

2013 Community Health Needs Assessment – Cleveland Clinic Main Campus

Founded in 1921, Cleveland Clinic is an academic medical center offering patient care services supported by research and education in a nonprofit group practice setting. More than 3,000 Cleveland Clinic staff physicians and scientists in 120 medical specialties care for more than 5 million patients across the system. Patients come to Cleveland Clinic locally, from all 50 states and from more than 132 nations around the world.

Cleveland Clinic's main campus, located in midtown Cleveland, includes a hospital with 1,288 staffed beds; an outpatient clinic; a medical school; a research institute; 26 specialty institutes; and supporting labs and facilities in 46 buildings on 167 acres. Cleveland Clinic patients represent the highest CMS case-mix index in the nation. Comprehensive services include heart care, digestive disease, nephrology and urology, cancer, neurology, diabetes and endocrinology, otolaryngology (ENT), rheumatology, gynecology, orthopaedics and pulmonology.

Cleveland Clinic's health system in Northeast Ohio consists of an academic medical center, two children's hospitals and eight community hospitals. Each hospital is dedicated to the communities it serves. We verify the health needs of our communities by performing periodic community health needs assessments (CHNAs). These formal assessments are analyzed using widely accepted criteria to determine and measure the health needs of a specific community. In accordance with Internal Revenue Code Section 501(r)(3), each hospital has conducted its own community health needs assessment.

Upon review of all of the community health needs assessments for all of our Northeast Ohio facilities, Cleveland Clinic has identified five community health needs that are present in the majority of hospital communities we serve. They are: Chronic Disease, Wellness, Access to Affordable Health Care, Access to Community Services, and Economic and Community Development.

Cleveland Clinic Main Campus identified all five needs in its CHNA.

We are pleased to share the following CHNA report with you.



**CLEVELAND CLINIC MAIN CAMPUS
COMMUNITY HEALTH
NEEDS ASSESSMENT**



TABLE OF CONTENTS

	<u>Page</u>
<input type="checkbox"/> INTRODUCTION	1
<input type="checkbox"/> PROJECT MISSION	5
<input type="checkbox"/> OBJECTIVES	6
<input type="checkbox"/> COMMUNITY DEFINITION	7
<input type="checkbox"/> SUMMARY	12
<input type="checkbox"/> METHODOLOGY	13
<input type="checkbox"/> PRIORITIZATION CRITERIA	18
<input type="checkbox"/> KEY COMMUNITY HEALTH NEEDS	19
<input type="checkbox"/> APPENDICES	30
<input type="checkbox"/> Appendix A: Cleveland Clinic Main Campus Community Secondary Data Profile	A-1
<input type="checkbox"/> Appendix B: Primary Data Resource Organizations	B-1
<input type="checkbox"/> Appendix C: Cleveland Clinic Main Campus Interview Summary – Key Stakeholder Group	C-1
<input type="checkbox"/> Appendix D: Cleveland Clinic Main Campus Focus Group Summary – Adult Residents of Communities Adjacent to Cleveland Clinic Main Campus Group	D-1
<input type="checkbox"/> Appendix E: Cleveland Clinic Main Campus Focus Group Summary – Family Health Center Physicians Group	E-1
<input type="checkbox"/> Appendix F: Cleveland Clinic Main Campus Focus Group Summary – National Community Physicians Group	F-1
<input type="checkbox"/> Appendix G: Inventory of Community Resources	G-1

INTRODUCTION

CHNA Purpose

In response to its community commitment, the Cleveland Clinic engaged Tripp Umbach to facilitate a comprehensive Community Health Needs Assessment (“CHNA”) for the Cleveland Clinic Main Campus (the “Main Campus”). The community health needs assessment was conducted between October 2011 and April 2012.

During the community health needs assessment process, the Main Campus collaborated with other Cleveland Clinic Health System hospitals:

- Cleveland Clinic Children’s Hospital
- Cleveland Clinic Children's Hospital for Rehabilitation
- Euclid Hospital
- Fairview Hospital
- Hillcrest Hospital
- Lakewood Hospital
- Lutheran Hospital
- Marymount Hospital
- Medina Hospital
- South Pointe Hospital

This report fulfills the requirements of a new federal statute established by the Patient Protection and Affordable Care Act (“PPACA”) requiring that non-profit hospitals conduct community health needs assessments every three years. This Main Campus community health needs assessment, with project management and consultation by Tripp Umbach, includes extensive input from persons representing the broad interests of the communities served by the hospital facility, including those with special knowledge of public health issues. Tripp Umbach worked closely with senior leadership from the Main Campus to accomplish the assessment. Separate reports were written for each collaborating hospital listed above.

Background

The Cleveland Clinic is a non-profit multi-specialty academic medical center integrating outpatient clinical and hospital care with research and education. It is in a unique position, along with other national academic medical centers, to assess the health needs of both its communities and the public at large, and serve as a health resource for national and international patients.

The Main Campus is located in the City of Cleveland and includes a tertiary care hospital; a children's hospital; a medical school; a research institute; an outpatient clinic; 26 specialty institutes including for heart care, digestive disease, cancer, and eye care; and supporting labs and facilities on a 162 acre campus. The Cleveland Clinic Health System operates nine community hospitals and 18 family health centers, including eight ambulatory surgery centers, in Northeast Ohio.

The Cleveland Clinic was established in 1921 with the same mission that continues today:

***Better care for the sick, investigation of their problems
and education of those who serve.***

Consistent with its tripartite mission, Cleveland Clinic's activities are patient care provided on a charitable basis, medical research, and education of both medical professionals and the community.

Patient Care

Cleveland Clinic's services are provided via patient-oriented institutes, which are structured on the basis of organ system or disease. The institutes facilitate a multidisciplinary approach and are designed to enhance convenience for patients and the exchange of knowledge, research and educational collaboration for better patient outcomes. Some of the Institutes include: Cole Eye, Digestive Disease, Endocrinology & Metabolism, Glickman Urological & Kidney, Head & Neck, Miller Family Heart & Vascular, Neurological, Ob/Gyn & Women's Health, Orthopaedic & Rheumatology, Pediatric & Children's Hospital, Respiratory, Taussig Cancer and Wellness.

Cleveland Clinic is ranked 4th among the nation's nearly 5000 hospitals.¹ Cleveland Clinic has been recognized for its quality of care and was ranked America's number one center for cardiac care for the 17th year in a row, and its gastroenterology, kidney disorders and urology programs were ranked second in the nation. Thirteen specialties earned top 10 rankings.

Cleveland Clinic has one of the highest Medicare case mixes of hospitals with more than 500 beds, an indicator of the acuity of care provided. It provides specialized care in more than 120

¹ *U.S. News & World Report's Best Hospitals 2011*. Data reprinted with permission from *U.S. News & World Report*.

medical specialties and subspecialties, including to patients transferred from nearly every state and twenty countries due to the unavailability of such high level care in their local community.

Research

Cleveland Clinic's mission includes conducting research to advance biomedical science and improve patient care provided here and across the world, to prevent disease and to find cures for medical issues that impact us all. Cleveland Clinic's Lerner Research Institute ("LRI") is home to a complete spectrum of laboratory-, translational-, and clinical-based research.

LRI is one of the leading NIH-funded research institutes in the United States and has made numerous advances in the diagnosis and treatment of complex medical problems. Scientists and their teams are pursuing a wide range of biomedical questions at LRI, including those related to cardiovascular, cancer, neurological, musculoskeletal, and metabolic diseases, to improve the health status of patients and residents of the Cleveland Clinic's communities and the public at large.

LRI has more than 150 faculty-level scientists organized in the following departments: Biomedical Engineering, Cancer Biology, Cell Biology, Genomic Medicine, Immunology, Molecular Cardiology, Molecular Genetics, Neurosciences, Pathobiology, Quantitative Health Sciences, and Stem Cell Biology and Regenerative Medicine.

In addition to basic pre-clinical research, the Cleveland Clinic and its staff physicians participate or are primary investigators in many clinical trials. In 2011, Cleveland Clinic was involved in approximately 1000 clinical trials. The ongoing collaboration between physician investigators and study volunteers is central to testing the safety and effectiveness of drugs and medical procedures and helps to set the standards for patient care. Research at Cleveland Clinic is funded by external sources, such as federal grants, but is also substantially supported by the Clinic's own internal resources. In 2011, Cleveland Clinic spent \$64.9 million dollars on research.

The Cleveland Clinic's research activities are intended to improve patient care and the health of the public at large, by providing the latest advances in medicine directly to patients and by refining the practice of medicine through the development and promulgation of new techniques, devices and treatment protocols.

Education

The Cleveland Clinic model of medicine, as developed by its founders, is one that integrates research and education in medical services provided to patients. Thus Cleveland Clinic physicians have medical residents following them throughout their care, teaching in patient appointments and at the bedside. Cleveland Clinic operates one of the largest graduate medical education programs in the Midwest and one of the largest programs in the country. Physicians

and fellows from other parts of the world also come to the Cleveland Clinic for specialized training and take back to their home countries many of the latest techniques in patient care.

The Cleveland Clinic operates a medical school and related research institute. The primary focus of Cleveland Clinic Lerner College of Medicine of Case Western Reserve University (the “Lerner College of Medicine”) is the teaching and training of medical students who have a particular interest in research. Many Cleveland Clinic physicians serve as faculty for the Lerner College of Medicine, furthering the integration of clinical care with research and education. The Lerner College of Medicine currently provides all students with full tuition scholarships.

In addition to training this nation’s future doctors, Cleveland Clinic sponsors a wide range of high quality medical education training through its Education Institute including accredited training programs for nurses and allied health professionals.

Cleveland Clinic has one of the largest Continuing Medical Education (“CME”) programs in the country hosting close to 1500 CME activities in 2011, more than double its CME activities in 2009.

Cleveland Clinic is also committed to educating the general public on medical conditions and their treatment, prevention and wellness programs. The Cleveland Clinic’s Education Institute has programs for patients and their families. It provides health information to patients, visitors and employees through its Patient and Family Health and Education Center, health talks, and the Cleveland Clinic website, which provides nearly 5000 articles, videos and resources on various health and health management topics.

Overall, the Cleveland Clinic spent \$196.2 million dollars in 2011 on education through its subsidy of medical education programs. These educational activities ensure residents and patients in all of the Cleveland Clinic’s communities are receiving the highest standard of medical care and have trained health professionals to care for them in the future.

PROJECT MISSION

The mission of the CHNA completed for the Cleveland Clinic Main Campus is to understand and plan for the current and future health needs of patients and residents in all the communities served by the Cleveland Clinic Main Campus, both by geography and by mission. The goal of the CHNA process is to identify the health needs of the communities served by the hospital, while developing a deeper understanding of community needs and identifying community health priorities. Important to the success of the community needs assessment process was meaningful engagement and input from a broad cross-section of organizations and individuals who represent the local, regional, state and national communities.

OBJECTIVES

The objective of this assessment is to analyze traditional health-related indicators and social, demographic, economic and environmental factors of the local, regional, state and national communities. Because the Cleveland Clinic Main Campus is a nationally recognized academic medical center, this assessment also addresses how medical education and research relate to community health needs on a local, regional, state and national basis. The overall CHNA objectives are to:

- Obtain information on population health status, as well as socio-economic and environmental factors;
- Assure that community members, including under-represented residents, were included in the needs assessment process;
- Assure that local, regional, state, and national healthcare stakeholders were included in the needs assessment process;
- Identify key community health needs in the hospital's local community, as well as in a seven-county region in Northeast Ohio, the state of Ohio and the nation;
- Provide an inventory of available resources in the local, regional, state and national communities that may provide programs and services to meet such needs; and
- Develop a CHNA document as required by PPACA.

COMMUNITY DEFINITION

The Cleveland Clinic was established in 1921 with the same mission that continues today: Better care for the sick, investigation of their problems and education of those who serve. Cleveland Clinic's primary activities are patient care provided on a charitable basis, medical research, and education of both medical professionals and the community. Cleveland Clinic serves multiple communities, defined by mission and geography.

The three communities the Cleveland Clinic serves defined by mission are: (1) various patient care communities; (2) the public at large that benefits from medical research; and (3) the public at large that benefits from medical education.

PATIENT CARE

Cleveland Clinic strives to provide compassionate, high quality healthcare to all who need it, and supports programs and initiatives that improve the health and well-being of each of the communities it serves. Cleveland Clinic is organized into patient-centered institutes, which are structured by single diseases or organ systems (e.g., Heart & Vascular Institute, Neurological Institute). Each institute combines medical and surgical services at the same location to improve patient care and experience. Cleveland Clinic provides medical care to patients across Cleveland, Northeast Ohio and the nation.

Geography

Cleveland Clinic provides a wide range of services from traditional, primary care to highly specialized care to patients in its local communities, across the nation, and around the world. The Cleveland Clinic treats some of the most diverse and clinically complex cases providing care in more than 120 medical specialties and subspecialties. Cleveland Clinic provides complex specialty care to patients residing in a geographic area encompassing one quarter of the State of Ohio and to patients transferred from nearly every state and twenty countries due to the unavailability of such high level care in their local community. The broad geographic area that comprises Cleveland Clinic's service area is reflected in the fact that 75% of all inpatients in 2011 visited from a 21 county area in Northeast Ohio.

The communities the Cleveland Clinic services in its United States patient care activities are: (1) Local² and Secondary Local³ neighborhoods; (2) the Seven-County Region; (3) the state and (4) nation.

² The local community is comprised of the 10 immediately surrounding zip codes surrounding the Main Campus: 44127, 44115, 44114, 44104, 44103, 44112, 44108, 44106, 44120, and 44118.

³ Approximately an additional 7.1% of Cleveland Clinic inpatients reside in eight zip codes surrounding the immediate 10 zip code local community: 44110, 44117, 44121, 44122, 44128, 44105, 44109 and 44113.

These communities are based on the geographic residence of Cleveland Clinic inpatients. The following tables and charts show from what geographic areas Cleveland Clinic draws its inpatient population. The percentages shown below reflect Cleveland Clinic inpatient discharges for patients residing in the respective communities divided by total Cleveland Clinic discharges in 2011.

Table 1: Cleveland Clinic’s Inpatient Discharges by Geographic Community – 2011

<u>Community</u>	<u>Percent of Cleveland Clinic’s Total Inpatient Discharges</u>
Local	11.1%
Secondary Local	18.4%
Seven-County Region	56.6%
Northeast Ohio (21 county region)	74.4%

Figure 1: Cleveland Clinic Local Community Inpatient Discharges 2011

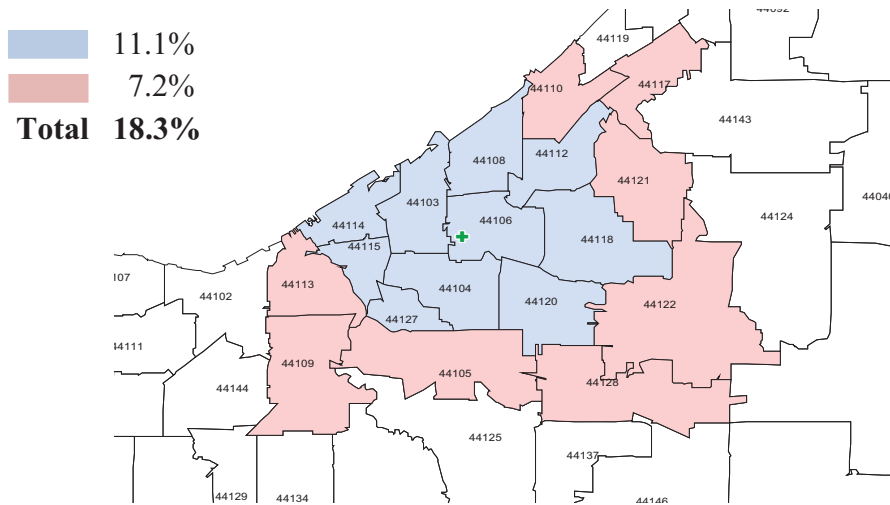
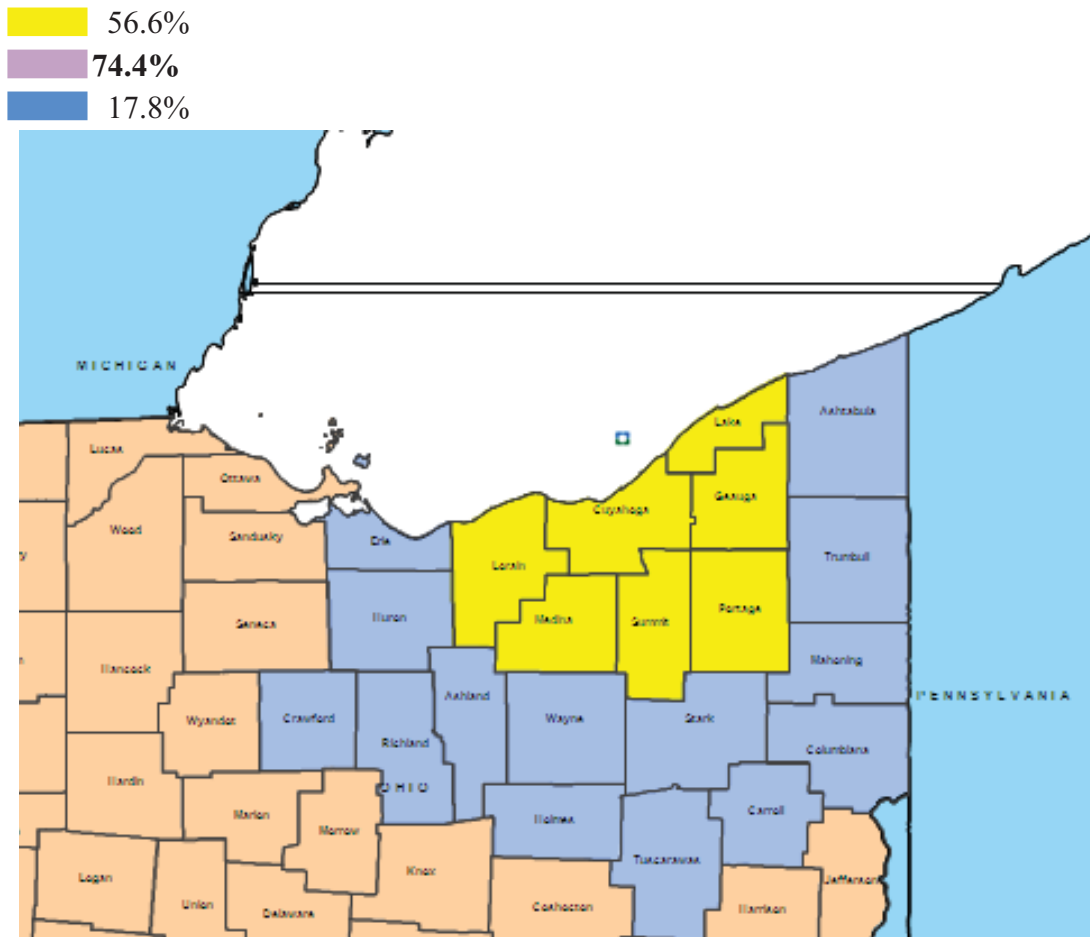


Figure 2: Regional/State Inpatient Discharges 2011



Delivery of Patient Care

Cleveland Clinic is the second largest provider of care in the local community providing nearly 16% of all inpatient care for that community. Six Cleveland Clinic hospitals⁴ are in the Top 10 providing, with the Cleveland Clinic, a total of 38.1% of all inpatient care for that community.

In addition, seven Cleveland Clinic hospitals⁵ are in the Top 10 providers of health care for the Secondary Local community providing a total of 47.1% of all inpatient care for that community. The percentages shown below reflect Cleveland Clinic or its affiliates inpatient discharges for patients resident of the respective communities divided by all hospital discharges recorded in 2011 for residents of those communities.

Table 2: Cleveland Clinic's Share of All Hospital Inpatient Discharges by Community -- 2011

<u>Community</u>	<u>Cleveland Clinic</u>	<u>Other Cleveland Clinic Hospitals in the Top 10</u>	<u>Total for the Cleveland Clinic Health System</u>
Local	15.8%	22.3%	38.1%
Secondary Local	9.4%	37.7%	47.1%
Cuyahoga County ⁶	9.7%	18.0%	27.7%
Other Six Counties in the Seven-County Region	5.4%	6.8%	18.2%
Northeast Ohio (21 county region)	6.3%	8.0%	14.3%

⁴ Cleveland Clinic, Huron, Hillcrest, South Pointe, Marymount and Euclid Hospitals.

⁵ Cleveland Clinic, Huron, Hillcrest, South Pointe, Marymount, Lutheran and Euclid Hospitals.

⁶ Cleveland Clinic Hospitals in Top 10 for County Inpatient Discharges: Cleveland Clinic, Fairview, and Hillcrest

Local Neighborhoods: Cleveland Clinic serves its Local Community in the 10 zip codes surrounding the Main Campus. The Cleveland Clinic main campus academic medical center is the hospital for this local community and provides both traditional and highly specialized hospital care.

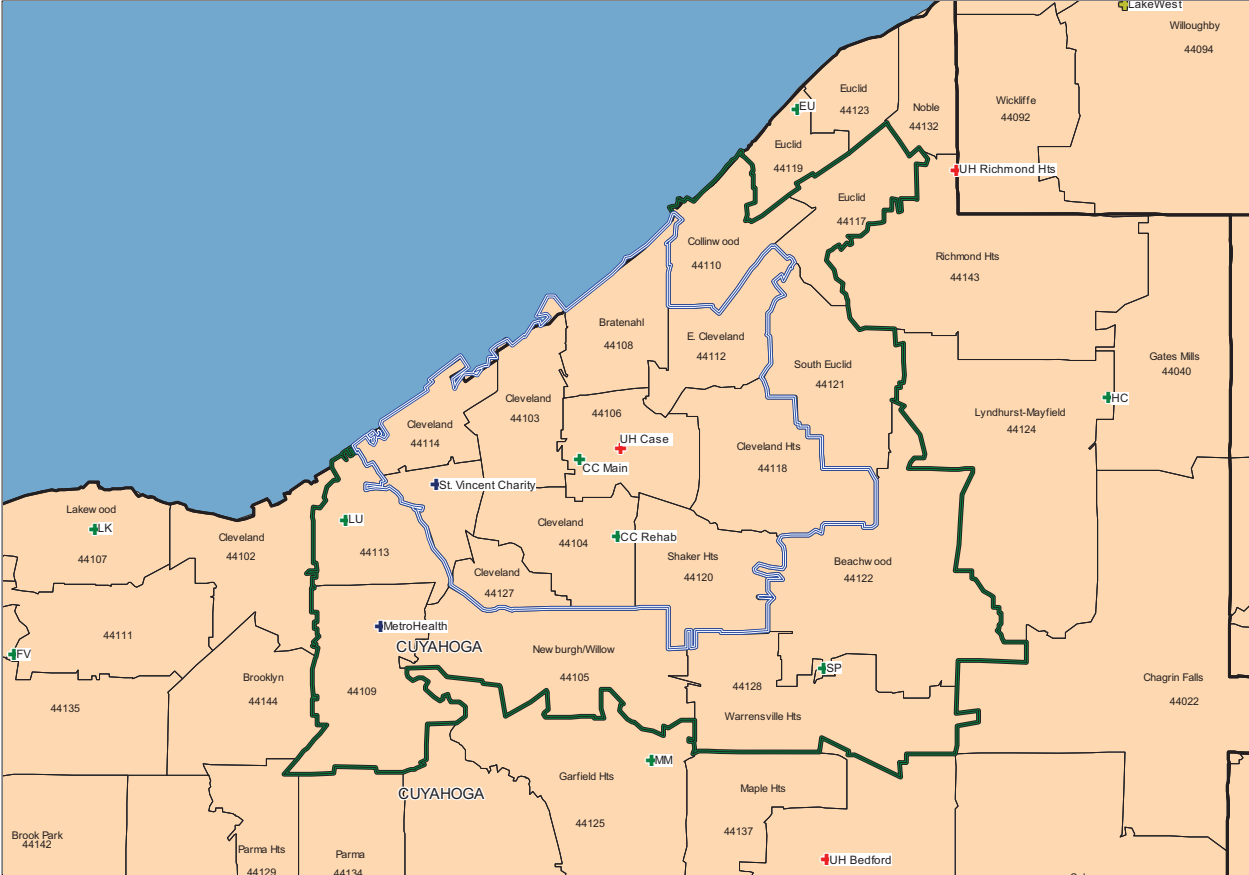
- There is a significantly higher African American population in the local community (72.2%) than the regional community (17.3%) and Ohio (11.8%).
- Per capita and median household income levels are lower in the local community than those in the regional community and Ohio.
- Over a quarter of the residents in the local community are uninsured (27.3%).
- The unemployment rate in the local community (17.4%) is much higher than Ohio (7%) and the nation (approximately 9%).⁷

Table 3: Local Neighborhoods

44127	Slavic Village	Cuyahoga
44115	Downtown Cleveland	Cuyahoga
44114	Downtown Cleveland	Cuyahoga
44104	Buckeye-Woodland Hills	Cuyahoga
44103	Hough-Fairfax	Cuyahoga
44112	East Cleveland	Cuyahoga
44108	Bratenahl	Cuyahoga
44106	University Circle	Cuyahoga
44120	Shaker Heights	Cuyahoga
44118	Cleveland Heights	Cuyahoga

⁷ Unemployment statistics as of March 2011

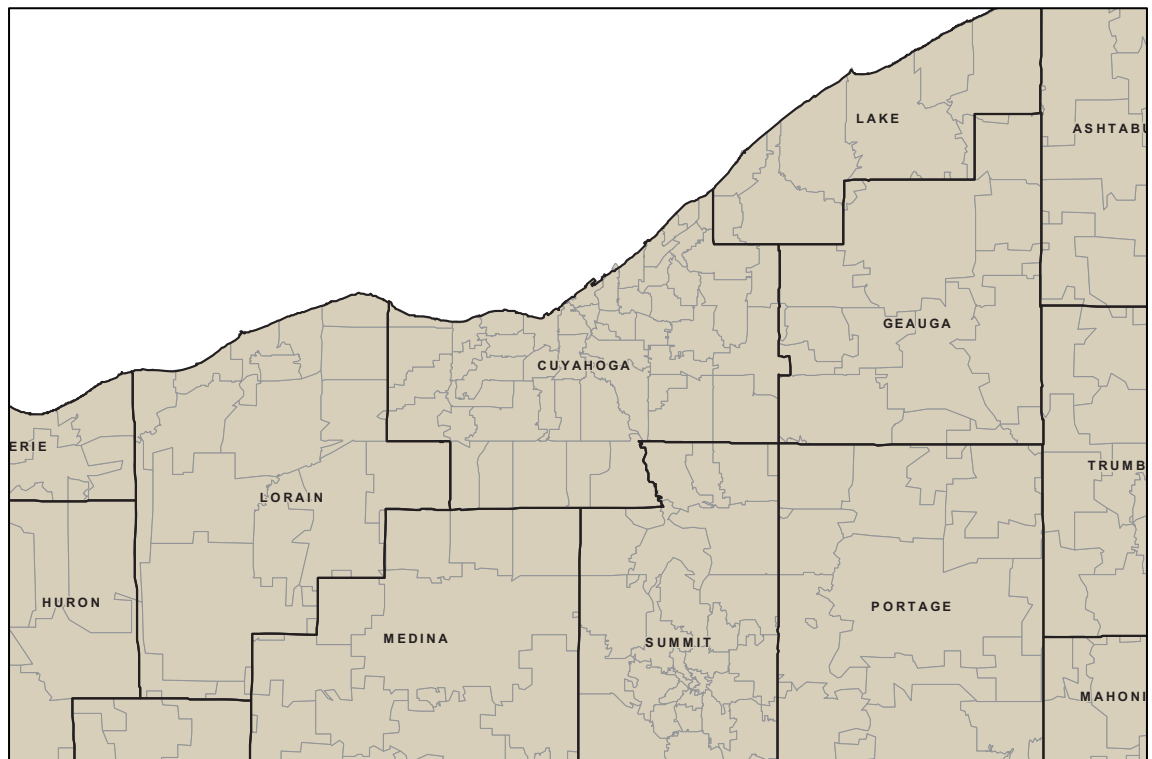
Figure 3: Local Neighborhood Map



Seven-County Region: Cleveland Clinic also serves patients residing in seven Northeast Ohio counties: Cuyahoga, Geauga, Lake, Lorain, Medina, Portage and Summit.

