patients whose needs exceed the scope of the clinic.
- Year 3 - Increase the number of patients/clients seen by Mobile Clinic by 5% and increase number of referrals to Family Practice/Resident Practice using the referrals in year two as a baseline.

### Strategy 2

Mercy Health will open new clinics in Cornersburg (maternal health, family support) and on the North Side of Youngstown focused on primary care, maternal health, and behavioral health services. The number of clients served will increase by 5% each consecutive year, with the baseline established in year one.

### Strategic measures

- Year 1 - Cornersburg Nurturing Families Clinic and Belmont Clinic to open in 2023. Establish baseline enrollment at both Centering sites.
- Year 2 – Increase the number of enrollments by 5% at each of the Centering sites.
- Year 3 - Increase the number of enrollment by 5% and the number of individuals completing Centering programs and other maternal/family support programs at each site.



**Community collaborations**

- Mercy Health Youngstown
- Youngstown City Health Department/Neighborhood Community Zones
- Price Memorial AME Church
- OCHHA
- Rockford Village
- Spanish Evangelical

**Community resources available**

The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

- Mercy Health Youngstown Community Health
- Mercy Health Youngstown Behavioral Health
- Youngstown City Health Department/ Neighborhood Community Zones
- Mahoning Valley Pathways HUB

# Board Approval

The Youngstown Market 2023 Community Health Improvement Plan was approved by the Youngstown Market Board of Directors on April 20, 2023.

Board Signature: Sister Mildred Ely, H.M.

Date: April 20, 23

For further information or to obtain a hard copy of this CHIP please contact:  
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Mercy Health CHIP Website: <https://www.mercy.com/about-us/mission/giving-back/community-health-needs-assessment>