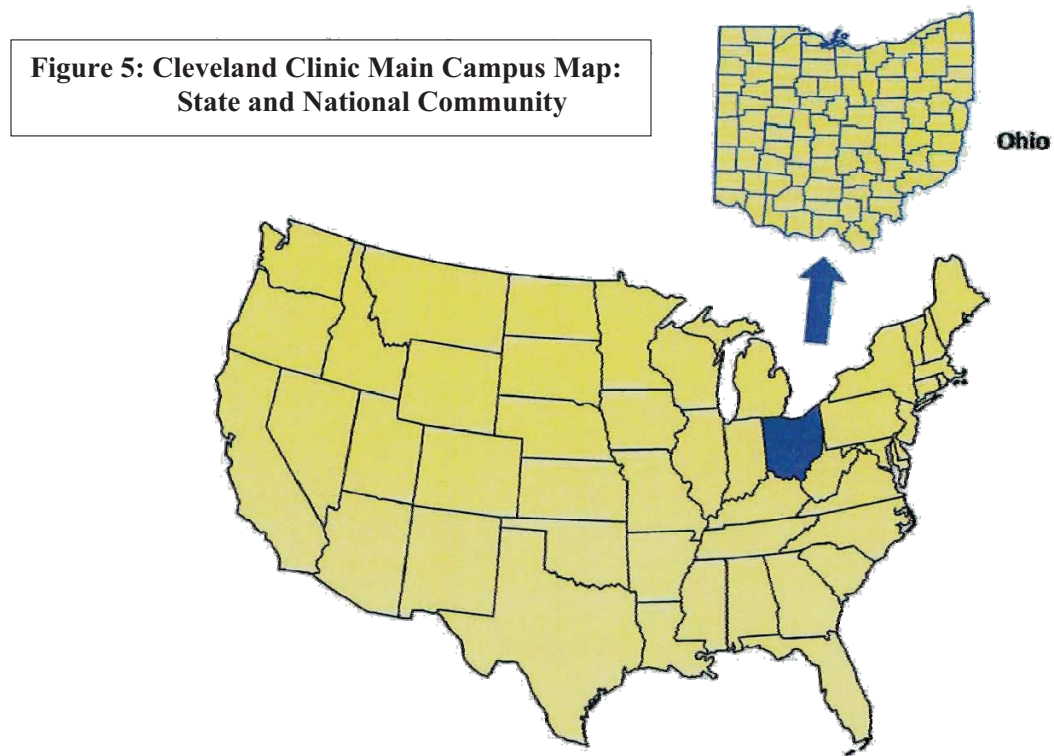
- Per capita and median household income levels are higher in the regional community than in the local community and slightly higher than in Ohio.
- Over 12% of residents in the regional community are uninsured.
- The unemployment rate in the regional community (7.6%) is slightly higher than Ohio (7%) and lower than the nation (approximately 9%).

Figure 4: Seven-County Map



State and Nation: Most Cleveland Clinic patients come from 21 counties in Northeast Ohio; thus, approximately $\frac{1}{4}$ of the state comprises its traditional hospital patient base.⁸ As an academic medical center and critical care center, Cleveland Clinic draws patients from a much larger geographic community than a community hospital.

Patients from Ohio, the Midwest, and the United States come to the Cleveland Clinic for treatment of the most acute diseases and conditions that cannot be addressed in their local area. They are patients who require the expertise of, and specialized clinical services in many cases only available at, the Cleveland Clinic.



⁸ Approximately 75% of Cleveland Clinic inpatients reside in 21 counties in Ohio: Ashland, Ashtabula, Carroll, Columbiana, Crawford, Cuyahoga, Erie, Geauga, Holmes, Huron, Lake, Lorain, Mahoning, Medina, Portage, Richland, Stark, Summit, Trumbull, Tuscarawas, and Wayne.

RESEARCH

Research benefits the public at large because medical research and the advancement of science are a long-term investment in human health and well-being.

The Cleveland Clinic's research activities substantially improve patient care and the health of the public at large by providing the latest advances in medicine directly to patients and by refining the practice of medicine through the development and promulgation of new techniques, devices and treatment protocols.

EDUCATION

The public at large benefits from medical education provided at academic medical centers such as the Cleveland Clinic because medical education adds to the quality and availability of medical care across the nation.

In addition, community health education initiatives provided by academic medical centers benefit the public at large by helping the public make positive health and wellness choices.

These educational activities ensure that the community receives the highest standard of medical care and has trained health professionals to care for its residents in the future.

SUMMARY

This assessment confirms the need for the wide range of programs and services offered by a comprehensive academic medical center in the communities served by the Cleveland Clinic. Academic medical centers are in a unique position to identify and address health needs of their communities, especially as those needs are or relate to the provision of specialty care, research and education. An academic medical center can address patient care needs of its local community at the same time that it researches and finds new ways to treat diseases affecting patients throughout the world.

Using the secondary and primary data sources the following community health needs were identified:

PATIENT CARE

- **CHRONIC DISEASE**
- **PROMOTION OF HEALTHY LIFESTYLES**
- **SPECIALTY CARE AND TRANSFER SERVICES**
- **ACCESS TO HEALTH CARE**
- **ACCESS TO COMMUNITY SERVICES**
- **ECONOMIC IMPROVEMENT**

RESEARCH

- **MEDICAL RESEARCH**

EDUCATION

- **PHYSICIAN SHORTAGE**
- **COMMUNITY EDUCATION**

These are further described in the section on “Top Community Health Needs” herein.

METHODOLOGY

Tripp Umbach facilitated and managed a comprehensive community health needs assessment on behalf of Cleveland Clinic Main Campus — resulting in the identification of community health needs at various geographies and through the multiple perspectives of an academic medical center. The assessment process included input from persons who represent the broad interests of the various communities served by the Cleveland Clinic Main Campus facilities, including those with special knowledge of and expertise in public health.

- ❑ **Consultant Engagement:** The Cleveland Clinic contracted with Tripp Umbach, a private healthcare consulting firm headquartered in Pittsburgh, Pennsylvania to complete the community health needs assessment. Tripp Umbach is a recognized national leader in completing community health needs assessments, having conducted more than 200 community health needs assessments over the past 20 years. Today, more than one in five Americans lives in a community where Tripp Umbach has completed a community health assessment.

Paul Umbach, founder and president of Tripp Umbach, is among the most experienced community health planners in the United States, having directed projects in every state and internationally. Tripp Umbach has written two national guide books⁹ on the topic of community health, and has presented at more than 50 state and national community health conferences.

Tripp Umbach is also a leading consulting firm nationally in the areas of academic medicine and research. Since 1995, the firm has completed economic impact studies for every allopathic medical school and teaching hospital for the Association of American Medical Colleges (“AAMC”). Tripp Umbach has completed research, planning and economic analysis for 75 academic medical centers, including feasibility studies for 20 new or expanded medical schools. Tripp Umbach has completed numerous studies for biomedical research institutes including the Minnesota Biomedical Partnership (Mayo Clinic and University of Minnesota) and for the New York Genome Project, a collaboration project between eight academic medical centers in New York City.

Tripp Umbach facilitated a series of meetings with a CHNA project team consisting of leadership from the Cleveland Clinic.

⁹A Guide for Assessing and Improving Health Status Apple Book: http://www.haponline.org/downloads/HAP_A_Guide_for_Assessing_and_Improving_Health_Status_Apple_Book_1993.pdf and
A Guide for Implementing Community Health Improvement Programs: http://www.haponline.org/downloads/HAP_A_Guide_for_Implementing_Community_Health_Improvement_Programs_Apple_2_Book_1997.pdf

- **Secondary Data:** The first phase of the data collection process was reviewing and analyzing secondary data on demographics, potentially avoidable hospitalizations, disease prevalence, health behaviors and socio-economic barriers to care in the Main Campus geographic communities. See Appendix A for a detailed demographic data profile of the Main Campus communities.

Tripp Umbach obtained, reviewed and analyzed information from the following sources:

- Behavioral Risk Factor Surveillance System (“BRFSS”): Data for disease prevalence and health behaviors were obtained from BRFSS, a state-based system of health surveys that collects information on health risk behaviors, preventive health practices and healthcare access primarily related to chronic disease and injury. BRFSS data was provided by Thomson Reuters.
- Community Need Index (“CNI”): In 2005 Catholic Healthcare West, in partnership with Thomson Reuters, pioneered the nation’s first standardized CNI.¹⁰ CNI was applied to quantify the severity of health disparity for every zip code in Ohio based on specific barriers to healthcare access. Because the CNI considers multiple factors that are known to limit healthcare access, the tool may be more accurate and useful than other existing assessment methods in identifying and addressing the disproportionate unmet health-related needs of neighborhoods. CNI quantifies five prominent socio-economic barriers: Income, Insurance, Education, Culture/Language and Housing. The scores range from 1.0 (lowest need) to 5.0 (highest need).
- Prevention Quality Indicators (“PQI”): PQI was developed by the Agency for Healthcare Research and Quality (“AHRQ”). The AHRQ model was applied to quantify the PQI for the Cleveland Clinic community and Ohio. The PQI index identifies potentially avoidable hospitalizations for the benefit of targeting priorities and overall community health based on inpatient discharges by zip code using ICD diagnosis and procedure codes. There are 14 quality indicators. Lower index scores represent fewer admissions for each PQI.
- Ohio Trauma Registry (“OTR”): Statistical data was collected from OTR, a Division of Emergency Medical Services in the Ohio Department of Public

¹⁰ “Community Need Index.” Catholic Healthcare West Home. Web. 16 May 2011.<http://www.chwhealth.org/Who_We_Are/Community_Health/STGSS044508>.

Safety. OTR trauma data provides the ability to quantify the overall frequency of trauma cases by occurrence type during 2010. There are five types of trauma quantified by OTR: asphyxia, blunt, burns, penetrating and “other.” Tripp Umbach identified the percentage of penetrating traumas compared to the overall number of trauma cases in a zip code-defined hospital community. Trauma incidence is based on residence zip code, not the location of treatment. The resulting percentage provides a secondary data source quantifying the number of violent traumas related to a foreign object or shattered bone.

- Healthy People 2020: Healthy People 2020 provides science-based, 10-year national objectives for improving the health of the public at large by identifying nationwide health improvement priorities and increasing public awareness of the determinants of health and wellness.
 - Cleveland Department of Public Health
 - Ohio Department of Health
 - Centers for Disease Control and Prevention
 - Association of American Medical Colleges
- **Interviews with Key Stakeholders:** Tripp Umbach interviewed key community stakeholders with expertise in overall public health and/or experience in the Cleveland Clinic Main Campus communities. The stakeholders’ expertise provided beneficial insight on the health needs of communities served by the Cleveland Clinic Main Campus. A total of 33 interviews were completed with key stakeholders. See Appendix B for a list of participating organizations. All interviewees were asked the same set of questions previously developed by Tripp Umbach and reviewed by the Cleveland Clinic Main Campus executive leadership project team. See Appendix C for additional information.
- **Focus Groups with Community Residents:** Tripp facilitated six focus groups to gather more information about the health needs of the residents, especially those that are medically underserved, have low incomes or are affected by chronic disease in each of the Main Campus communities. Focus group audiences were chosen by hospital leadership utilizing secondary data to identify health needs of targeted populations. Approximately 111 residents from the Cleveland Clinic Main Campus hospital community participated in the focus groups, each providing direct input

related to their top community health needs, and those of their families and communities.

The goal of the focus group process is that each participant feels comfortable to speak openly and express their experiences and points of view. The focus group participants were asked to identify and discuss what they perceived to be the top health issues and/or concerns in their communities. The focus group process gathers valuable qualitative and anecdotal data regarding the broad health interests of the communities of Main Campus. Input is subject to the limitations of the identified target populations (i.e., vocabulary, perspective, knowledge) and thus is inherently subjective in nature. Focus group audiences had representation from each of Main Campus's geographic communities:

- **Local Community:** Four focus groups were conducted in the following neighborhoods located in the local community: East Cleveland, Fairfax, Hough, and Slavic Village (“Adult Residents of the Local Community”).
- **Regional Community:** A focus group was conducted with representatives from each of Cleveland Clinic's family health centers in Northeast Ohio (“Family Health Center Physicians”).
- **State and National Communities:** Two focus groups were conducted with community physicians practicing in the Midwest¹¹ that refer some of their patients to the Cleveland Clinic (“National Community Physicians”).

See Appendices D-F for more information.

- **Inventory of Community Resources:** Tripp Umbach completed an inventory of community resources available in the Cleveland Clinic Main Campus communities using resources identified by the Cleveland Clinic, Internet research and United Way's 211 First Call for Help community resource database. More than 350 community resources were identified with the capacity to meet the community health needs identified in the Cleveland Clinic Main Campus CHNA. See Appendix G for the complete list of resources.
- **Community Health Needs Assessment Report:** This report was developed to summarize key findings from the assessment process and identify the top community health needs that exist at the local, regional, state and national levels.

¹¹ Physicians represented were practicing doctors in Indiana, Kentucky, Michigan, New York, Ohio, Pennsylvania, and West Virginia.

PRIORITIZATION CRITERIA:

Tripp Umbach conducted an independent review of the existing secondary data, in-depth interviews with key stakeholders and input provided by six focus groups to identify and analyze the needs raised by each source. The top health needs of the Main Campus communities are those that were both supported by secondary data, where available, and that were addressed by key stakeholders and focus groups. Some health needs, such as community services, cannot be quantified by secondary data, but have been identified as a top need based on the strong consensus of the key stakeholders and the focus group participants. Needs are listed in order of category (i.e., patient care, community services, research and education).

TOP COMMUNITY HEALTH NEEDS

I. PATIENT CARE

CHRONIC DISEASE

Certain chronic diseases were found to be prevalent in the Cleveland Clinic communities, identifying a need for chronic disease care, including the need for inpatient and outpatient medical care services as well as resident wellness and education to decrease the prevalence of these diseases. Heart disease, diabetes, asthma, and obesity are chronic diseases that are prevalent in the local, regional, state and national communities.

PQI scores in the local community are at or above Ohio for the majority of the PQI factors, indicating that a significant number of inpatient admissions could be avoided with preventive care and preventive education. PQI scores in the local community are higher than the regional community and Ohio for congestive heart failure, hypertension, diabetes, and adult asthma. See Appendix A for more information.

Heart-related Diseases: Cardiovascular disease remains the leading cause of death in the United States.¹² Coronary artery disease, heart attack, angina and congestive heart failure are more prevalent in the regional community than the local community and Ohio. Ohio Department of Health (“ODH”) data indicate:

- Heart disease was the leading cause of death for Cuyahoga County residents in 2004-2006.¹³
- More than 35% of Cuyahoga County adult residents reported having ever had high cholesterol.
- More than 27% of Cuyahoga County adult residents reported having ever had high blood pressure.¹⁴

Congestive heart failure is a condition in which the heart cannot pump enough blood to meet the body’s needs. The heart either cannot fill with enough blood or cannot pump blood to the rest of the body with enough force.¹⁵ Congestive heart failure is a serious yet manageable condition that requires medical care. Early diagnosis and treatment can help people who have heart failure live

¹² Ohio Department of Health. Healthy Ohio Community Profiles. Office of Healthy Ohio, Columbus, Ohio. December, 2008. p3

¹³ *Ibid* p.6

¹⁴ *Ibid* p.8

¹⁵ "What Is Heart Failure?" - NHLBI, NIH. Web. 29 Mar. 2012. <<http://www.nhlbi.nih.gov/health/health-topics/topics/hf/>>.

longer, more active lives. Congestive heart failure is commonly caused by pre-existing heart-related diseases such as coronary artery disease, diabetes and high blood pressure.

The PQI scores in the local and regional communities for congestive heart failure are higher than those for Ohio and indicate the need for better management of the heart-related diseases that lead to congestive heart disease (7.70, 5.71, 4.66, respectively). Specific heart-related diseases are more prevalent in the regional community. Coronary heart disease, heart attacks, angina, and congestive heart failure rates are higher in the regional community than the local community or Ohio.

According to the CDC, about one in three U.S. adults—an estimated 68 million—has high blood pressure.¹⁶ High blood pressure is a major risk factor for heart disease, stroke, congestive heart failure and kidney disease. High blood pressure was listed as a primary or contributing cause of death for more than 347,000 Americans in 2008.¹⁷ PQI scores in the local and regional communities for high blood pressure are higher than Ohio (1.88, .86, and .70, respectively). Key stakeholders and focus group participants in the regional, state and national communities believe that lifestyle choices are a potential underlying cause for hypertension and related heart disease.

Diabetes: Diabetes is a serious condition that often has long-term complications such as eye problems, foot and skin problems, hypertension, high cholesterol, and nerve damage if not properly managed. Without proper management, diabetes can lead to heart disease and stroke. PQI scores for diabetes and its long-term complications are higher in the local community than the regional community and Ohio (2.39, 1.51, and 1.24 respectively).

In Ohio, 17.8% of residents with an annual household income less than \$15,000 are diabetic, compared to 5.6% for residents with annual household incomes over \$50,000.¹⁸ Diabetes is the 7th leading cause of death in Ohio.¹⁹ According to a 2007 report by the American Diabetes Association, Ohio was estimated to have spent \$5.9 billion a year on diabetes, including \$3.9 billion in medical expenditures and \$2 billion in reduced state productivity and premature mortality. This estimate includes only persons diagnosed with diabetes.²⁰

¹⁶ CDC. Vital signs: prevalence, treatment, and control of hypertension—United States, 1999-2002 and 2005-2008. MMWR. 2011;60(4):103-8.

¹⁷ Roger VL, Go AS, Lloyd-Jones DM, et al. Heart disease and stroke statistics—2012 update: a report from the American Heart Association. *Circulation*.

¹⁸ Ohio Department of Health, Ohio Diabetes Fact Sheet, 2010, <http://www.odh.ohio.gov/sitecore/content/HealthyOhio/default/diabetes/diadata.aspx> (April 19, 2012)

¹⁹ <http://www.odh.ohio.gov/sitecore/content/HealthyOhio/default/diabetes/diadata.aspx>

²⁰ Healthy Ohio: Ohio Diabetes 2010 Fact Sheet; 2009 Ohio Behavioral Risk Factor Surveillance System; CDC: National Diabetes Surveillance System

According to the CDC, diabetes was the seventh leading cause of death based on U.S. death certificates in 2007. Overall, the risk of death for diabetics is about twice that of people of similar aged non-diabetics.²¹ Diabetes is more prevalent in the elderly population. In the United States, 26.9% of adults 65 or older are diabetic.²² Diabetes is also more prevalent in lower-income households.

Adult Asthma: Asthma is a reversible obstructive lung disease, caused by increased reaction of the airways to various stimuli. Asthma can be a life-threatening disease if not properly managed.²³ In 2009, the CDC estimated that 24.6 million Americans currently have asthma, of which 12.8 million (including 4.1 million children) had an asthma attack.²⁴ The ODH reports that asthma prevalence among adults has increased in Ohio since 2000 and highlights significant associations between asthma prevalence and socio-economic barriers such as race, ethnicity, educational attainment and household income.²⁵ The higher hospital admissions rates and prevalence of adult asthma in the local and regional communities (5.68 and 2.71, respectively, compared to 1.99 in Ohio) indicate the need for better management of asthmatic conditions.

Obesity: Obesity is a concern in the local, regional, state and national communities. Ohio's obesity rate is 17th highest in the nation. Sixty three percent of Ohio adults are overweight, 26.9% of whom are obese.²⁶ Childhood obesity is also a major issue in Ohio. A study in 2011 indicated that 35.5% of Ohio children ages 6-11 years are overweight, 19.6% of whom are obese.²⁷

Obesity is a primary contributor to the rise in: heart disease, type 2 diabetes, asthma, osteoarthritis, cancers, and also depression and self-esteem issues.²⁸

²¹ Center for Disease Control and Prevention. National diabetes fact sheet: national estimates and general information on diabetes and prediabetes in the United States, 2011. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2011. p. 7

²² *Ibid*, p. 1

²³ <http://www.lung.org/lung-disease/asthma/resources/facts-and-figures/asthma-in-adults.html>

²⁴ Akinbami LJ, Moorman JE, Lui Z. Asthma prevalence, health care use, and mortality; United States, 2005-2009 National health statistics reports; no. 32. Hyattsville, MD; National Center for Health Statistics, 2011.

²⁵ <http://www.ohio.gov/wp-content/uploads/2011/01/The-Burden-of-Asthma-in-Ohio.pdf>

²⁶ *F as in Fat :How Obesity Policies are Failing in America*, Trust for America's Health, Robert Wood Johnson Foundation, August, 2008.

²⁷ Oza-Frank R, Norton A, Scarpitti H, Wapner A, Conrey E (2011 March). *A Report on the Body Mass Index of Ohio's Third Graders: 2009-10*. Ohio Department of Health, Columbus, OH p.5

²⁸ Healthy Ohio; The Ohio Obesity Prevention Plan; March 2009

Hunger and obesity are often viewed as two unrelated health issues, yet researchers are identifying a connection between the two community health concerns. Hunger and obesity are often prevalent in “food deserts:” areas in the industrialized world where healthy, affordable food is difficult to obtain. Food deserts are prevalent in rural and urban areas, and in poorer communities. They are associated with a variety of diet-related health problems, including hunger and obesity, because low-income Americans often rely on high-calorie, low-nutrition foods to avoid hunger.²⁹

National community physicians who participated in a focus group perceive that sedentary behavior (e.g., children choosing not to participate in physician recreational activities and adults working at office jobs), unhealthy diets, poor lifestyle choices, and other health conditions, such as depression, contribute to the prevalence of obesity in both adults and children.

Access to and Knowledge of Available Health Services: Focus group participants in the regional state, and national communities perceive that funding cuts to medical services has reduced availability of medical services and residents’ access to medical facilities. Participants in the local community focus groups believe there is a need to increase awareness of the services available in their communities.

Focus group participants in the local, regional, state and national communities identified a need for increased access to behavioral health services because of the increased prevalence of behavioral health issues and inadequate resources for behavioral health services for the under/uninsured population.

PROMOTION OF HEALTHY LIFESTYLES

Programs and activities that target behavioral health change and promote healthy lifestyles improve residents’ health status and can decrease the prevalence of chronic diseases such as heart disease and obesity.

Key stakeholders in the regional, state and national communities believe communities should focus on promoting and educating residents about healthy living, including diet and exercise. Stakeholders and focus group participants in the regional community also believe that residents need to take more responsibility for their health status, stop engaging in unhealthy behaviors (e.g., smoking, drugs, risky sexual behaviors) and commit themselves to living healthy lifestyles to improve their health and decrease their risk factors for chronic diseases.

Secondary data support the concept that the reduction of unhealthy behaviors would not only decrease the prevalence of chronic diseases, but also decrease hospitalizations for conditions

²⁹ Story, Mary, et al. 2009. "Creating Healthy Food and Eating Environments: Policy and Environmental Approaches." *The Annual Review of Public Health* (2008): 253-72.

such as low birth weight.³⁰ Pregnant women who engage in or experience unhealthy behaviors and conditions such as smoking, stress, infections, and violence are more likely give birth to low-birth weight babies. Low birth weight is of particular concern in the local community. The PQI score for the local community (10.37) is over three times the rate in the regional community (3.39) and nearly 10 times the rate for Ohio (1.21).

Healthy Food Options: The promotion of healthy lifestyles includes accessible healthy food and maintenance of a healthy diet. Key stakeholders and focus groups in the regional, state and national communities believe residents need improved access to healthy food options, especially in high-CNI neighborhoods. They perceive that fast food and unhealthy food choices are cheaper and/or more accessible to residents. Stakeholders in the regional community encourage communities and local businesses to collaborate to help improve affordability of healthy food and also believe community gardens could improve access to healthy fresh food.

Secondary data supports these perceptions. National studies have consistently demonstrated that unhealthy diets contribute to the prevalence of chronic diseases such as diabetes and obesity.³¹ For example, some studies demonstrate that residents living in “food deserts” have limited access to affordable healthy food and are more likely to suffer from obesity because of their diets of cheaper, unhealthier food.³² See the section on **Obesity** for more information.

Preventive Health Education: Also important to the promotion of healthy lifestyles is prevention education. Key stakeholders and focus group participants in the Main Campus communities believe that residents need to be educated on healthy lifestyles and preventive health. Focus group participants in the regional community are especially concerned about preventive health, because they believe residents are too influenced by television, internet articles, and other external sources and thus are misinformed about health and their health conditions.

State and national stakeholders mentioned that in the next 5-10 years the community should be educating residents on healthy lifestyle choices, focusing on social determinants of health, and ensuring that residents have access to healthy food and space for physical activity. They recognize that successfully educating residents on preventive health and healthy lifestyles can be difficult and believe that research should be conducted on “best practices” for adequately educating residents on preventive health, especially in underserved areas.

³⁰ Ohio MCH Fact Sheet. Women’s Health, Birth Outcomes, Newborn Health Low Birth Weight and Very Low Birth Weight. Updated 1/23/09

³¹ Report of the DGAC on the Dietary Guidelines for Americans, 2010.,Part B: Section 1.U.S. Department of Agriculture. May, 2010.

³² The Supermarket Gap: How to Ensure Equitable Access to Affordable, Healthy Foods, University of Washington Center for Public Health Nutrition, May 2010

SPECIALTY CARE AND TRANSFER SERVICES

The availability of specialty care services is a common health need on the local, regional, state and national levels. However, this health need tends to be addressed at regional and national critical care centers and academic medical centers.

In addition to primary services, patients need to have access to specialty medical services that may require treatment and technology not available at their local community hospital. Academic medical centers are a significant source of such specialty services. For example, although academic medical centers account for only 6% of all of the hospitals in the nation, they have over 40% of all neonatal intensive care units and perform over 50% of all surgical transplant services and over 22% of the all cardiac surgeries.³³

Academic medical centers are often the providers of the most highly specialized, technologically- advanced patient care and have the capacity to treat the most acute diseases and conditions. Patients needing such services are often transferred from their local facility to a regional or national academic medical center.

ACCESS TO HEALTH CARE

Access to health care is imperative to the health and wellness of the community. Access to health care is multi-faceted and includes the need for:

- **Entry Point of Care:** Knowledge of where care is provided for any particular treatment, such as flu shots and health screenings
- **Medical Home:** Access to primary care physicians that are knowledgeable and have oversight of all aspects of patient's care
- **Patient Navigation:** Eliminate barriers to timely access to health care
- **Financial Assistance:** Knowledge of financial assistance programs and access to care for under/uninsured patients

Residents that have adequate access to primary and preventive care are generally healthier, better able to manage and prevent chronic diseases, and avoid hospitalizations for more serious conditions.

The high CNI scores in the local community and the concerns raised by key stakeholders and focus groups in each of the communities, as described below, indicate that residents access to health care is significantly impacted by traditional socio-economic barriers and that there is need for additional and increased knowledge of services in the communities to improve overall health status.

³³ AAMC How Do Teaching Hospitals Serve America's Communities?; <https://www.aamc.org/linkableblob/70256-3/data/teachhospfacts2-data.pdf>; (April 23, 2012)

Socio-economic Barriers to Care: The local community has an overall CNI score of 4.8, indicating nearly the highest possible level of socio-economic barriers to healthcare. The regional community has a CNI score of 3.4, indicating a slightly elevated level of socio-economic healthcare barriers.

- ✓ Slavic Village (44127), Hough-Fairfax (44103), Buckeye-Woodland Hills (44104), and Downtown Cleveland (44114 and 44115) record CNI scores of 5.0, the highest possible score; evidence that residents struggle with every socio-economic barrier to care.
- ✓ The overall unemployment rate of the local community is 17.4%. Buckeye-Woodland Hills (44104) has an unemployment rate over 30%, which is much higher than the local community as a whole as well as Ohio (7%) and the nation (approximately 9%).
- ✓ Nearly 28% of the population in the local community is uninsured. Downtown Cleveland (44115) has the highest percentage of uninsured citizens (44%) of all zip codes in the local community and one of the highest in the regional community and Ohio.
- ✓ Hough – Fairfax (44103) has the highest rate of married families with children in poverty (26.8%). Downtown Cleveland (44115) has the highest percentage of single families with children living in poverty (89.9%). Downtown Cleveland (44114) has the highest rate of citizens 65 and older living in poverty (17.8%) in the local and regional communities.

Health Insurance Coverage: Access to affordable, quality healthcare was identified by regional, state, and national stakeholders as significant to the definition of a healthy community. Socio-economic barriers and unemployment rates impact residents' ability to afford health care and insurance. Key Stakeholders and focus group participants, especially those representing the regional, state and national communities, perceive that uninsured residents cannot afford to access the quality healthcare facilities and institutions in the Main Campus communities. They believe this need is exacerbated by increased unemployment and the likelihood that unemployed residents cannot afford health insurance and/or lose health insurance benefits.

Similarly, national, state, and regional community focus group participants are concerned that certain residents may not qualify for, or have knowledge of, traditional financial assistance programs. They believe uninsured patients are less likely to seek medical care resulting in untreated illness and a poorer health status.

ACCESS TO COMMUNITY SERVICES

The availability of community services to meet the needs of the community contributes to the health of the community. These services provide and coordinate activities that help residents achieve healthy outcomes. The need for community services includes both general community services (e.g., recreational activities for children) and health outreach services (e.g., health

screenings). The availability of community services is a concern in the local and regional communities. Focus group participants in the local community and key stakeholders from the regional community believe that many services exist in the community, but they perceive that services have been restricted because of funding cuts. They also perceive an increased demand for community services due to an increase in unemployment. Key stakeholders in the regional and national communities perceive the need for improved collaboration between community organizations to better meet the need for community services.

ECONOMIC IMPROVEMENT

Socio-economic barriers and poor economic conditions have a negative effect on health status of the local and regional communities. Key stakeholders and focus group participants are concerned that weak economic conditions have increased unemployment, crime and other socio-economic barriers to care and caused funding cuts to community and transportation services. These issues prevent residents from attending community programs, medical appointments, employment, and educational opportunities, which ultimately affects their health status.

Stakeholders in the regional community believe that the availability of employment and educational opportunities are important elements of a healthy community. Secondary data indicates that this of particular concern in the local community, because the per capita and median household income and education levels are lower in the local community than those in the regional community and Ohio. See Appendix A for details.

Stakeholders in the state and national communities perceive a current lack of adequate affordable housing in the United States and believe that access to affordable housing is essential to a healthy community.

Secondary data indicate that crime is an issue in the local community. The penetrating trauma rate is 21.5%, which is significantly higher than the regional community and Ohio (6.4% and 6.7%, respectively). Crime is also a concern in the regional, state and national communities. Stakeholders in these communities are concerned about crime prevalence in their communities and are especially concerned about youth violence.

Violence is also a concern in the Ohio and the nation. Guns are second leading cause of death by injury in Ohio.³⁴ 162 students reported having carried a firearm to school at some point during the 2006-2007 academic year, which is a 13.75% increase from the prior year (140 students in 2005-06).³⁵ Similarly, in 2005, more than 10% of male high school students in the nation

³⁴ Ohio Coalition Against Gun Violence Building a Safer Ohio. <http://ohioceasefire.org/resources/statistics.html>. (April 19,2012)

³⁵ U.S. Department of Education, *Report on the Implementation of the Gun-Free Schools Act in the States and Outlying Areas School Years 2005-06 and 2006-2007*. September, 2010. p 234.

reported having carried a weapon to school each month, and nearly 1 million (out of 16 million students surveyed) students did not feel safe attending school.³⁶

II. RESEARCH

MEDICAL RESEARCH

Medical research is a community health need that impacts people on a local, regional, state, national and international basis. However, this health need tends to be addressed at large regional and national research centers, including academic medical centers.

Research benefits the public at large because medical research and the advancement of science are a long-term investment in human health and well-being. Research has led to valuable progress, or elimination of, infectious, chronic, and non-communicable diseases affecting people around the world.

Basic research and clinical investigations are important to the eradication of diseases and their complications³⁷, help to determine risk factors of chronic diseases, and lead to more effective treatments and disease prevention.³⁸ For example,

- Heart-related diseases: Research has led to new and modified treatments and knowledge that smoking, inactivity, and unhealthy diets impact risk for heart attack, stroke and other heart-related diseases.³⁹
- Cancer: Research efforts have allowed us to understand that screenings are crucial to the prevention and early detection of cancer cells and that genetics impact a person's chances of contracting cancer.⁴⁰
- Diabetes: Research has shown that management and control of blood sugar decreases diabetic complications and that genetics, lack of exercise, and obesity increase the likelihood of contracting Type 2 diabetes.⁴¹

³⁶ Ohio Coalition Against Gun Violence Building a Safer Ohio. <http://ohioceasefire.org/resources/statistics.html>. (April 19,2012)

³⁷ AAMC, "The Economic Impact of Publicly Funded Research Conducted by AAMC-Member Medical Schools and Teaching Hospitals, A Report Prepared for the AAMC by Tripp Umbach", (November, 2011) p. 3

³⁸ U.S. Department of Health & Human Services National Institutes of Health, *NIH...Turning Discovery Into Health*, NIH Pub. No. 11-7634, January 2011

³⁹ *Id.*

⁴⁰ NIH Pub. No. 11-7634, January, 2011, p. 3

⁴¹ NIH Pub. No. 11-7634, January, 2011, p. 4

- Asthma: Research led to the discovery of the underlying, chronic conditions causing asthma, the development of inhalers, and the creation of programs to help people suffering from asthma to manage their condition and live fuller, more active lifestyles.⁴²

Academic medical centers incorporate research and education into the delivery of patient care to enhance the health and wellbeing of their patients and the public at large. Basic research is conducted to find solutions to specific medical problems, and clinical trials are used to test the safety and effectiveness of drugs and medical procedures and help set the standards for patient care.

Through these efforts, academic medical centers substantially improve patient care and the health of the public at large by providing the latest advances in medicine directly to patients and by refining the practice of medicine through the development and promulgation of new techniques, devices and treatment protocols.

III. EDUCATION

Medical education is a community health need that impacts members of the community on a local, state, regional, national and international basis. However, most medical education in the United States is provided at large regional and national academic medical centers.⁴³

PHYSICIAN SHORTAGE

Academic medical centers train nearly every new doctor and nurse in the United States.⁴⁴ This medical education is more important than ever as our nation faces a growing shortage of physicians. A shortage of physicians will detrimentally affect patient care by leading to longer waits for appointments, increased use of emergency medical care for non-emergent issues, and the need to travel farther for medical care. Physician shortages will have the greatest impact on the populations that are already underserved like the poor or elderly.⁴⁵

Focus group participants in the local, state and national communities are concerned about physician shortages in both in primary and specialty care services. Residents in the local

⁴² *Id.*

⁴³ AAMC, “What Roles Do Teaching Hospitals Fulfill?”
<https://www.aamc.org/download/54360/data/whatrolesdothfulfill.pdf> (June 5, 2012)

⁴⁴ AAMC, “Match Day Renews Concerns About Doctor Shortages”.
<https://www.aamc.org/newsroom/newsreleases/276936/120316.html> (April 9, 2012)

⁴⁵ *Id.*

community perceive a need for more healthcare professionals or clinics for the under/uninsured populations.

The participants in the state and national communities believe that this issue will intensify in the future as older physicians retire and fewer newer physicians to take their place. The AAMC anticipates that approximately 1/3 of physicians could retire in the next 10 years. It estimates that there will be a shortage of 62,900 physicians in all specialties by 2015, and 91,500 physicians by 2020.⁴⁶

Other factors contributing to the shortage of physicians include increasing prevalence of chronic diseases and aging populations requiring more medical care.⁴⁷ Focus group participants in the state and national communities also believe that stringent government restrictions, malpractice suits, and the expense of medical education keep younger populations from entering medicine.

The physician workforce has not grown to meet the needs of the populations served.⁴⁸ In addition to increased usage of electronic medical records or delayed retirements, increasing the number of physician fellowships and the increased usage of other medical professionals (e.g. nurse practitioners or physician assistants) would increase the supply of medical professionals to help close the gap between the supply and demand of medical services.⁴⁹

COMMUNITY EDUCATION

The AAMC reports that academic medical centers are more likely than non-teaching hospitals to reach out to the communities they serve by offering various community programs.⁵⁰ Academic medical centers recruit staff that want to provide community programs, and medical students are attracted to such institutions because of opportunities to participate in screenings, nutrition, and crisis prevention programs at shelters and throughout the community.⁵¹ Many of the community health needs identified by this assessment are the focus of intervention and education programs established by the Main Campus.

⁴⁶ *Id*

⁴⁷ *Id*.

⁴⁸ Clese Erikson, MPAff, Edward Salsberg, MPA, Gaetano Forte, BA, Suanna Bruinooge, BA, and Michael Goldstein, MD, "Future Supply and Demand for Oncologists Challenges to Assuring Access to Oncology Services", *Journal of Oncology Practice* 73:2 March 2007

⁴⁹ *Id*.

⁵⁰ AAMC, "Teaching Hospitals Serve Their Communities", <https://www.aamc.org/initiatives/gmefunding/factsheets/253374/teaching-hospitals.html> (April 9, 2012)

⁵¹ The AAMC reports that 95% of teaching hospitals have nutritional programs and 69% of crisis prevention programs. This is compared to nonteaching hospitals, which rates are 73% and 14%, respectively.

Key stakeholders and focus group participants in the regional, state and national communities express the need for more community health education resources focused on disease prevention.

Cleveland Clinic - Main Campus Community Health Needs Profile

Contents



- Overview of Secondary Data Methodology
- Key Points
- Demographic Profile
- Community Need Index (CNI)
- Disease Prevalence
- Prevention Quality Indicators Index (PQI)
- Penetrating Trauma Data
- Health Behavior Profile

Overview of Secondary Data Methodology

- Tripp Umbach obtained information on the health status and socio-economic/environmental factors related to health and needs of residents of each of the Cleveland Clinic hospital communities.
- Example data sources included the Behavioral Risk Factor Surveillance System (BRFSS), Community Need Index (CNI), Prevention Quality Indicators Index (PQI), Healthy People 2020, Ohio Trauma Registry (OTR) and other existing data sources.
- The process developed accurate comparisons to the state baseline of health measures utilizing the most current validated data.

Overview of Main Campus Communities

- The Cleveland Clinic serves multiple communities, defined by mission and geography.
- The Cleveland Clinic's primary activities are patient care, research, and education.
- The three communities the Cleveland Clinic serves defined by mission are: (1) various patient care communities; (2) the public at large that benefits from medical research; and (3) the public at large that benefits from medical education.

GEOGRAPHY	MISSION
Local Neighborhoods – 10 zip codes surrounding Main Campus	Patient Care– Highly specialized institutes focusing on patient care
Regional Community – 7 county region in Northeast Ohio	Research – Improving health status of patients and public at large
National Community – Ohio and the United States	Education – Medical and community education

Overview of Key Data Sources

Community Need Index (CNI)

- In 2005 Catholic Healthcare West, in partnership with Thomson Reuters, pioneered the nation's first standardized Community Need Index (CNI). CNI was applied to quantify the severity of health disparity for every zip code in Ohio based on specific barriers to healthcare access.
- Because the CNI considers multiple factors that are known to limit health care access, the tool may be more accurate and useful than existing assessment methods at identifying and addressing the disproportionate unmet health-related needs of neighborhoods.
- The five prominent socio-economic barriers to community health quantified in CNI include: Income, Culture/Language, Education, Insurance, and Housing.
- CNI quantifies the five socio-economic barriers to community health utilizing a 5 point index scale where 5 indicates the greatest need and 1 indicates the lowest need.
- A CNI score above 3.0 will typically indicate a specific socio-economic factor impacting the community's access to care.
- CNI data was utilized to illustrate the traditional socio-economic barriers of Cleveland Clinic geographic communities at the local and regional level.

Overview of Key Data Sources

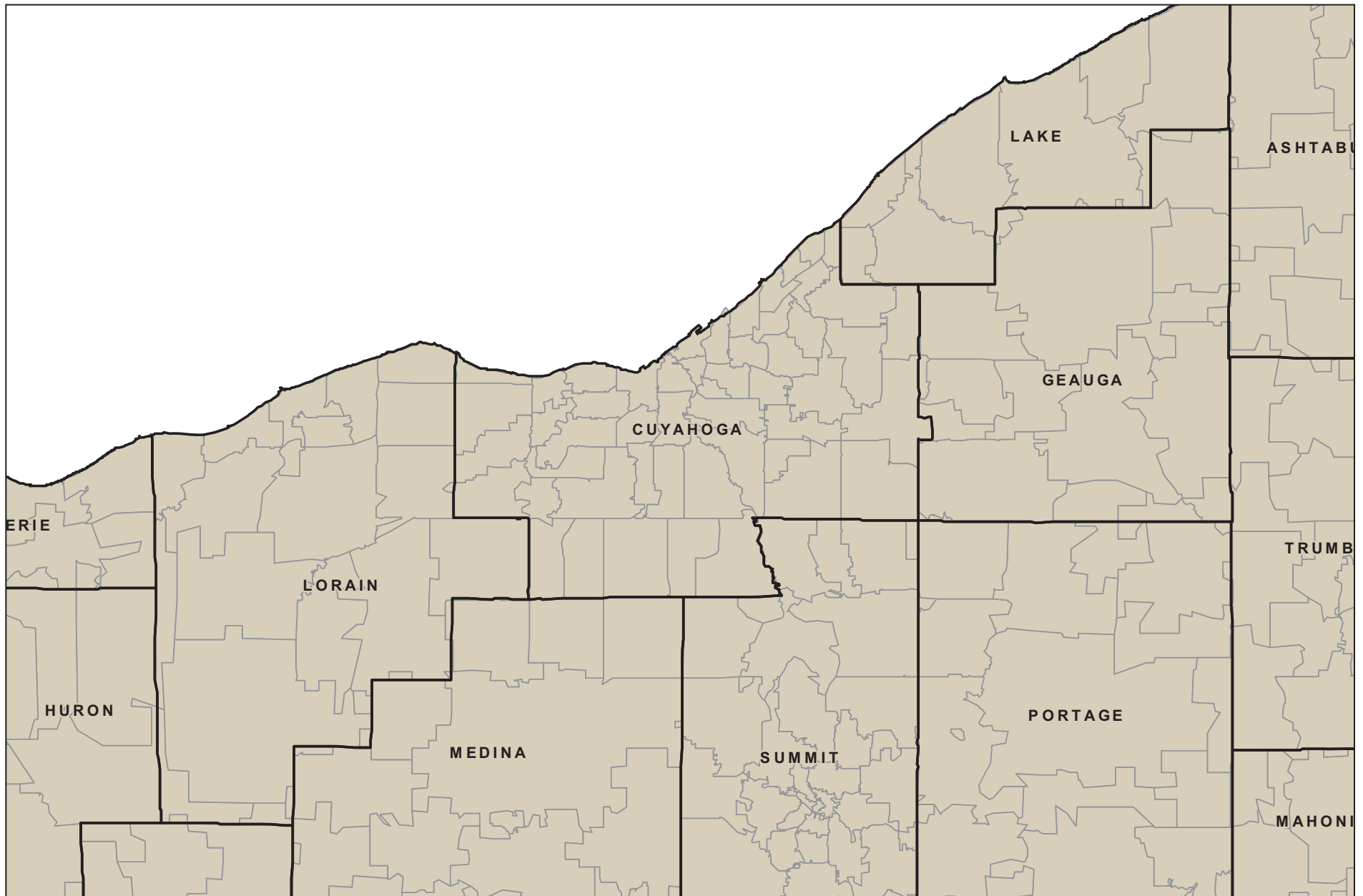
Prevention Quality Indicators Index (PQI)

- The Prevention Quality Indicators index (PQI) was developed by the Agency for Healthcare Research and Quality (AHRQ). The AHRQ model was applied to quantify the PQI within the Cleveland Clinic community and Ohio. PQI is similarly referred to as Ambulatory Care Sensitive Hospitalizations.
- The quality indicator rates are derived from inpatient discharges by zip code using ICD diagnosis and procedure codes. There are 14 quality indicators.
- The PQI index identifies potentially avoidable hospitalizations for the benefit of targeting priorities and overall community health.
- Lower index scores represent less admissions for each of the PQIs.
- PQIs were developed for the local, regional and statewide communities.

Cleveland Clinic Main Campus - Local Community Map



Cleveland Clinic Main Campus - Regional Community Map





Community Demographic Profile

- ❑ **Hospital community demographics have been aggregated at the three geographic communities of the Main Campus.** The local community consists of ten zip code areas within Cuyahoga County. The consultants utilized the 7-county regional community for comparison purposes, generally based on 80% of the hospital inpatient volumes. In addition, data was included to benchmark demographic trends to the overall state and national comparisons.
- ❑ **The Main Campus community has a slightly higher under 18 population (26.9%)** compared to both the 7 – County area (23.1%) and Ohio (23.6%) percentages.
- ❑ **The break-down of races in the Main Campus community** shows a much higher percentage of African American citizens (72.2%) when compared with the 7 – County area (17.3%) and Ohio (11.8%) rates.
- ❑ **Approximately 20% of the population of the Main Campus community** have not received a diploma, compared with approximately 12% within the 7 – County area and Ohio.
- ❑ **Per capita and median household income levels are lower** in the Main Campus community than the 7 – County area and Ohio income averages and medians.
- ❑ **There is a much higher rate of single parents with children living in poverty** in the Main Campus community (20.3%) when compared with the 7 –County area (6.3%) and Ohio (6.2%).
- ❑ **The Main Campus community unemployment rate** (17.4%) is much higher than the overall Ohio rate (7.0%) and the national rate (approximately 9%).

Key Points – Community Needs in the Main Campus Community

- ❑ **For the purposes of the CHNA secondary data profile, the Main Campus community includes a ten zip code area within the 7 –County area, the majority of the zip code areas are in great need of community health services based on CNI analysis.**
 - ❑ Based on the CNI composite of the Main Campus community, 5 of the 10 zip code areas have the highest CNI score of 5.0.
 - ❑ Slavic – Village (44127)
 - ❑ Downtown (44114 and 44115)
 - ❑ Buckeye – Woodland Hills (44104)
 - ❑ Hough – Fairfax (44103)
- ❑ **The Main Campus community unemployment rate (17.4%) is much higher than the overall Ohio rate (7.0%) and the national rate (approximately 9%).**
- ❑ **High unemployment levels contribute to other traditional socio-economic barriers to health care access including poverty and access to care.**
 - ❑ An interesting disparity is between the Hough – Fairfax area (44103) which has the highest rate of married families with children living in poverty (26.8%); whereas Downtown (44115) has the highest percentage of single families with children living in poverty (89.9%) and a very low rate of married families with children living in poverty (6.8%).
 - ❑ The Buckeye-Woodland Hills community (44104) has the highest percentage of minorities (98.2%).

Key Points – Community Needs in the Main Campus Community

- ❑ **The Main Campus community has the highest penetrating trauma rate (21.5%)** across all Cleveland Clinic hospital communities.
- ❑ **Hypertension prevalence is much higher in the Main Campus community (337 per 1000 pop.)** when compared with the 7- County area and Ohio (299 and 286 respectively).
- ❑ **Diabetes prevalence rates are higher** in the Main Campus community (109 per 1000 pop.) than the 7 - County area (83) or Ohio (78).
- ❑ **Stroke rates** are higher in the Main Campus community (38 per 1000 pop.) than the 7 - County area (29) or Ohio (27).

Key Points – Community Needs in the Main Campus Community

- ❑ **The following are the PQIs in which the Main Campus community has much higher rates than Ohio, indicating a greater number of avoidable hospitalizations:**
 - ❑ Low Birth Weight (+9.16)
 - ❑ Adult Asthma (+3.69)
 - ❑ Congestive Heart Failure (+3.04)

- ❑ **PQI scores in the Main Campus community are at or above Ohio PQIs for most factors.**

- ❑ **The Main Campus community** shows higher rates of obese citizens, citizens who smoke and citizens with chemical dependency when compared with the 7 - County area and Ohio.

Main Campus Community – Initial Reactions to Secondary Data

- The consultant team has identified the following data trends and their potential impact on the transition into the primary data collection of the Community Health Needs Assessment.
 - Overall, the Main Campus community is a high need area with a number of socio-economic factors impacting community health needs. Topics such as high unemployment, poverty, and access to care will be addressed with appropriate community groups.
 - CNI identifies specific higher need zip code areas relative to the overall Main Campus community. Identifying the needs of the specific areas such as Slavic Village (44127), Downtown (44114 and 44115), Buckeye – Woodland Hills (44104) and Hough – Fairfax (44103) will be important for determining potential focus group and stakeholder audiences.
 - The Main Campus community has the highest penetrating trauma rate (21.5%) across all hospital communities. Additional primary research related to safety and violence will be gathered from this community.
 - The Main Campus community shows higher rates of obese citizens, citizens who smoke and citizens with chemical dependency when compared with the 7 - County area and Ohio.
 - Possibly related to higher rates of risky health behavior, the Main Campus community has higher rates of hypertension, diabetes and stroke when compared with the 7 – County area and Ohio.
 - Given the national prominence of the Cleveland Clinic Main Campus, primary data collection will also seek to include input from persons with special knowledge of national public health issues.

Data Appendix

Demographics

Community Need Index (CNI)

Disease Prevalence

Prevention Quality Indicators Index (PQI)

Penetrating Trauma Data

Health Behavior Profile

Overview



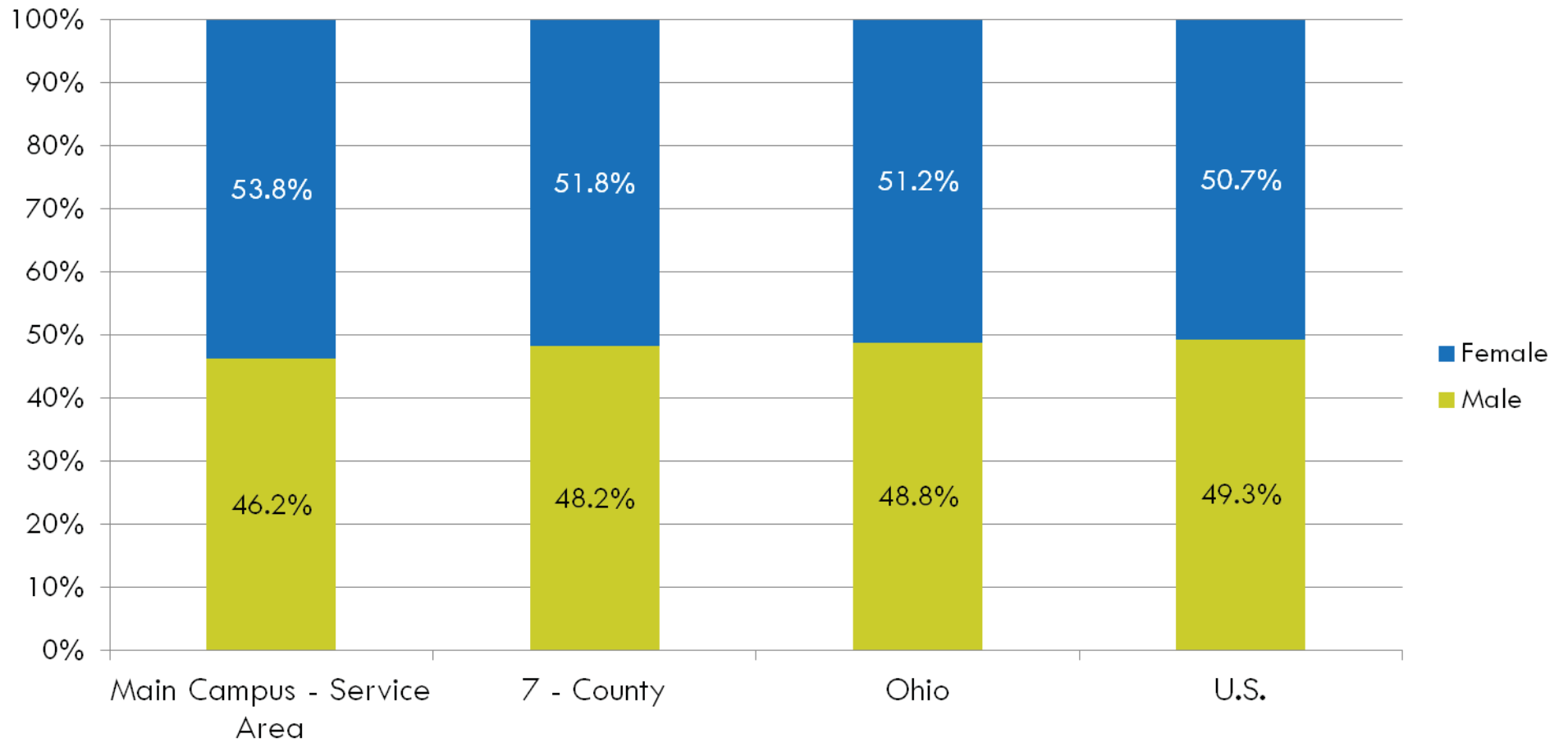
Community Demographic Profile

- ❑ **The Main Campus community has a slightly higher under 18 population (26.9%)** compared to both the 7 – County area (23.1%) and Ohio (23.6%) percentages.
- ❑ **The break-down of races in the Main Campus community** shows a much higher percentage of African American citizens (72.2%) when compared with the 7 – County area (17.3%) and Ohio (11.8%) rates.
- ❑ **Approximately 20% of the population of the Main Campus community** have not received a diploma, compared with approximately 12% within the 7 – County area and Ohio.
- ❑ **Per capita and median household income levels are lower** in the Main Campus community than the 7 – County area and Ohio income averages and medians.
- ❑ **There is a much higher rate of single parents with children living in poverty** in the Main Campus community (20.3%) when compared with the 7 –County area (6.3%) and Ohio (6.2%).
- ❑ **The Main Campus community unemployment rate** (17.4%) is much higher than the overall Ohio rate (7.0%) and the national rate (approximately 9%).

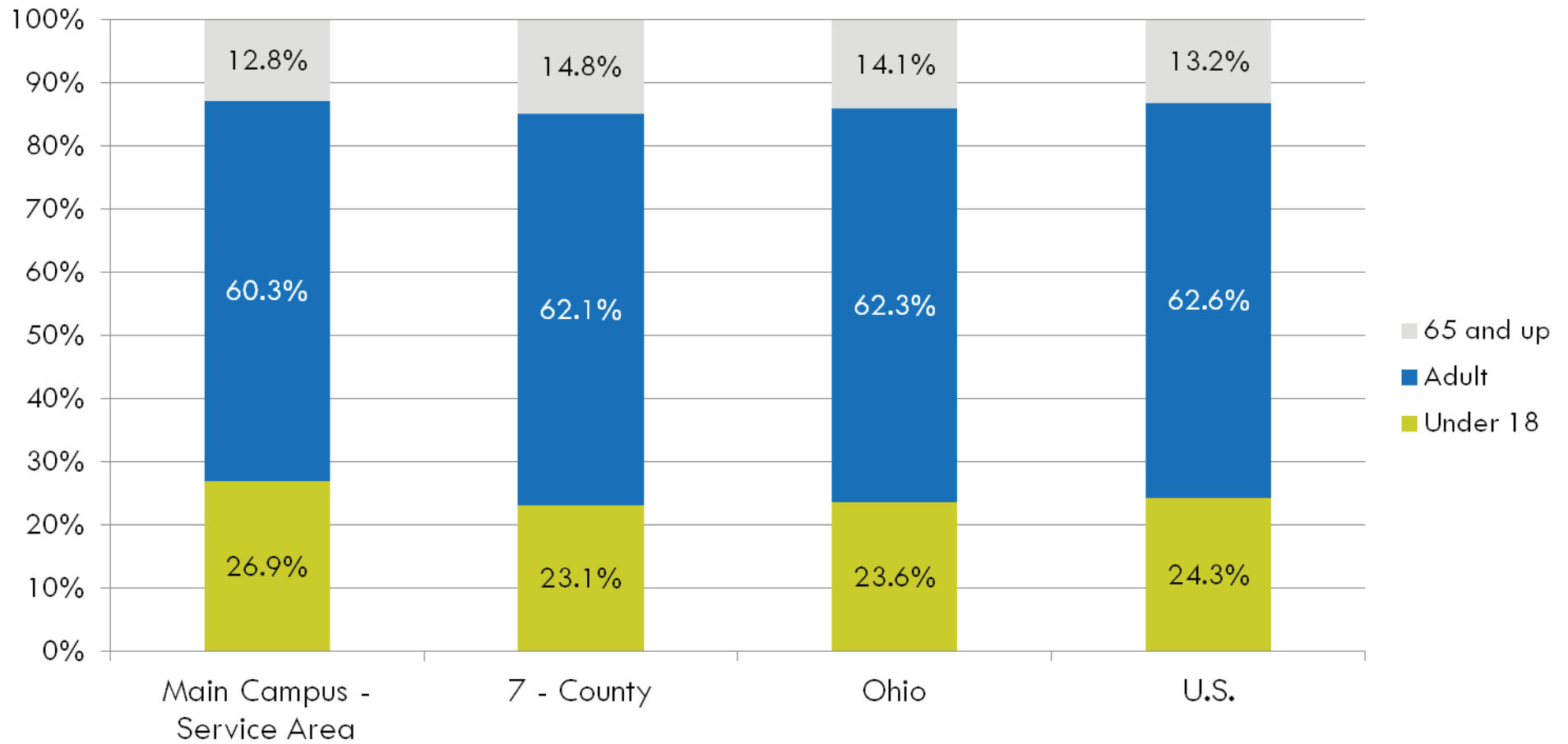
Population

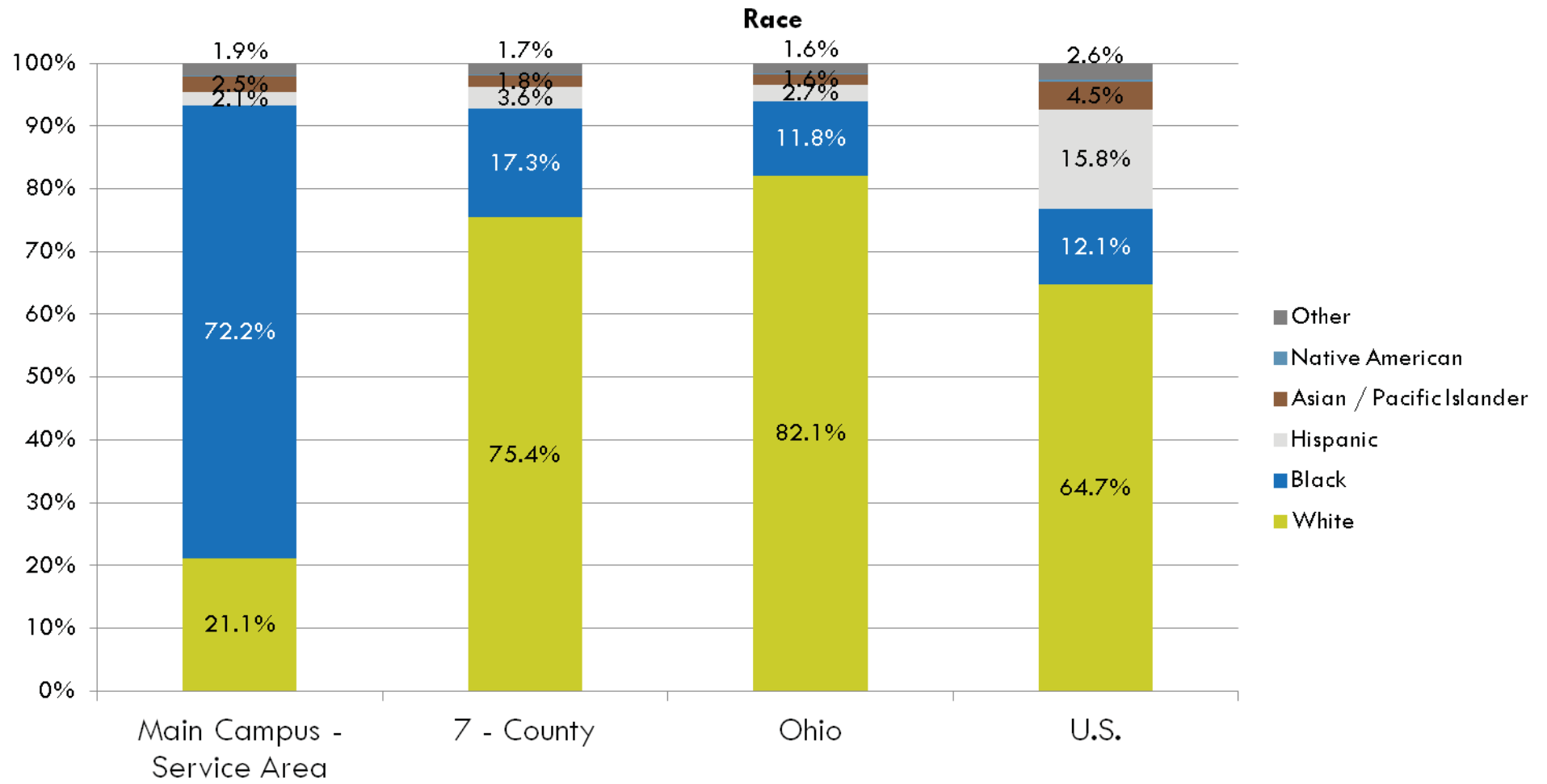
Total Population	Main Campus Service Area	7 - County	Ohio	U.S.
2000	268,782	2,843,564	11,353,136	281,421,906
2010	236,863	2,772,952	11,496,028	309,038,999
2015	221,251	2,716,129	11,471,127	321,675,045
Projected 5 year change (2010 – 2015)	-15,612	-56,823	-24,901	12,636,046

Gender



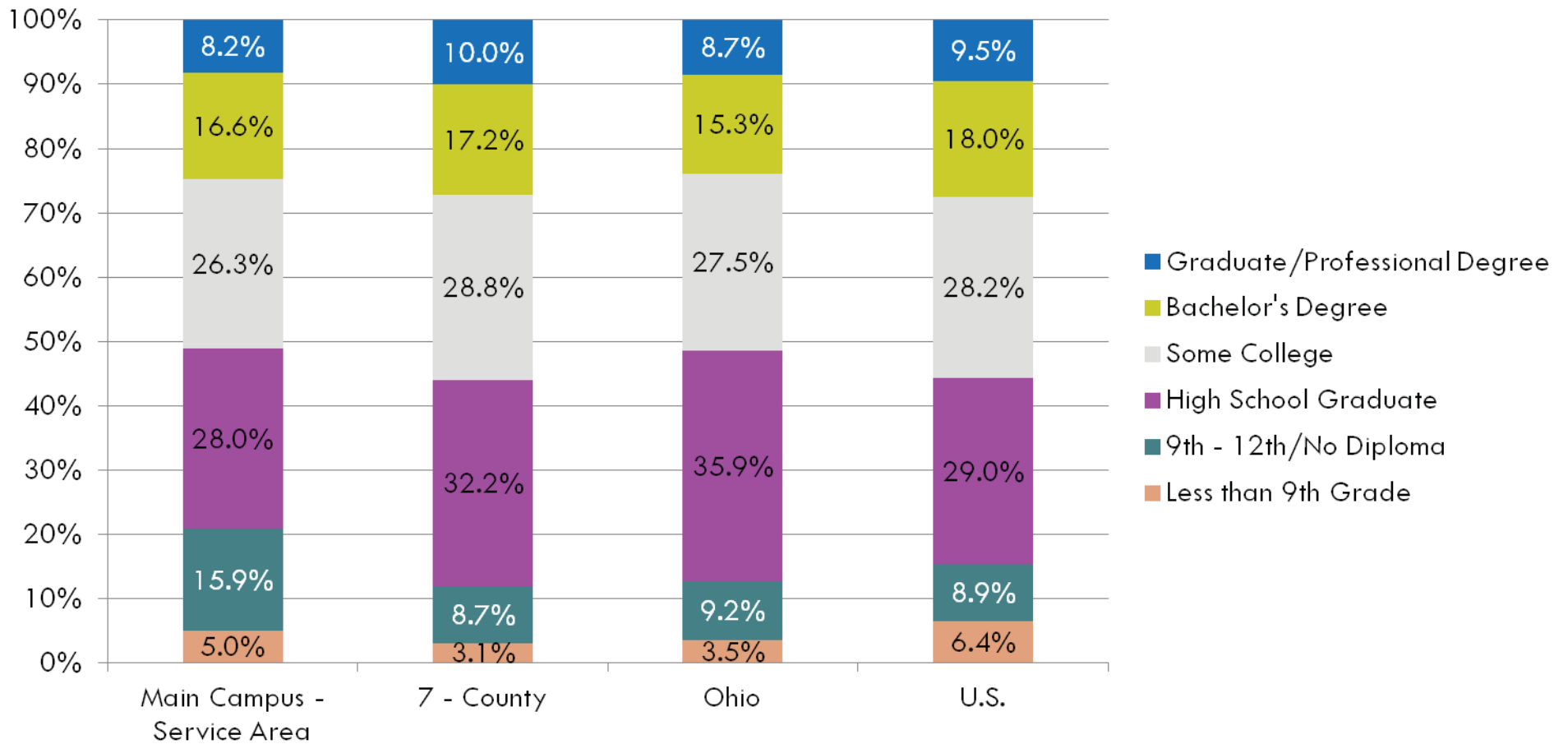
Age





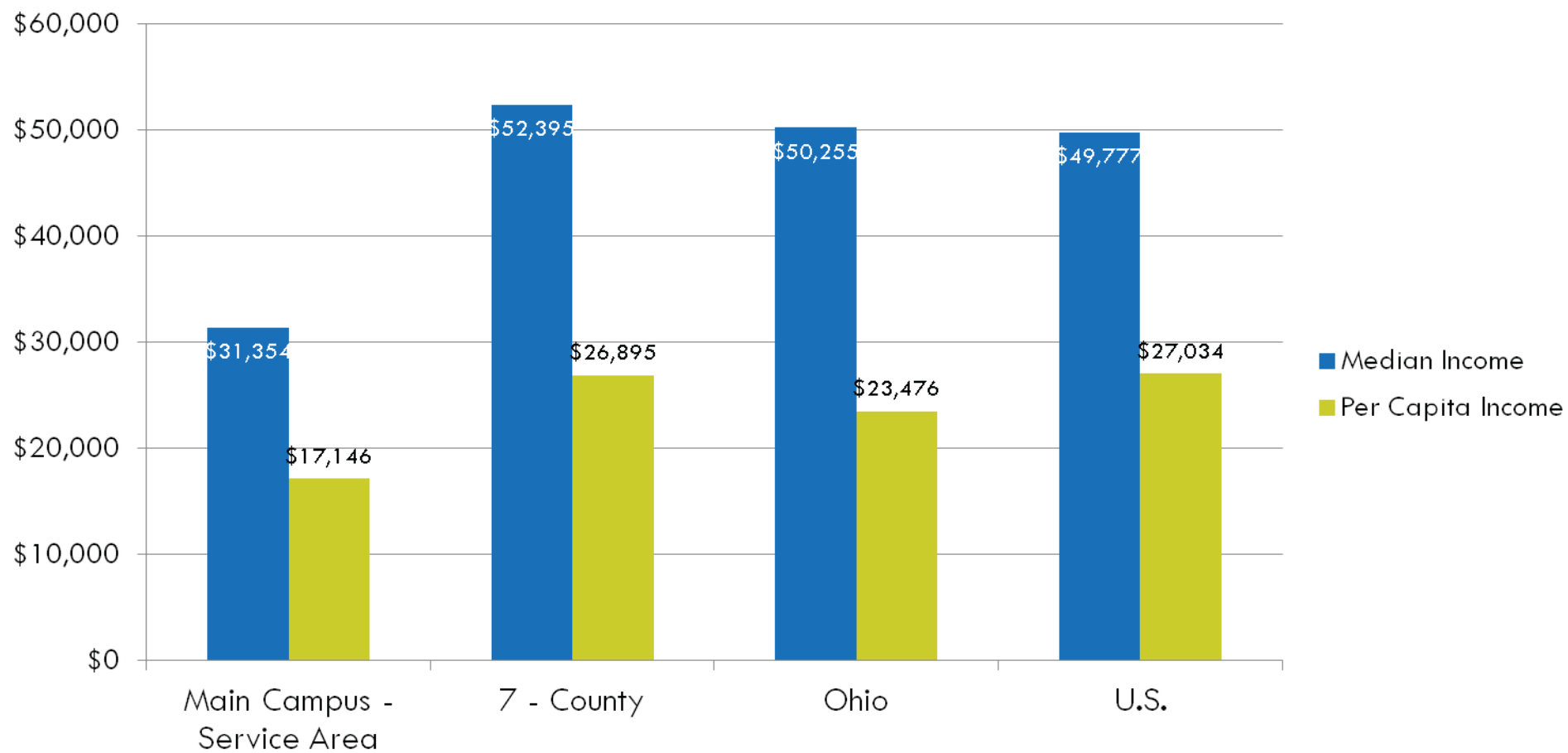
Source: Thomson Reuters

Educational Attainment



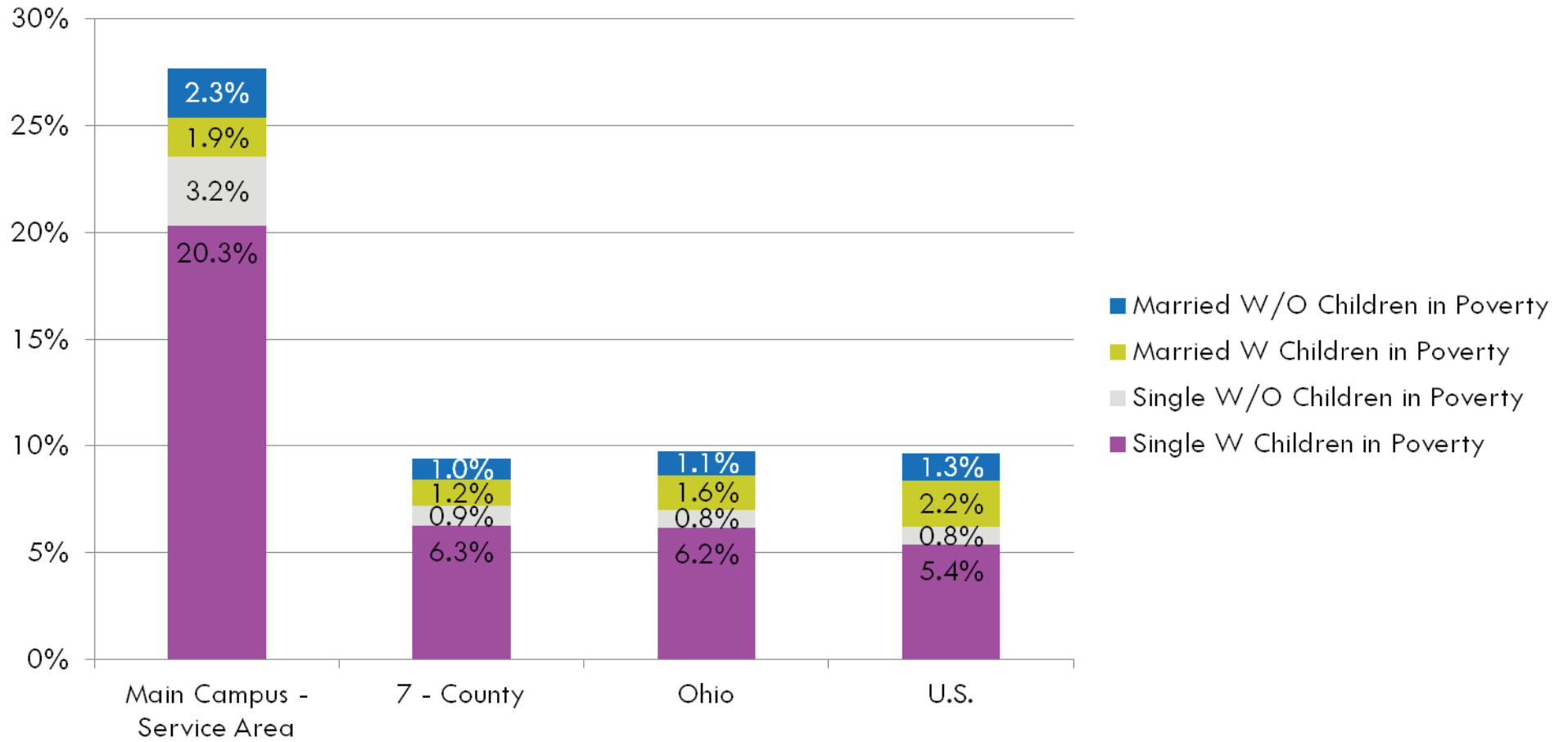
Source: Thomson Reuters

Household Income



Source: Thomson Reuters

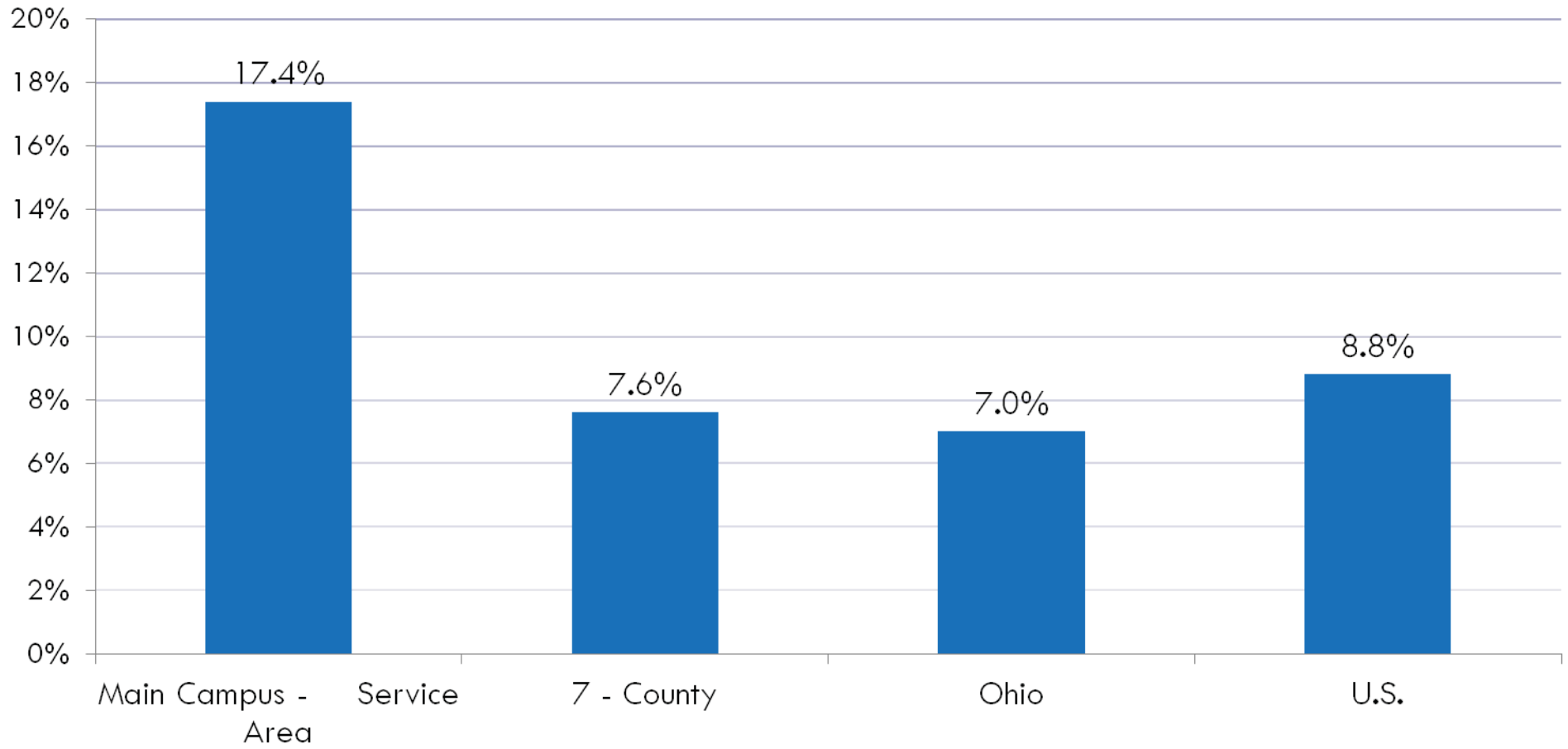
Household Status



Source: Thomson Reuters

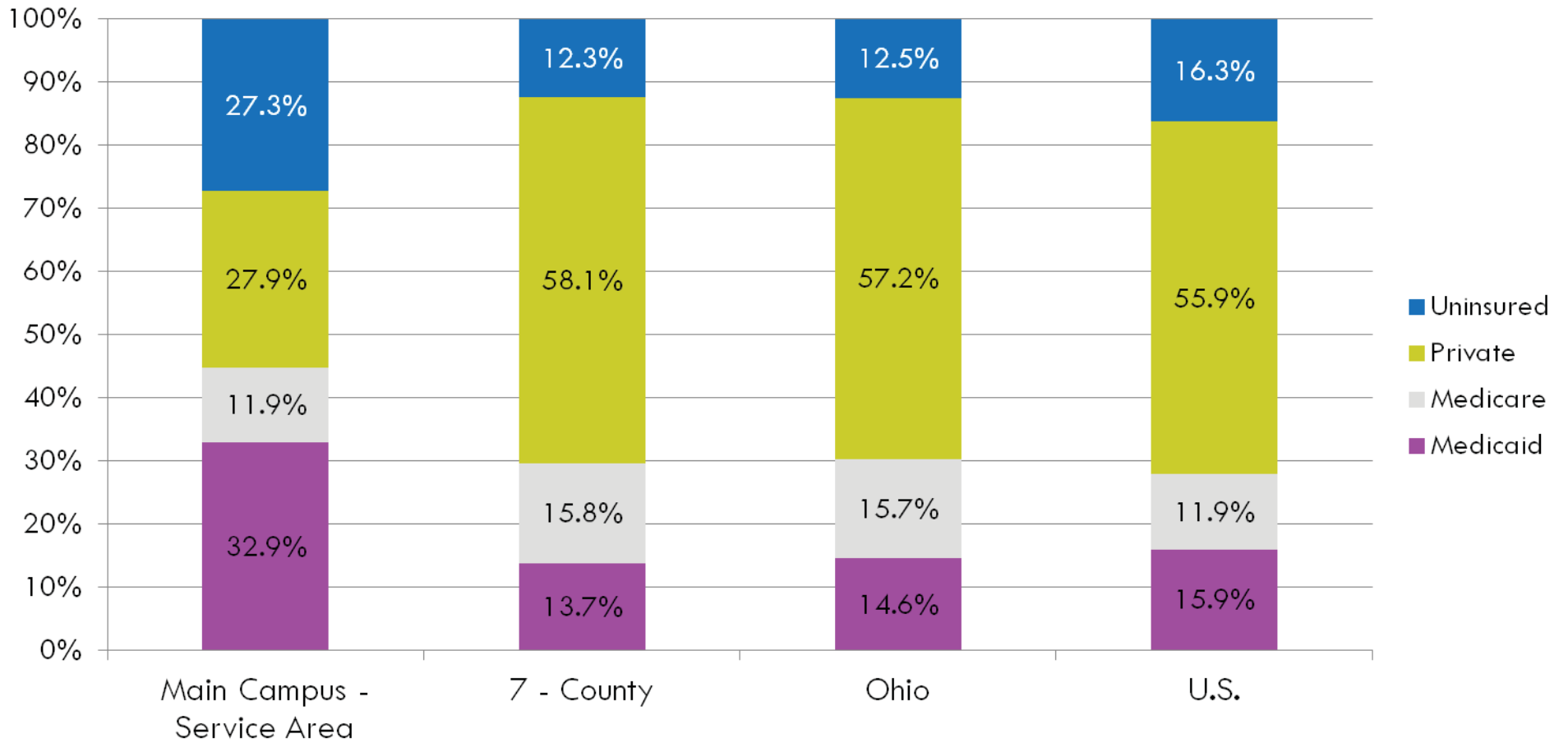
Unemployment Rate

* 2010 Unemployment Statistics – accessed March 2011



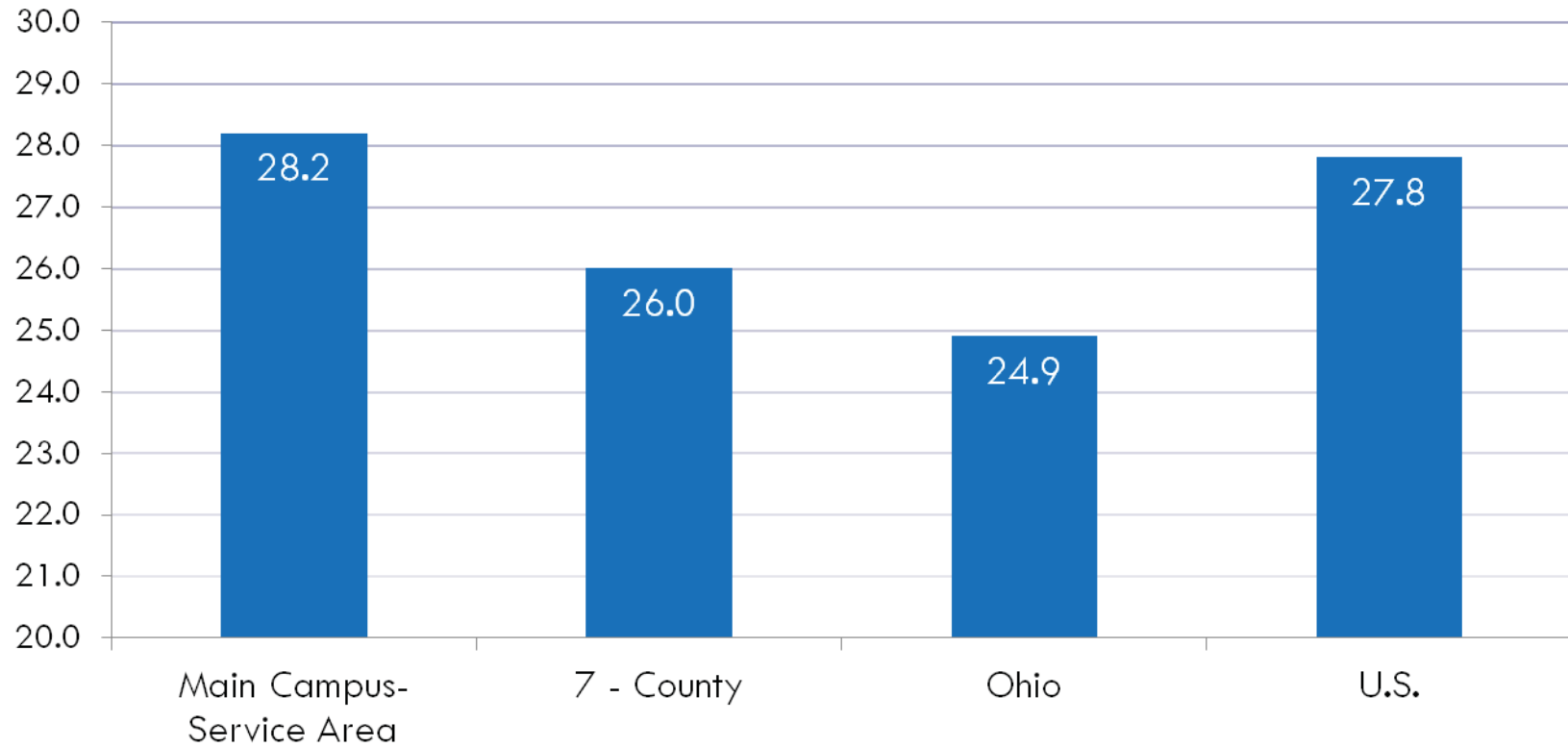
Source: Thomson Reuters

Insurance Status



Source: Thomson Reuters

Average Work Commute (mins)



Overview



Community Need Index (CNI)

- **Access to care and socio-economic factors are barriers to community health.**
 - The unemployment rate is highest within the Buckeye-Woodland Hills community (44104), over 30%. This zip code area also has the highest rate of minority citizens.
 - Downtown Cleveland (44115) has the highest percentage of uninsured citizens (44%) across all zip code areas in the Main Campus community. The uninsured percentage of the overall Main Campus community (27%) is much higher than the 7 – County area (12.3%) and Ohio (12.5%)
 - In contrast, Cleveland Heights (44118) has the lowest percentages of citizens living in poverty and the lowest unemployment rate (5.9%). This unemployment rate is much lower than Ohio (7.0%) and national (approximately 9%) rates.
- **The number of families and adults 65 and older living in poverty is a barrier to community health.**
 - The Downtown area (44114) has the highest rate of citizens 65 and older living in poverty (17.8%). Hough – Fairfax area (44103) has the highest percentage of married families with children living in poverty (26.8%). And finally, the Downtown area (44115) has the highest percentage of single parents with children living in poverty (89.9%).

Community Need Index (CNI)

Five prominent socio-economic barriers to community health quantified in the CHNI

- **Income Barriers** – Percentage of elderly, children, and single parents living in poverty
- **Cultural/Language Barriers** – Percentage Caucasian/non-Caucasian and percentage of adults over the age of 25 with limited English proficiency
- **Educational Barriers** – Percentage without high school diploma
- **Insurance Barriers** – Percentage uninsured and percentage unemployed
- **Housing Barriers** – Percentage renting houses

Assigning CNI Scores

To determine the severity of barriers to health care access in a given community, the CNI gathers data about the community's socio-economy. For example, what percentage of the population is elderly and living in poverty; what percentage of the population is uninsured; what percentage of the population is unemployed, etc.

Zip	City	County	Tot Pop	HH	Rental %	Unemp %	Uninsu %	Minor %	Lim Eng	No HS Dip	65+ Pov	M w/ Chil Pov	Sin w/ Chil Pov	Inc Rank	Insur Rank	Educ Rank	Cult Rank	Hous Rank	CNI Score
44127	Slavic Village	Cuyahoga	7,819	2,792	40.5%	24.3%	30.8%	62.4%	11.9%	38.2%	9.0%	14.5%	59.4%	5	5	5	5	5	5
44120	Shaker Heights	Cuyahoga	42,254	18,181	45.2%	13.1%	21.6%	81.8%	7.3%	14.8%	5.7%	8.7%	40.7%	3	5	2	5	5	4.2
44118	Cleveland Heights	Cuyahoga	39,543	15,660	31.7%	5.9%	11.1%	45.7%	9.7%	5.7%	4.1%	1.9%	25.7%	2	3	1	5	5	3.2
44115	Downtown	Cuyahoga	8,009	2,786	66.4%	40.1%	44.0%	86.4%	6.7%	31.3%	5.3%	6.8%	89.9%	5	5	5	5	5	5
44114	Downtown	Cuyahoga	4,131	2,304	55.6%	24.7%	37.2%	75.2%	31.2%	32.0%	17.8%	18.4%	68.2%	5	5	5	5	5	5
44112	East Cleveland	Cuyahoga	28,731	11,702	42.9%	19.1%	29.7%	95.2%	5.1%	22.2%	8.8%	10.8%	50.9%	4	5	4	5	5	4.8
44108	Bratenahl	Cuyahoga	31,208	11,814	39.2%	18.1%	28.0%	96.2%	3.4%	24.8%	8.6%	16.2%	48.7%	4	5	4	5	5	4.8
44106	University Circle	Cuyahoga	28,854	12,026	57.5%	19.3%	31.0%	63.8%	12.2%	18.4%	9.6%	7.1%	52.4%	4	5	3	5	5	4.6
44104	Buckeye-Woodland Hills	Cuyahoga	24,373	9,122	52.4%	30.2%	39.2%	98.2%	3.2%	32.5%	8.6%	25.4%	64.1%	5	5	5	5	5	5
44103	Hough - Fairfax	Cuyahoga	21,941	8,297	47.1%	26.1%	36.2%	88.9%	9.7%	34.8%	9.3%	26.8%	55.9%	5	5	5	5	5	5
Main Campus Community Summary			236,863	94,684	45.5%	17.4%	27.3%	78.9%	10.9%	20.9%	35.2%	10.3%	52.1%	5	5	4	5	5	4.8

Using this data we assign a score to each barrier condition. A score of 1.0 indicates a zip code area with the lowest socio-economic barriers (low need), while a score of 5.0 represents a zip code area with the most socio-economic barriers (high need). The scores are then aggregated and averaged for a final CNI score (each barrier receives equal weight in the average).

A CNI score above 3.0 will typically indicate a specific socio-economic factor impacting the community's access to care.

Source: Thomson Reuters

Community Need Index (CNI)

Zip	City	County	Inc Rank	Insur Rank	Educ Rank	Cult Rank	Hous Rank	CNI Score
44127	Slavic Village	Cuyahoga	5	5	5	5	5	5.0
44115	Downtown	Cuyahoga	5	5	5	5	5	5.0
44114	Downtown	Cuyahoga	5	5	5	5	5	5.0
44104	Buckeye-Woodland Hills	Cuyahoga	5	5	5	5	5	5.0
44103	Hough – Fairfax	Cuyahoga	5	5	5	5	5	5.0
44112	East Cleveland	Cuyahoga	4	5	4	5	5	4.8
44108	Bratenahl	Cuyahoga	4	5	4	5	5	4.8
44106	University Circle	Cuyahoga	4	5	3	5	5	4.6
44120	Shaker Heights	Cuyahoga	3	5	2	5	5	4.2
44118	Cleveland Heights	Cuyahoga	2	3	1	5	5	3.2
Main Campus Hospital Community			5	5	4	5	5	4.8

- 5 out of the 10 zip code areas have a CNI score of 5.0 out of 5.0 It is clear that these areas are in need of substantial community health assistance to combat traditional barriers to health care such as income, access and education.

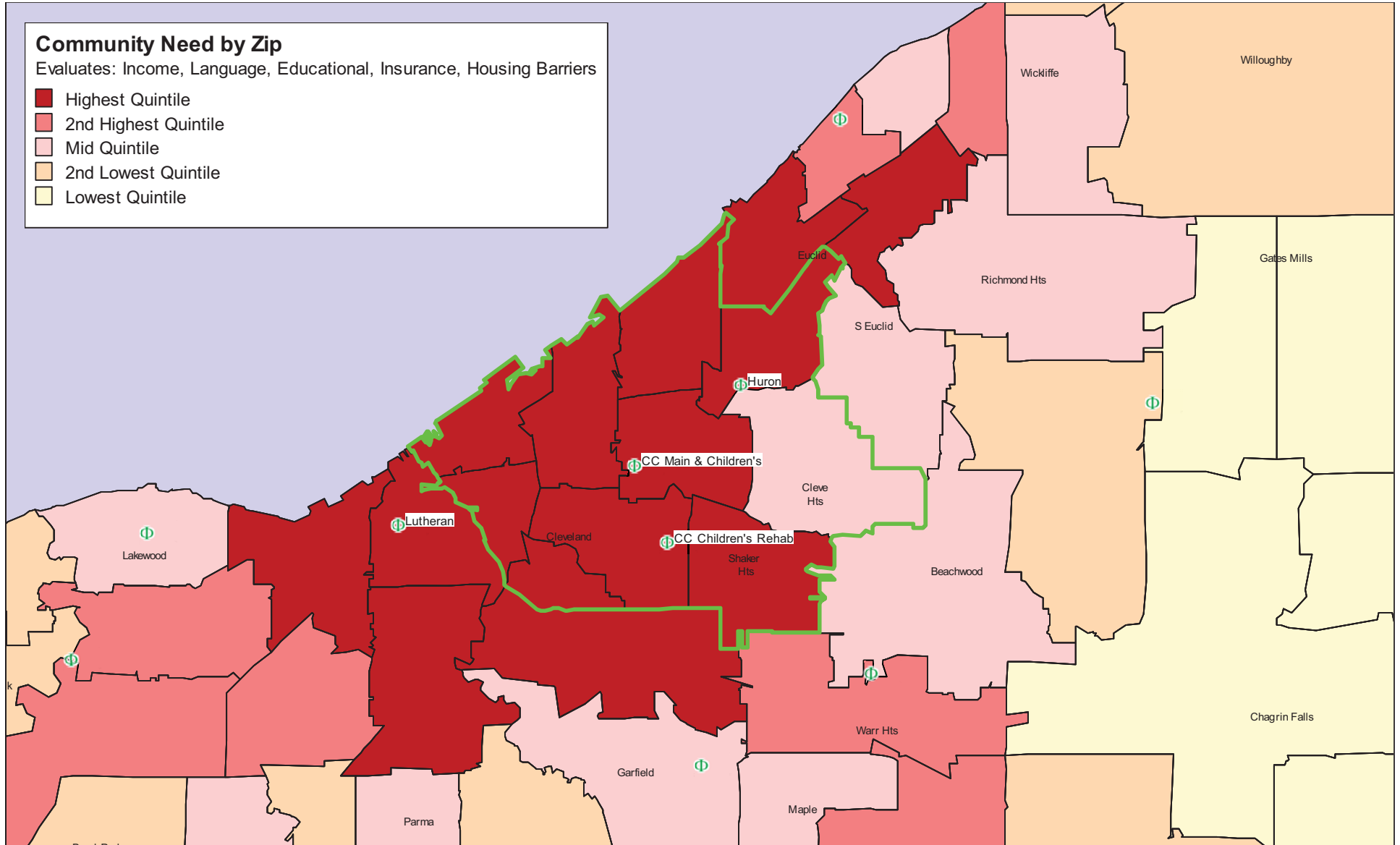
Community Need Index (CNI)

Zip	Tot Pop	HH	Rental %	Unemp %	Uninsu %	Minor %	Lim Eng	No HS Dip	65+ Pov	M w/ Chil Pov	Sin w/ Chil Pov	Inc Rank	Insur Rank	Educ Rank	Cult Rank	Hous Rank	CNI Score
44127	7,819	2,792	40.5%	24.3%	30.8%	62.4%	11.9%	38.2%	9.0%	14.5%	59.4%	5	5	5	5	5	5
44115	8,009	2,786	66.4%	40.1%	44.0%	86.4%	6.7%	31.3%	5.3%	6.8%	89.9%	5	5	5	5	5	5
44114	4,131	2,304	55.6%	24.7%	37.2%	75.2%	31.2%	32.0%	17.8%	18.4%	68.2%	5	5	5	5	5	5
44104	24,373	9,122	52.4%	30.2%	39.2%	98.2%	3.2%	32.5%	8.6%	25.4%	64.1%	5	5	5	5	5	5
44103	21,941	8,297	47.1%	26.1%	36.2%	88.9%	9.7%	34.8%	9.3%	26.8%	55.9%	5	5	5	5	5	5

the community needs.

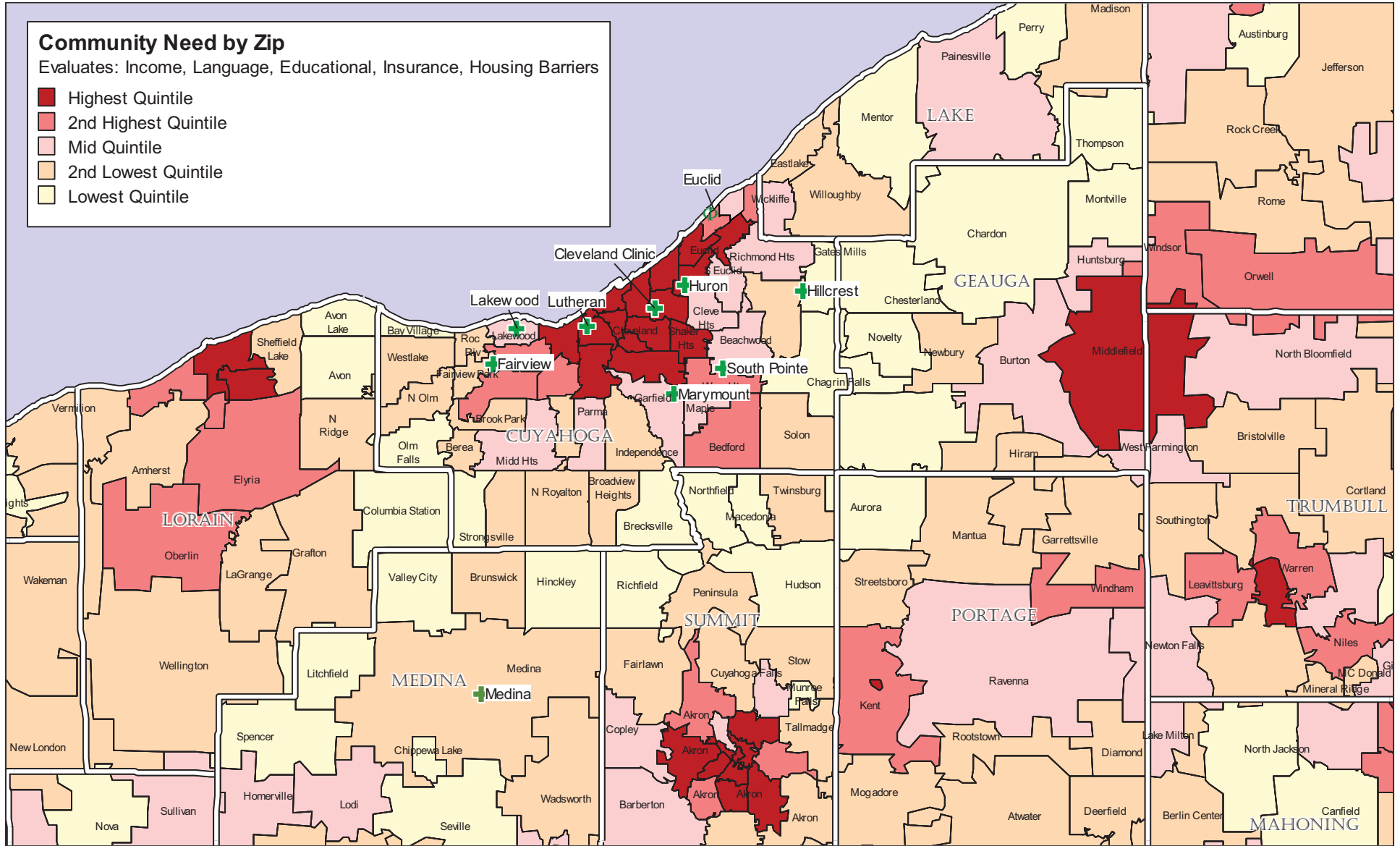
- A closer look at the hospital community reveals the highest unemployment and uninsured rates Downtown (44115).
- The Buckeye-Woodland Hills community (44104) has the highest percentage of minorities (98.2%).
- Downtown (44114) shows the highest rates of 65 and older citizens living in poverty and citizens with limited English within the Main Campus community (17.8%).
- An interesting disparity is between the Hough – Fairfax area (44103) which has the highest rate of married families with children living in poverty (26.8%); whereas Downtown (44115) has the highest percentage of single families with children living in poverty (89.9%) and a very low rate of married families with children living in poverty (6.8%).
- The CNI provides greater ability to diagnose community need as it explores zip code areas with significant barriers to health care access. The overall unemployment rate for the Main Campus community is 17.4%; above the Ohio rate of 7.0% and the national unemployment rate currently fluctuating around 9%. The top 5 zip code areas with the highest CNI scores all show substantially higher unemployment rates than the hospital community, Ohio or the country (range in the 5 worst areas: 24.3 – 40.1%).

Main Campus – CNI Map



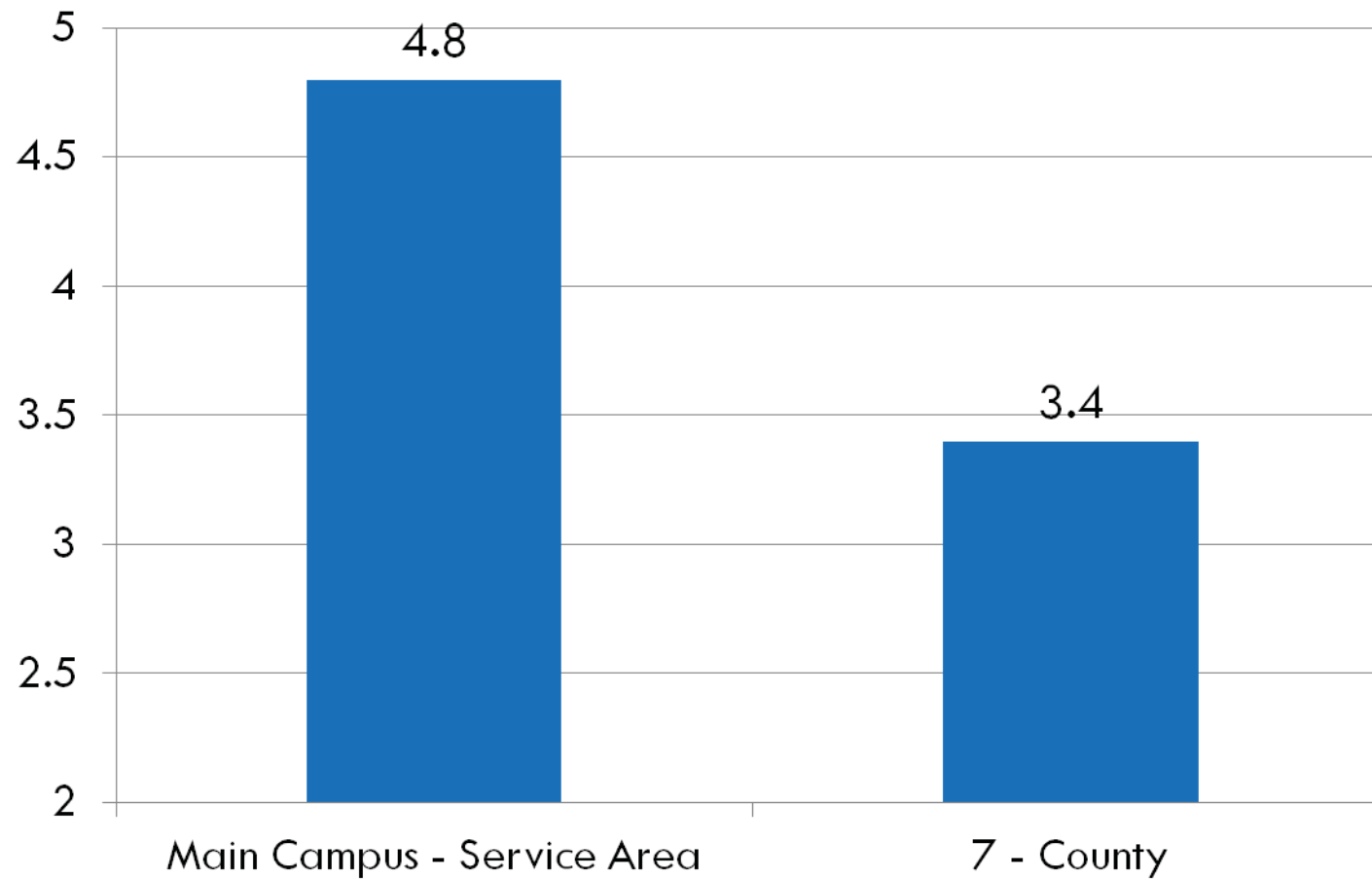
Source: Thomson Reuters

Cleveland Clinic Regional Community: CNI Map



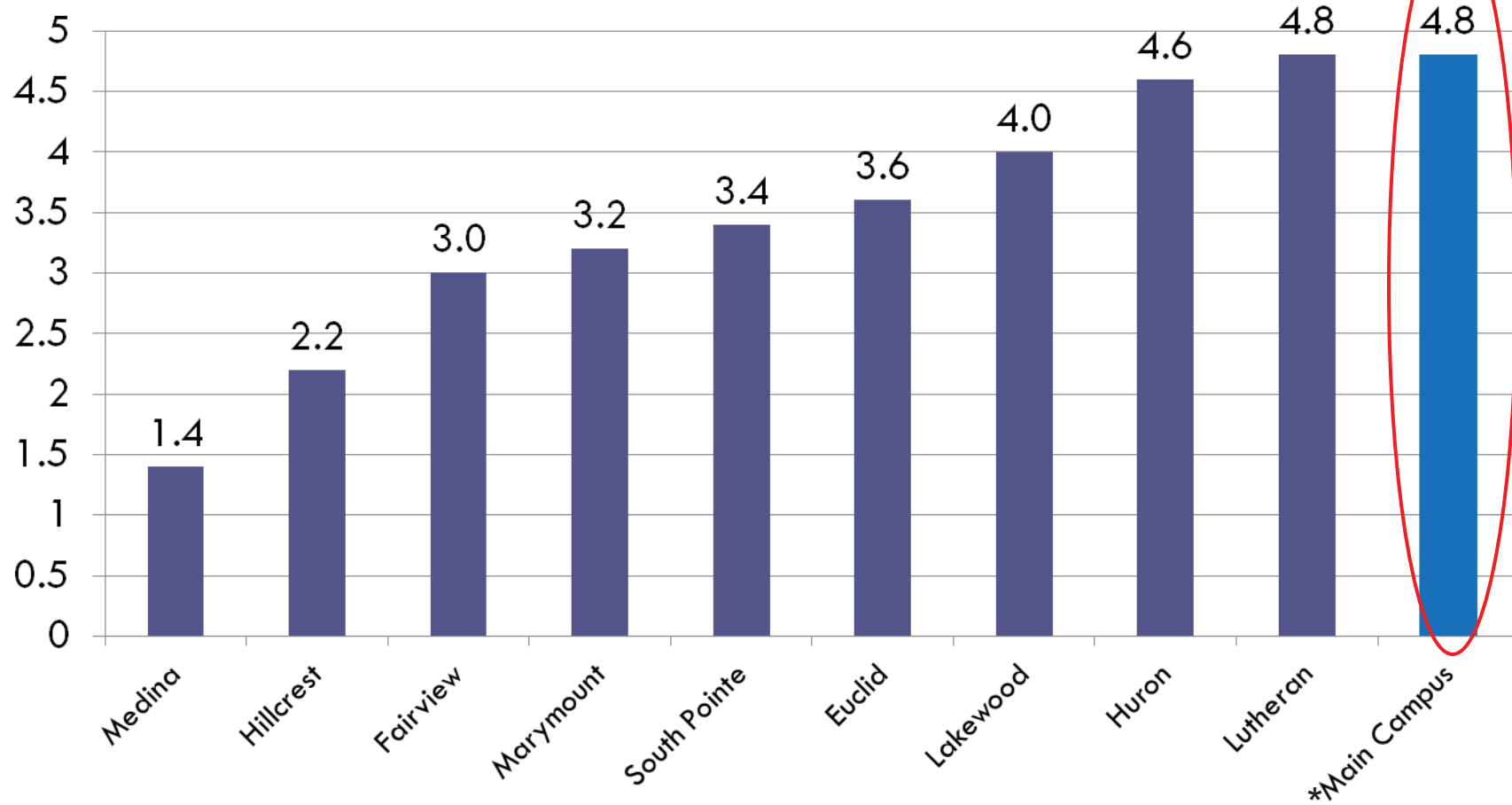
Source: Thomson Reuters

Community Need Index



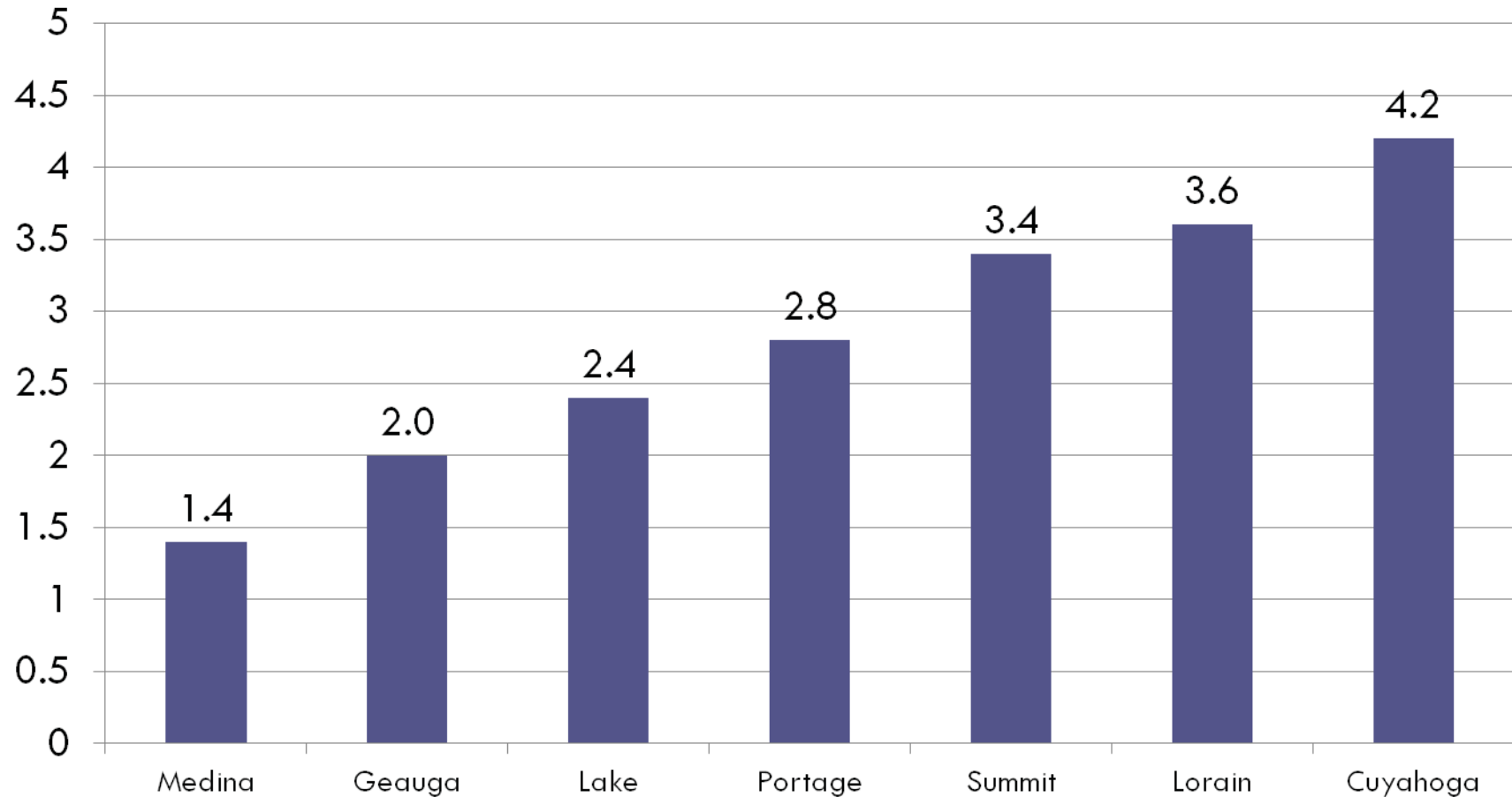
The Main Campus community has a higher CNI score than the 7 – County area.

Community Need Index - Hospital Communities



The Main Campus and Lutheran Hospital communities have the highest CNI scores across all hospital communities.

Community Need Index - Counties



Cuyahoga County has the highest CNI score (4.2; most socio-economic barriers to community health) for the study area; whereas Medina County has the lowest CNI score (1.4; least number of socio-economic barriers to community health)

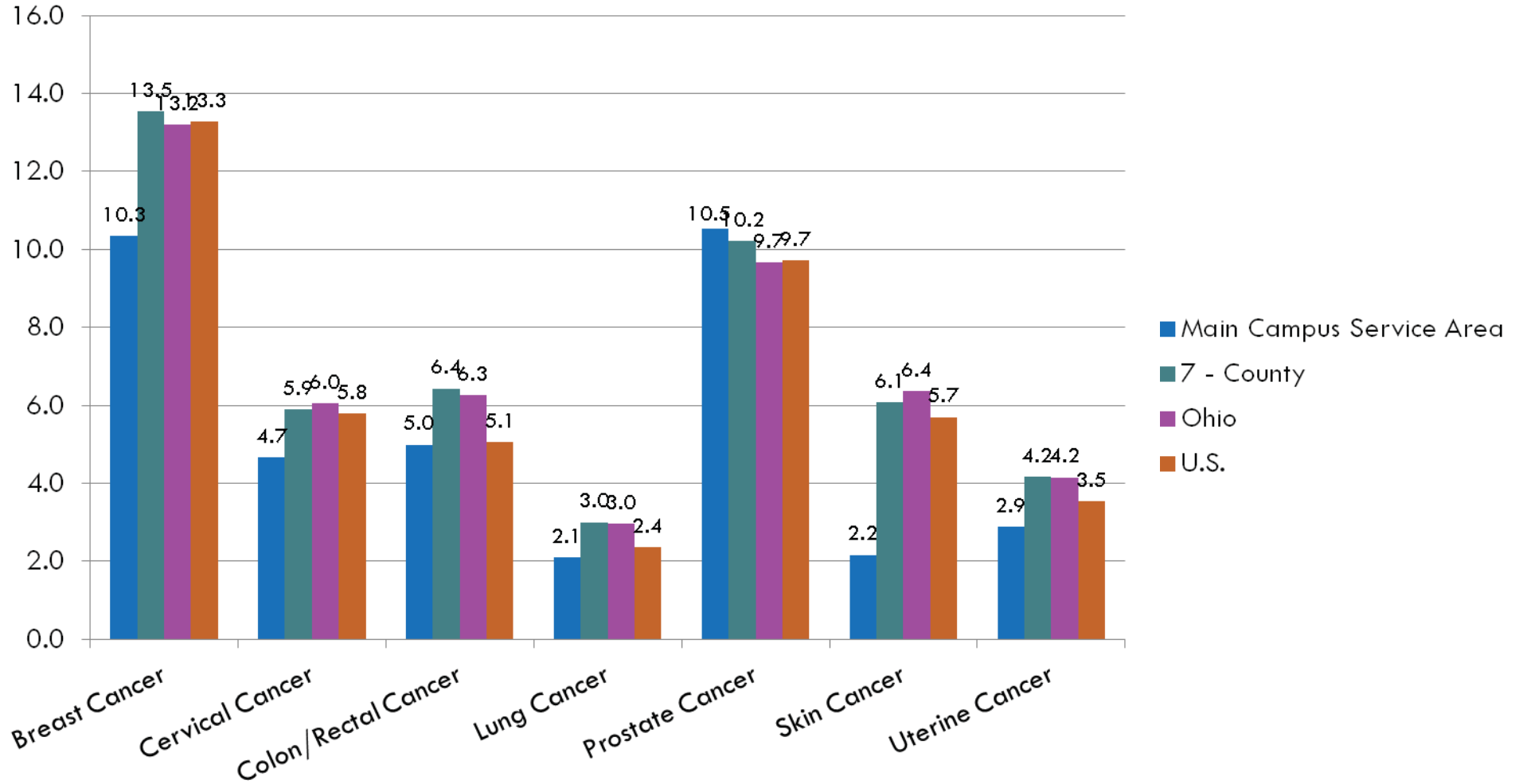
Overview



Disease Prevalence Profile

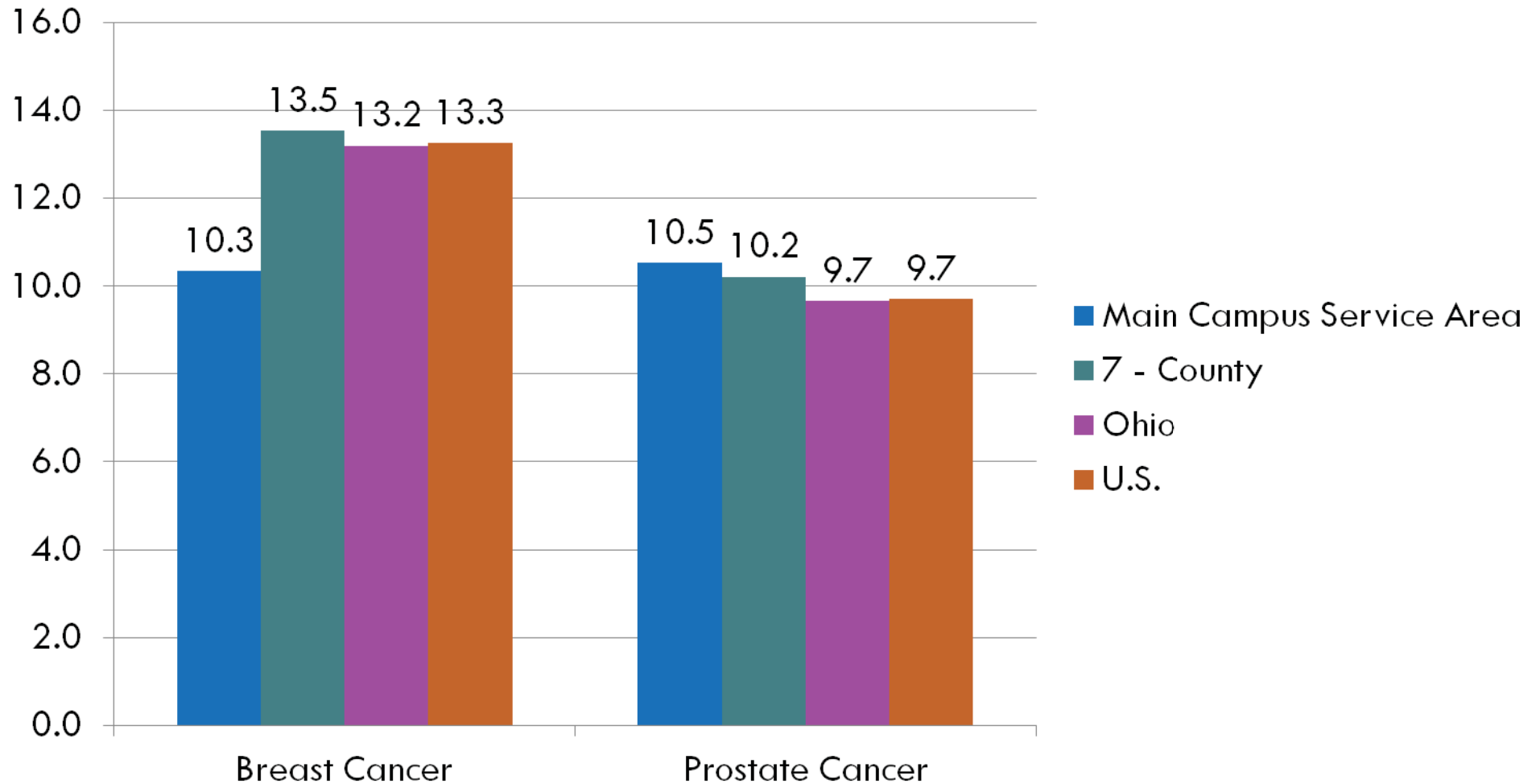
- ❑ **Breast cancer & prostate cancer** are the two most prevalent forms of cancer, therefore the consultants specifically reference the rate for each of the 12 Cleveland Clinic hospital communities. The Main Campus community has lower prevalence rates for all cancers (except prostate) than the 7 - County area and Ohio.
- ❑ **Hypertension prevalence is much higher** in the Main Campus community (337 per 1000 pop.) when compared with the 7 - County area and Ohio (299 and 286 respectively).
- ❑ **Diabetes prevalence rates are higher** in the Main Campus community (109 per 1000 pop.) than the 7 - County area (83) or Ohio (78).
- ❑ **Stroke rates are higher** in the Main Campus community (38 per 1000 pop.) than the 7 - County area (29) or Ohio (27).

Cancer Prevalence Rates

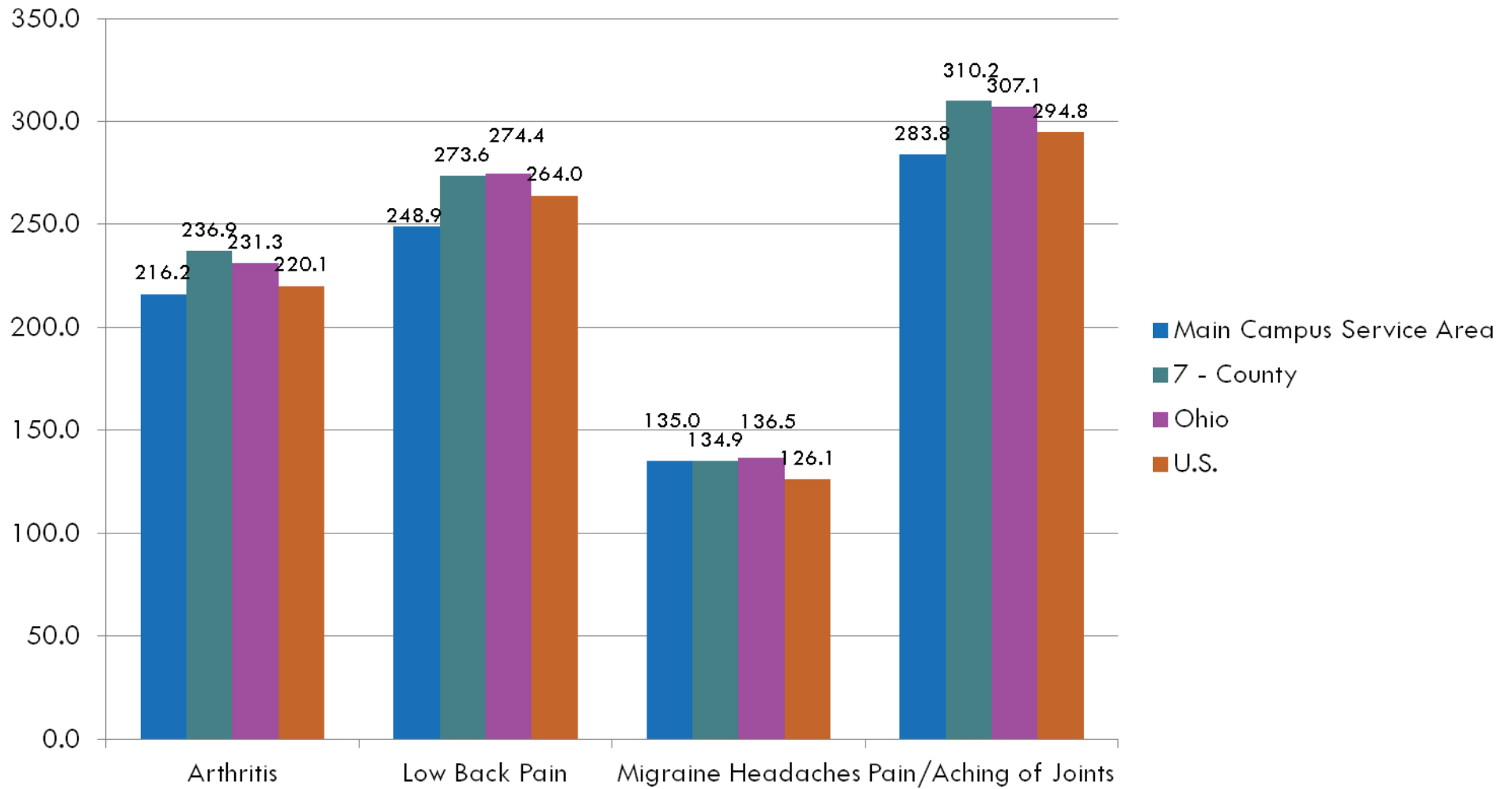


Source: Thomson Reuters

Cancer Prevalence Rates – Breast & Prostate

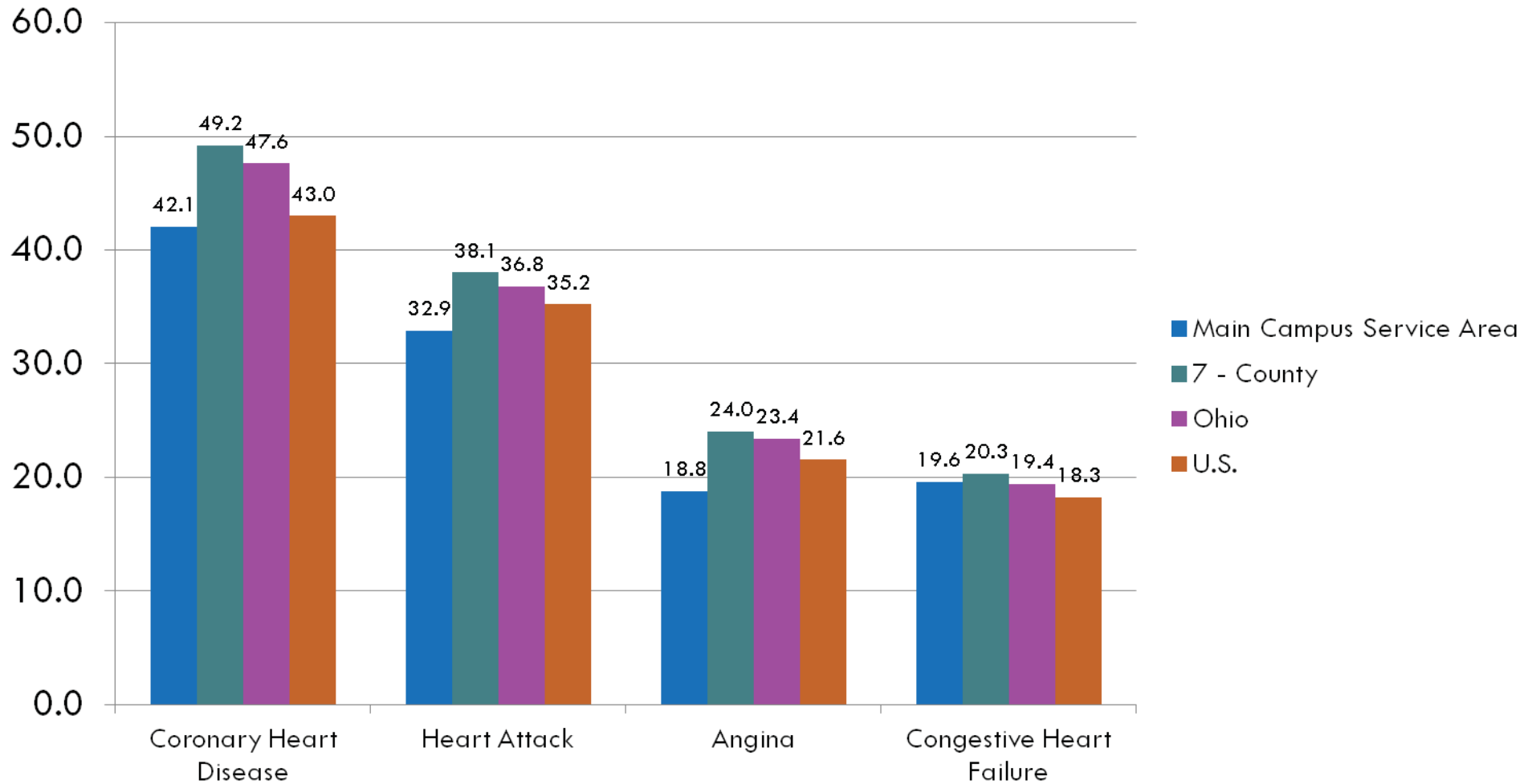


Aches/Pains Prevalence Rates



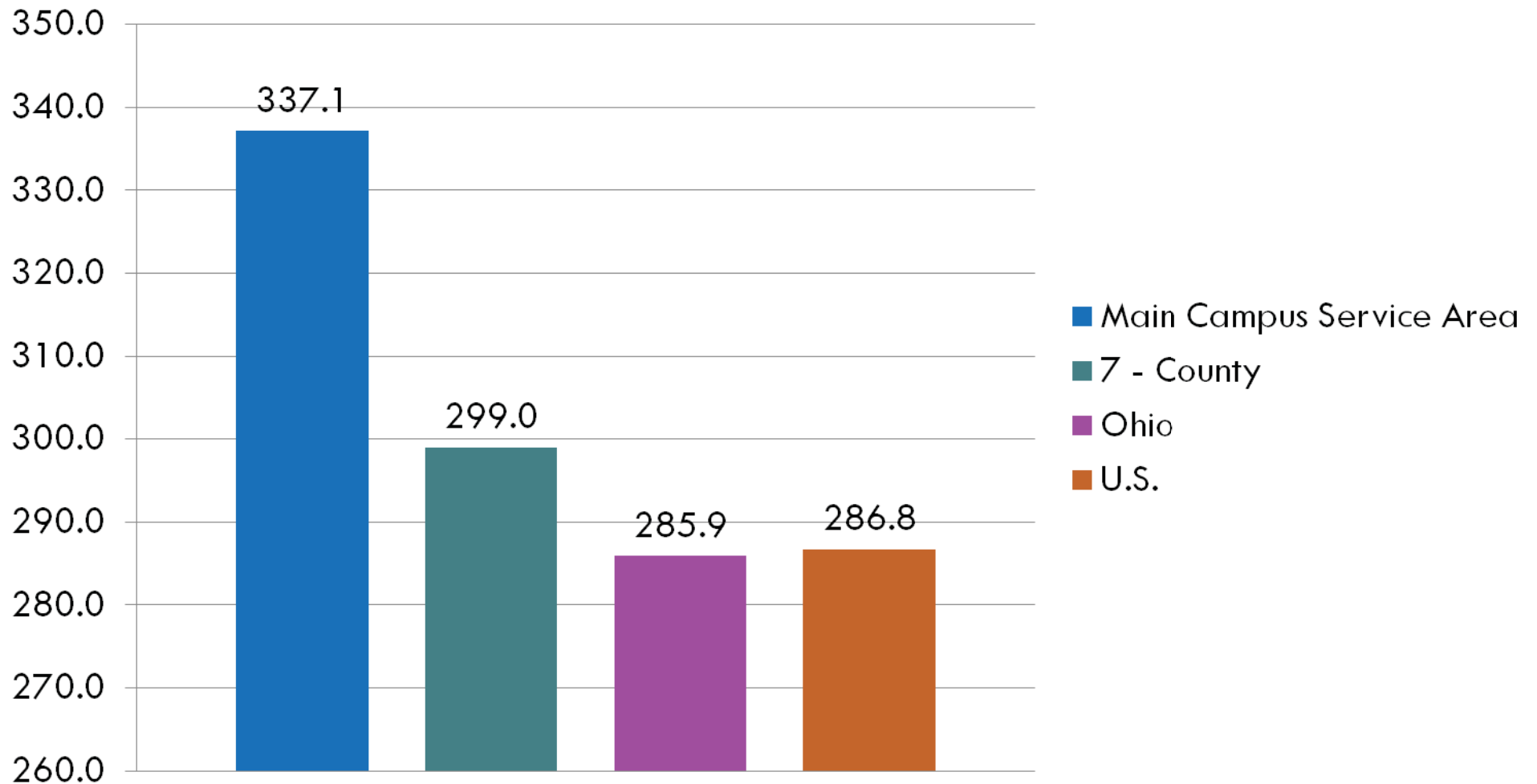
Source: Thomson Reuters

Heart-Related Prevalence Rates



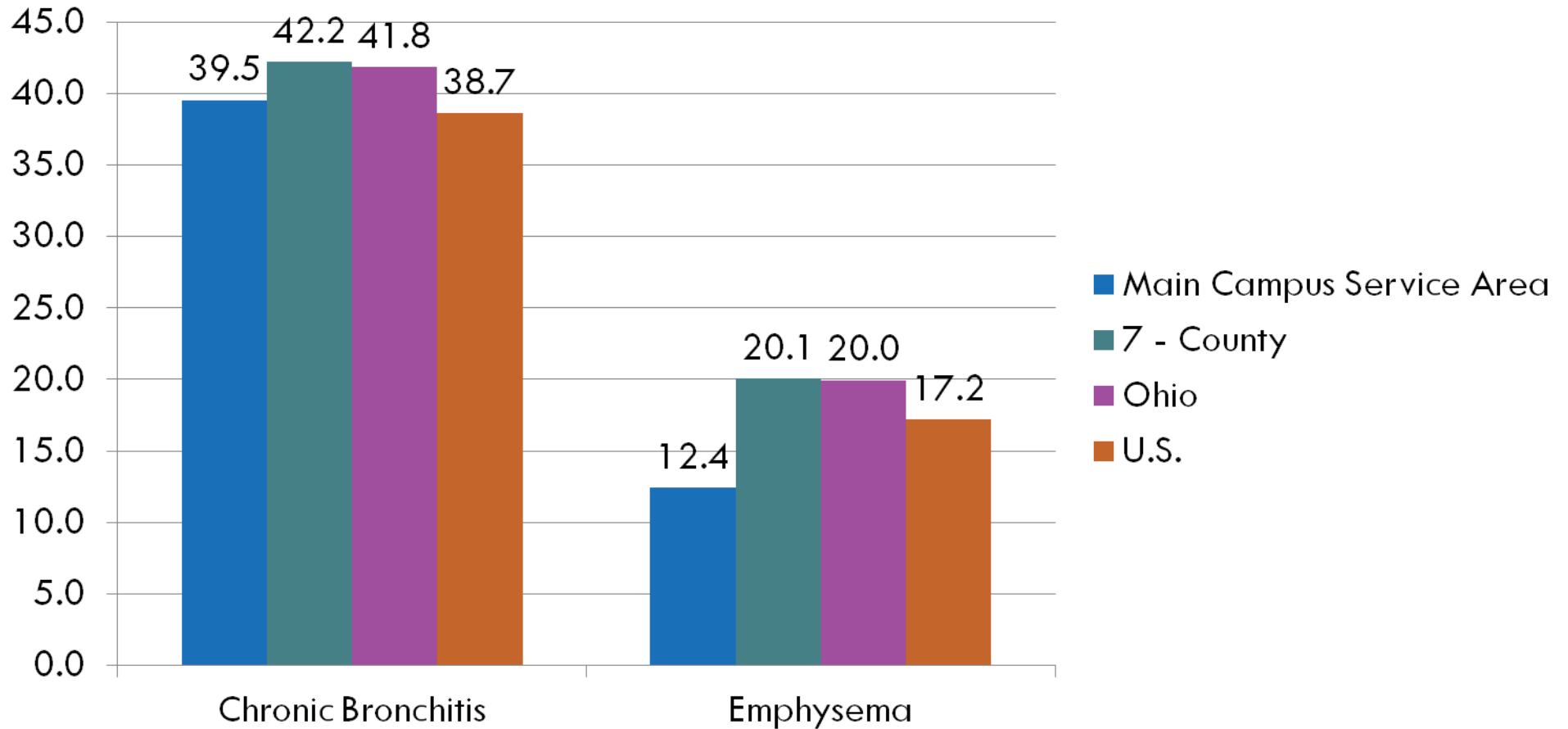
Source: Thomson Reuters

Hypertension – Heart Related Prevalence Rates

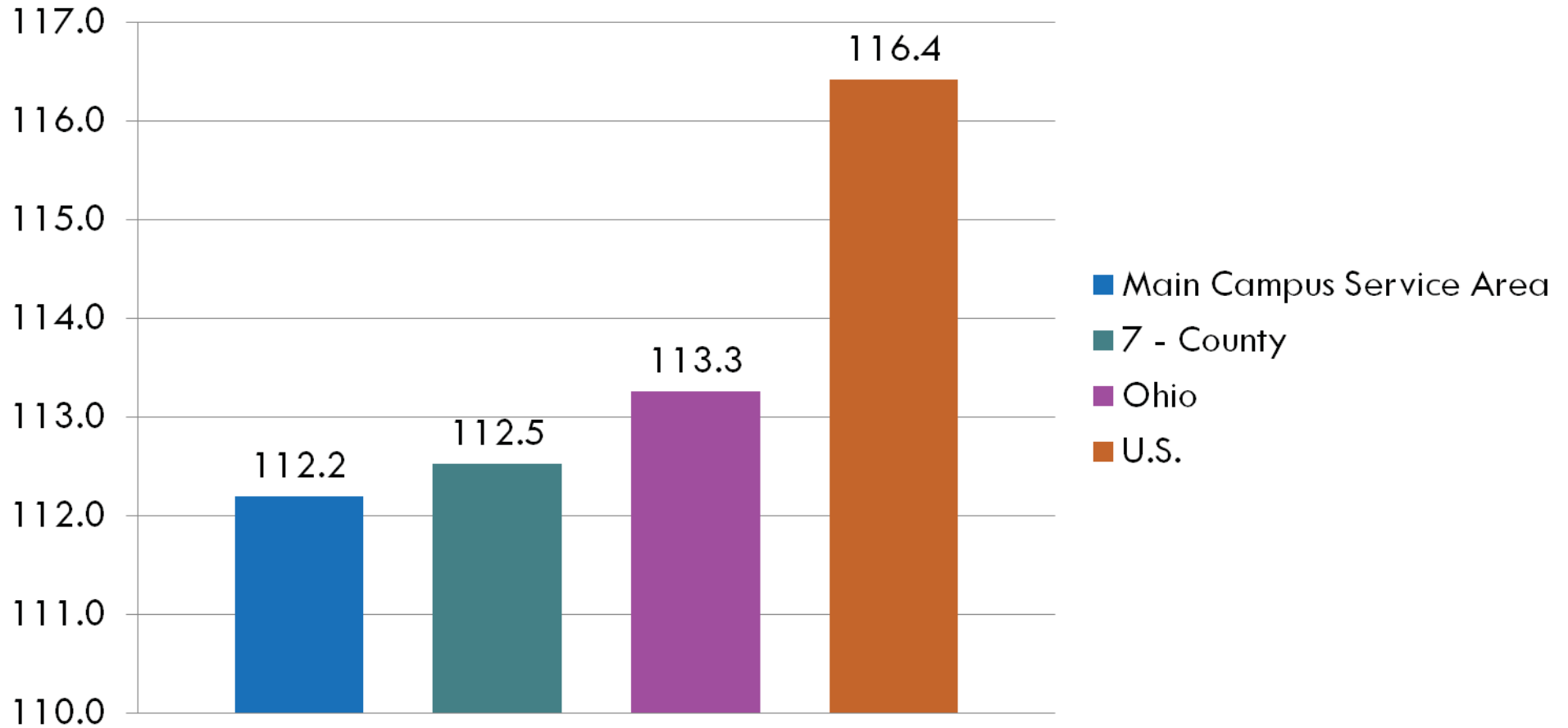


Source: Thomson Reuters

Lung-Related Prevalence Rates

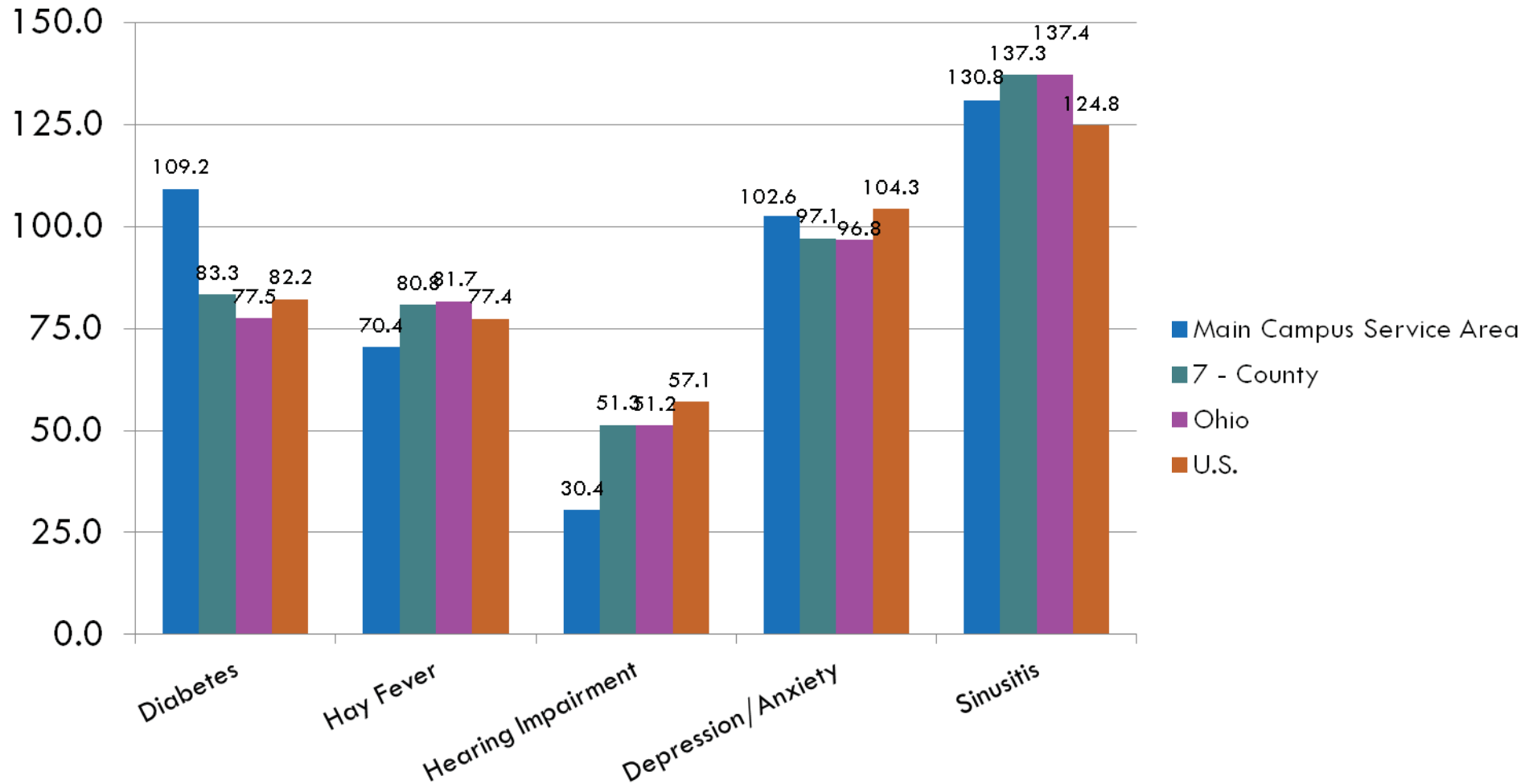


Asthma - Lung Related Prevalence Rates



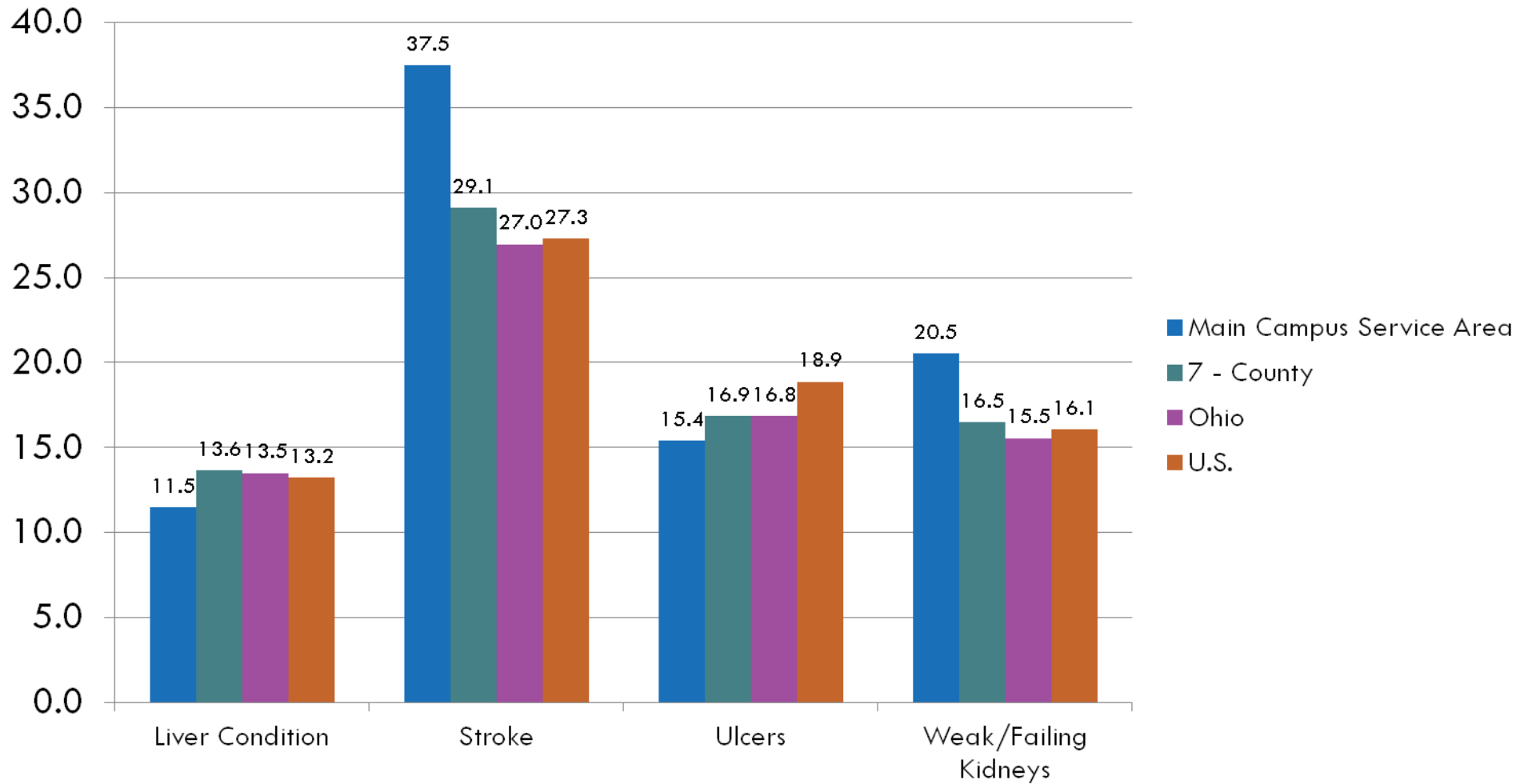
Source: Thomson Reuters

Disease Prevalence Rates



Source: Thomson Reuters

Disease Prevalence Rates



Source: Thomson Reuters

Overview



Prevention Quality Indicators Index (PQI)

- **PQI scores in the Main Campus community are at or above Ohio for all factors. The Main Campus community is substantially higher within the following PQIs:**

Prevention Quality Indicators (PQI)	Main Campus Community	Ohio	Difference
Low Birth Weight Rate (PQI 9)	10.37	1.21	+9.16
Adult Asthma Admission Rate (PQI 15)	5.68	1.99	+3.69
Congestive Heart Failure Admission Rate (PQI 8)	7.70	4.66	+3.04

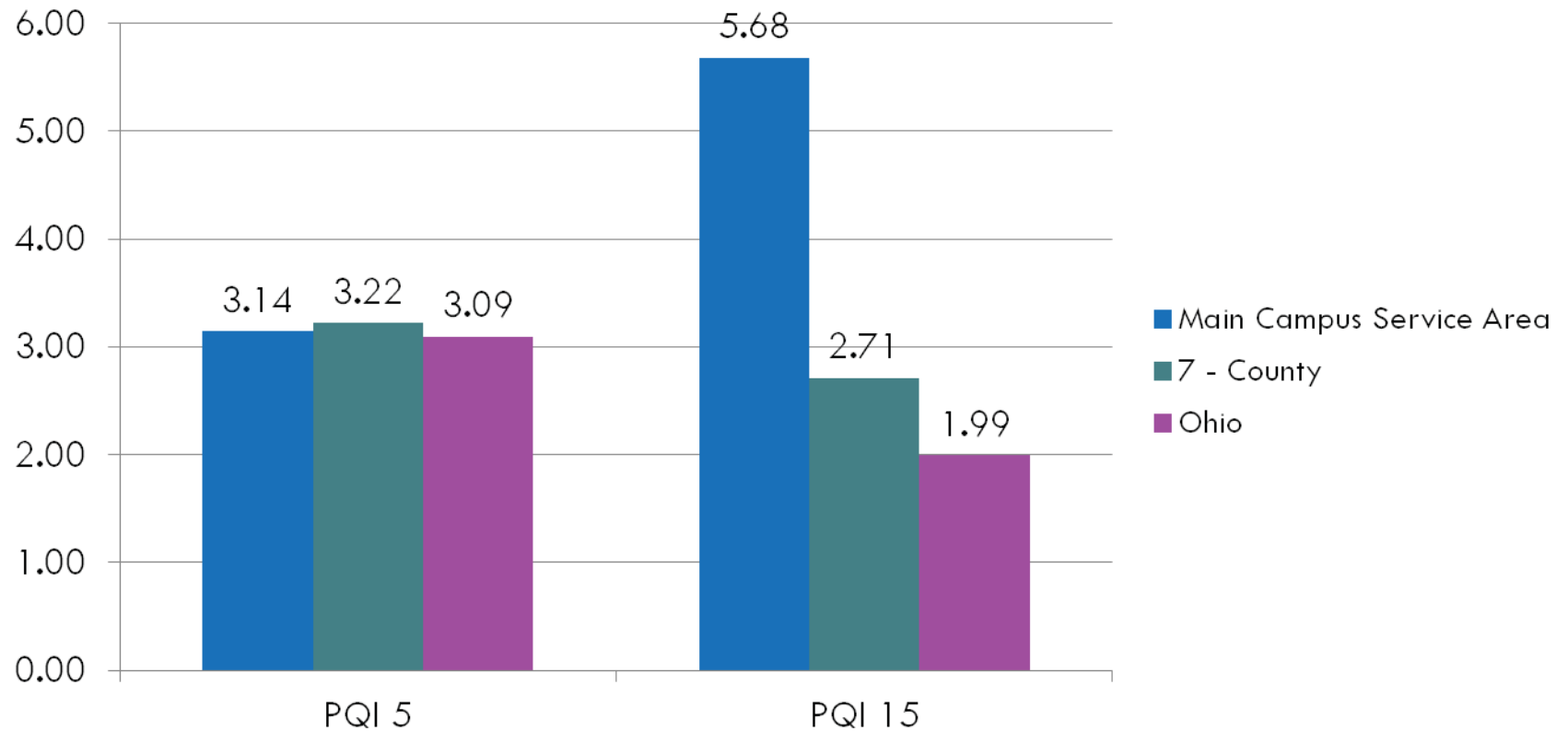
- **PQI scores in the Main Campus community show admission rates that are equal to Ohio rates for only Perforated Appendix (Both = 0.48).**
- **There are no PQIs in which the Main Campus community shows lower hospital admission rates than Ohio, indicating preventive care services are not utilized or readily available.**

Prevention Quality Indicators Index (PQI)

PQI Subgroups

- **Chronic Lung Conditions**
 - PQI 5 Chronic Obstructive Pulmonary Disease Admission Rate
 - PQI 15 Adult Asthma Admission Rate
- **Diabetes**
 - PQI 1 Diabetes Short-Term Complications Admission Rate
 - PQI 3 Diabetes Long-Term Complications Admission Rate
 - PQI 14 Uncontrolled Diabetes Admission Rate
 - PQI 16 Lower Extremity Amputation Rate Among Diabetic Patients
- **Heart Conditions**
 - PQI 7 Hypertension Admission Rate
 - PQI 8 Congestive Heart Failure Admission Rate
 - PQI 13 Angina Without Procedure Admission Rate
- **Other Conditions**
 - PQI 2 Perforated Appendix Admission Rate
 - PQI 9 Low Birth Weight Rate
 - PQI 10 Dehydration Admission Rate
 - PQI 11 Bacterial Pneumonia Admission Rate
 - PQI 12 Urinary Tract Infection Admission Rate

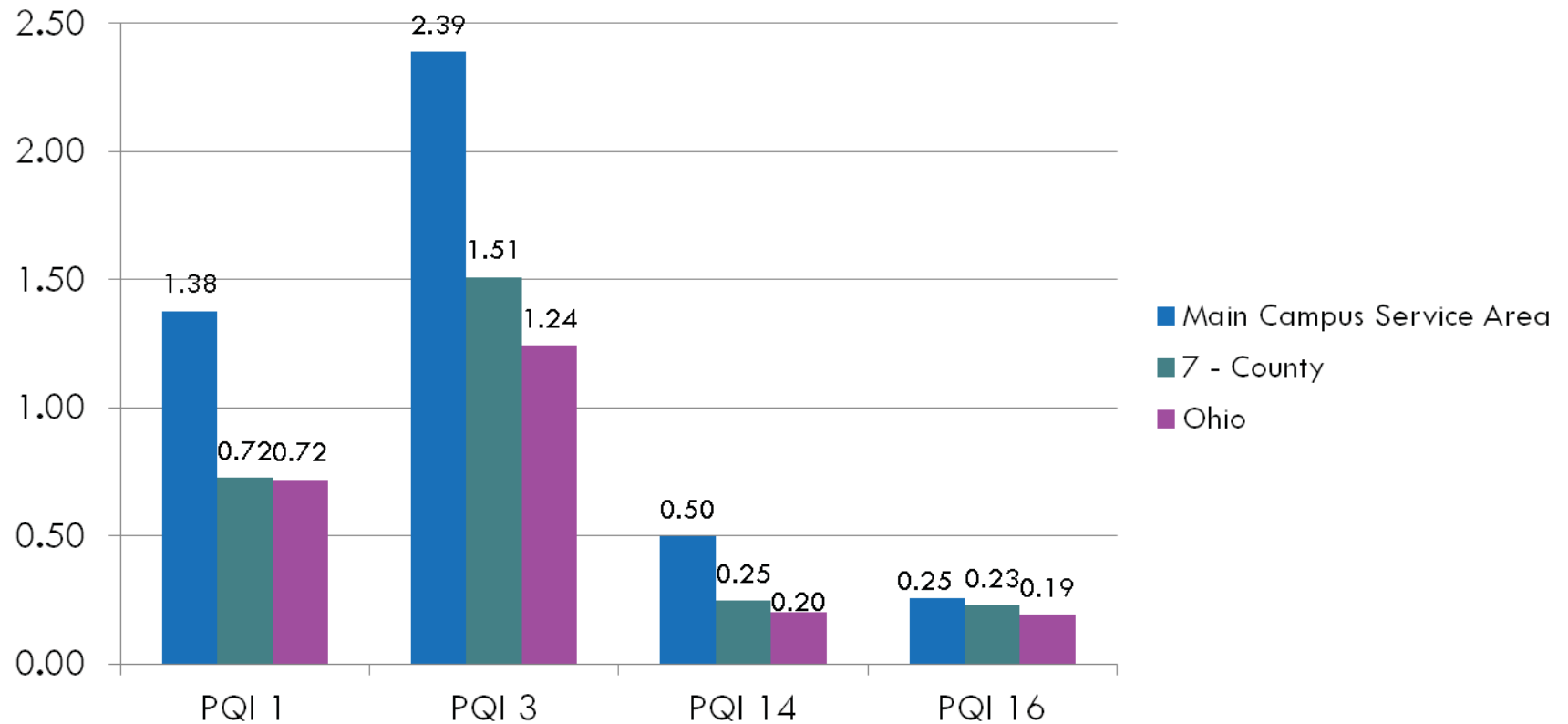
Chronic Lung Conditions



PQI 5 Chronic Obstructive Pulmonary Disease Admission Rate

PQI 15 Adult Asthma Admission Rate

Diabetes



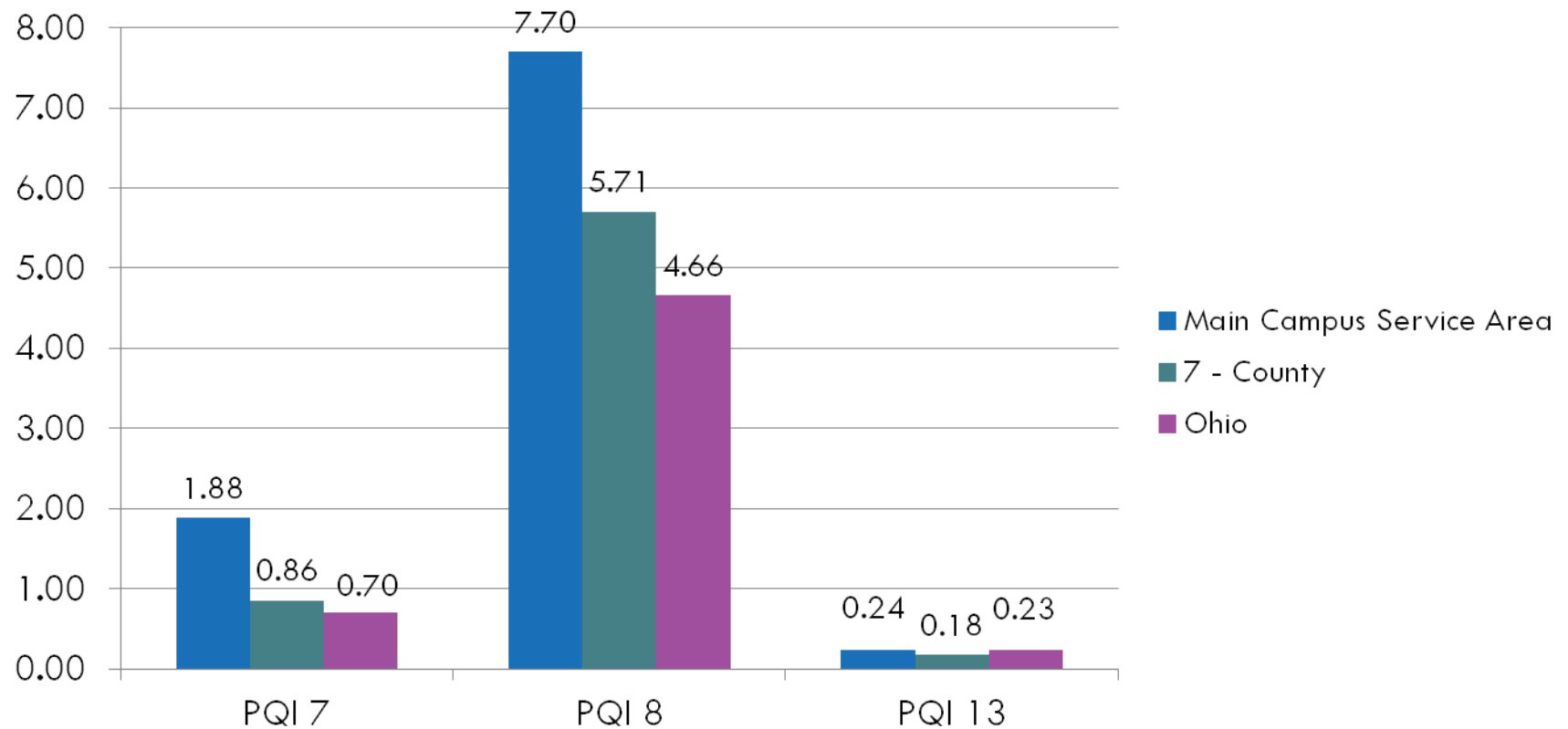
PQI 1 Diabetes Short-Term Complications Admission Rate

PQI 3 Diabetes Long-Term Complications Admission Rate

PQI 14 Uncontrolled Diabetes Admission Rate

PQI 16 Lower Extremity Amputation Rate Among Diabetic Patients

Heart Conditions

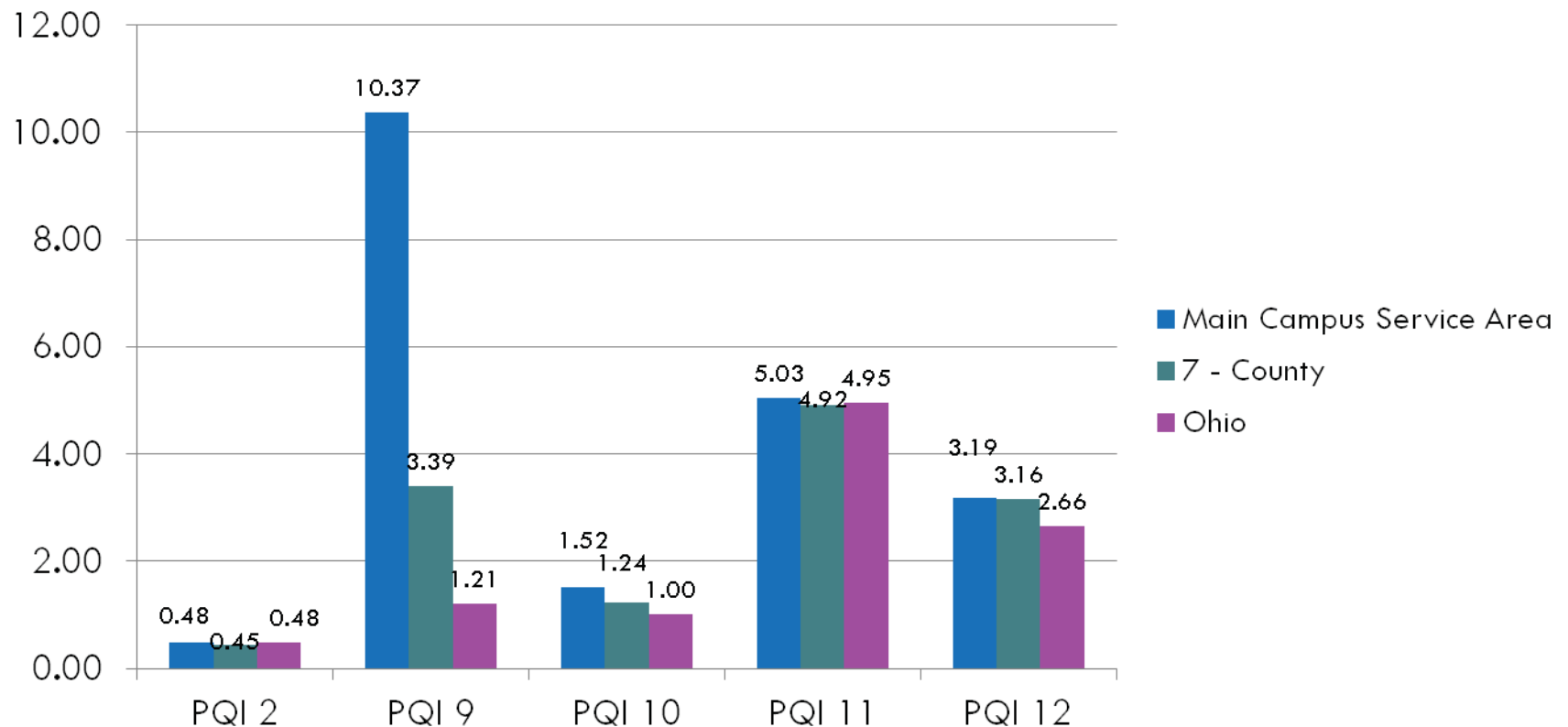


PQI 7 Hypertension Admission Rate

PQI 8 Congestive Heart Failure Admission Rate

PQI 13 Angina Without Procedure Admission Rate

Other Conditions



PQI 2 Perforated Appendix Admission Rate

PQI 9 Low Birth Weight Rate

PQI 10 Dehydration Admission Rate

PQI 11 Bacterial Pneumonia Admission Rate

PQI 12 Urinary Tract Infection Admission Rate

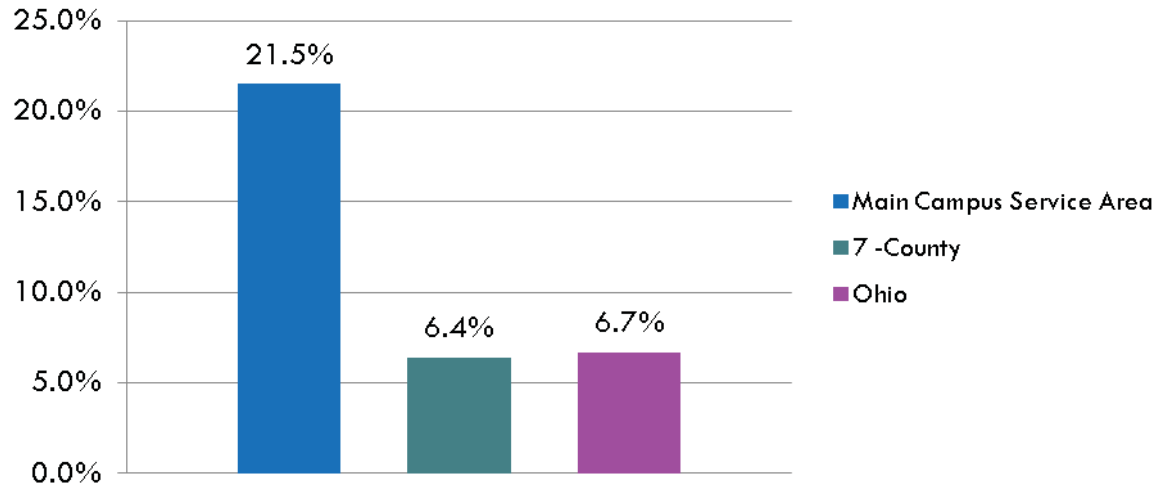
Overview



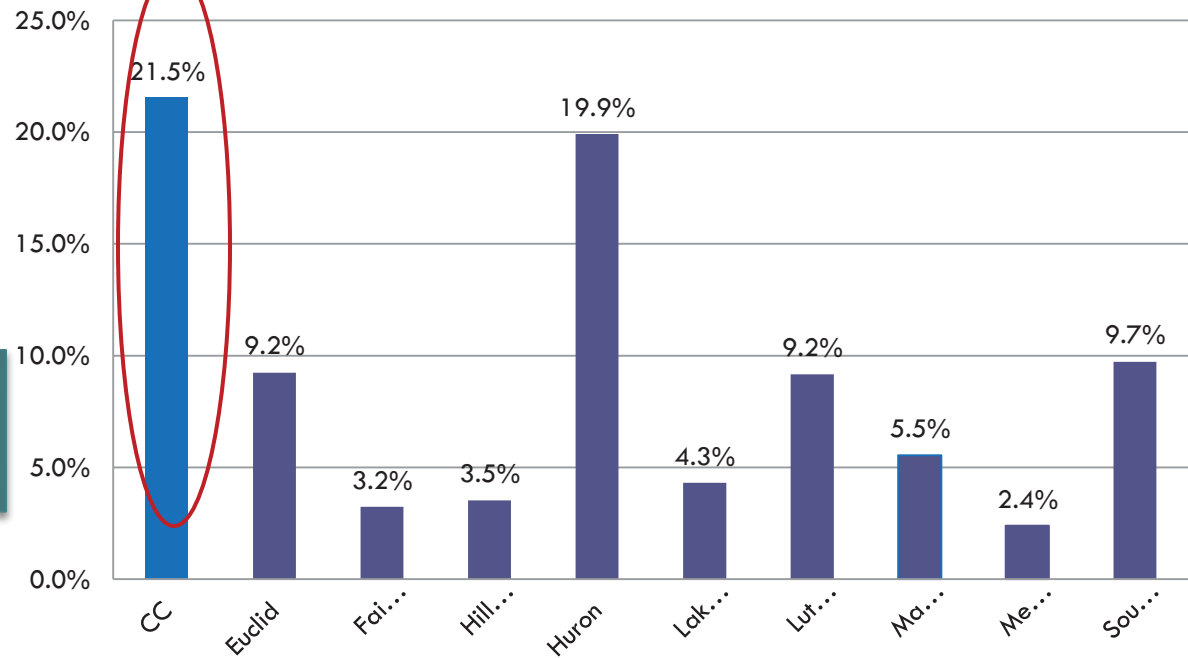
Penetrating Trauma Data

- ❑ Tripp Umbach collected statistical data from the Ohio Department of Public Safety, Division of Emergency Medical Services, Ohio Trauma Registry, also known as OTR. The data refers to all trauma cases resulting in severe injury occurring in Ohio during 2010. OTR trauma data provides the ability to quantify the overall frequency of trauma cases by occurrence type.
- ❑ There are five types of trauma quantified by OTR: asphyxia, blunt, burns, penetrating and “other”. The consultants identified the percentage of penetrating traumas compared to the overall number of trauma cases in a zip code defined hospital community. The resulting percentage provides a secondary data source quantifying the number of violent traumas related to a foreign object or shattered bone.
- ❑ Penetrating trauma can be caused by a foreign object or by fragments of a broken bone. Usually, penetrating trauma occurs in violent crime or armed combat; penetrating injuries are commonly caused by gunshots and stabbings.
- ❑ **Main Campus, as part of the Cleveland Clinic Main Hospital community, has the highest penetrating trauma rate (21.5%)** across all hospital communities. The rate for the Cleveland Clinic Hospital is also much higher than the average for the 7-County area (6.4%) and Ohio (6.7%).

2010 Trauma: % Penetrating



2010 Trauma by Community: % Penetrating



Penetrating trauma data is based on the residence zip code of the trauma patient, not where the trauma was treated or occurred.

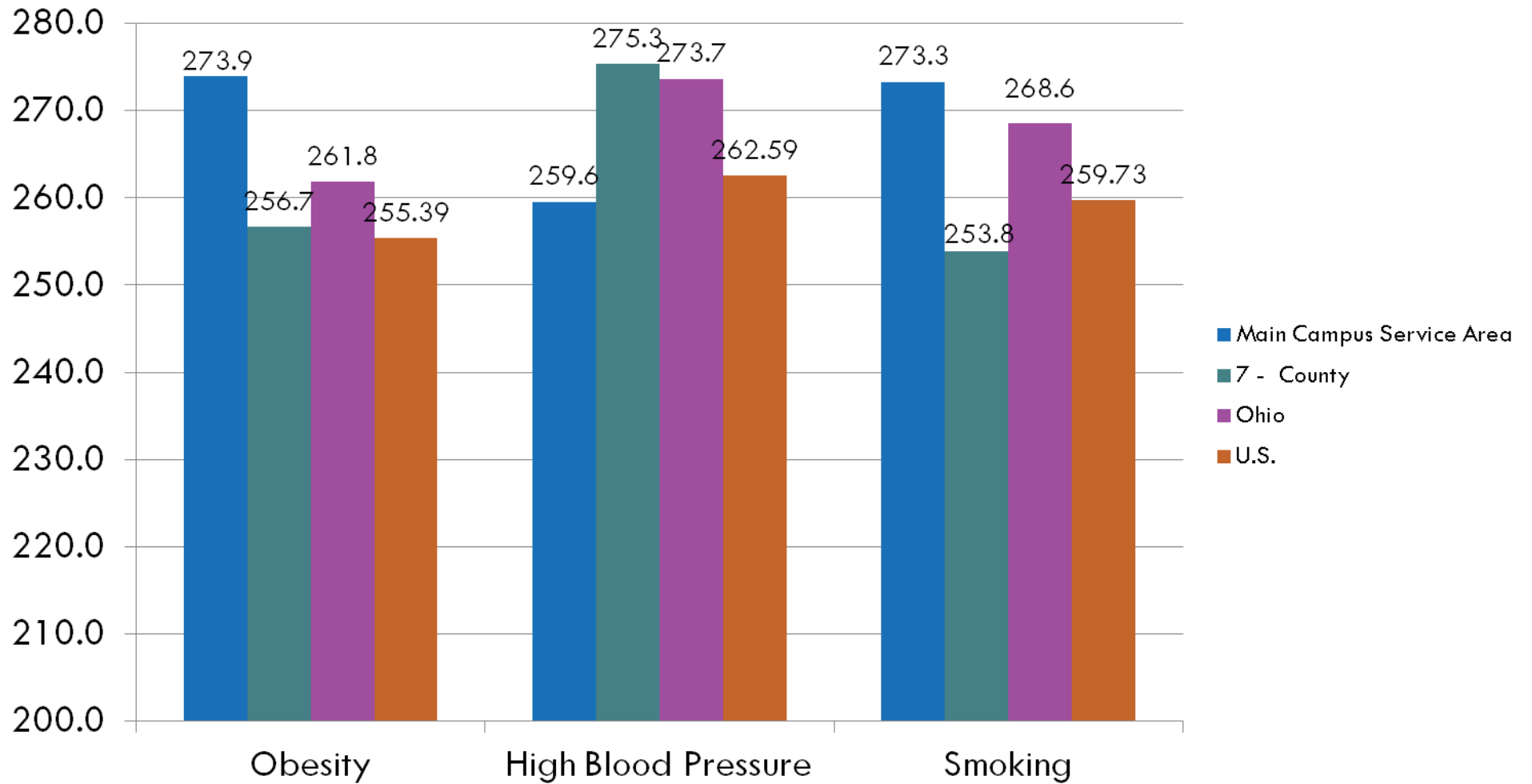
Source: Ohio Trauma Registry

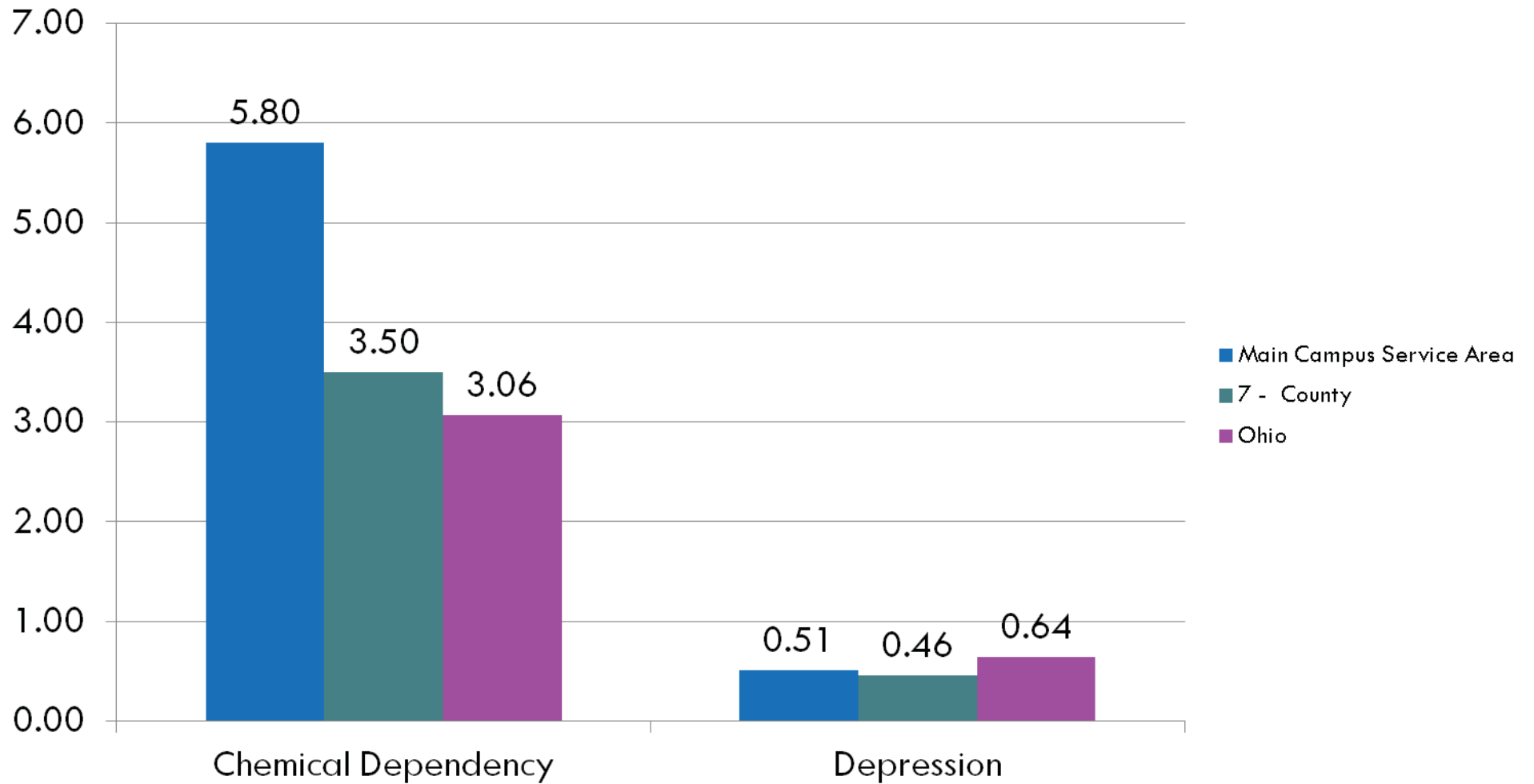
Overview



Health Behavior Profile

- Data for obesity, smoking and high blood pressure were obtained from the 2010 Behavioral Risk Factor Surveillance System. The Behavioral Risk Factor Surveillance System (BRFSS) is a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury. Data for this analysis was provided by Thomson Reuters.
- Data related to chemical dependency and depression were obtained from the Ohio Hospital Association (OHA), based on 2010 substance abuse and depression related Diagnosis Related Groups (DRGs) prevalence within the zip code defined area of each hospital community.
- **The Main Campus community** shows higher rates of obese citizens, citizens who smoke and citizens with chemical dependency when compared with the 7 - County area and Ohio.





Source: Ohio Hospital Association

APPENDIX B

PRIMARY DATA RESOURCE ORGANIZATIONS

A special thanks goes out to the organizations who contributed to the CHNA by providing valuable input into the needs of the communities:

Local and Regional Public Health/Urban Affairs

- Center for Community Solutions
- Center for Health Affairs
- Center on Urban Poverty and Development, Case Western Reserve University
- Cleveland Neighborhood Development Coalition
- Cleveland Department of Public Health
- Frances Payne Bolton School of Nursing, Case Western Reserve University
- Kent State School of Public Health and Center for Community Solutions
- Maxine Goodman Levin College of Urban Affairs, Cleveland State University

Ohio and National Public Health

- American Hospital Association
- Catholic Health Association
- Health Policy Institute of Ohio
- Ohio Department of Health
- Satcher Health Leadership Institute, Morehouse School of Medicine

Academic Medicine and Research

- Association of American Medical Colleges
- Cleveland State University
- Cuyahoga Community College
- Henry Ford Hospital
- Kent State University – Ashtabula Campus
- Medical College of Wisconsin
- Ohio University

Faith-based Organizations

- Antioch Baptist Church

Local Government/Education

- City of Cleveland
- Cuyahoga County
- Cleveland Heights/University Heights Schools
- Cuyahoga Community College

Community Foundations

- Mt Sinai Foundation
- St Luke's Foundation

Non-Profit Organizations

- Boys & Girls Club of Cleveland
- Cleveland Foodbank
- Fairfax Renaissance Development Corp.

APPENDIX B

- The Gathering Place
- United Way of Greater Cleveland

APPENDIX C

COMMUNITY STAKEHOLDER INTERVIEW SUMMARY

Data Collection:

For the purposes of the key stakeholder interviews, participants represent the regional and national communities. Each interview was conducted by a Tripp Umbach consultant and lasted approximately 60 minutes. All respondents were asked the same set of questions previously developed by Tripp Umbach and reviewed by the Cleveland Clinic Main Campus Hospital executive leadership project team (See Appendix 1).

Summary of Stakeholder Interviews:

QUESTION #1: *Could you please briefly elaborate on how your job position interfaces with community health?*

National

Of the nine respondents who spoke on a national level, there was a diverse representation of sectors. Those sectors represented included: four respondents in academic medicine/research and five respondents in public health/urban affairs.

Regional

Of the twenty-four respondents who spoke on a regional level, there was a diverse representation of sectors. Those sectors represented included: six respondents in public health/urban affairs, four respondents in academic medicine/research, two respondents in government, two respondents working in the education sector, two respondents working for a foundation, one respondent working for a faith-based organization, two respondents in state/national public health and five respondents working for non-profit organizations.

QUESTION #2: *How would you describe a healthy community?*

National

Five themes identified upon review of the national stakeholders' collective definitions of a "healthy community" are: a physically healthy/safe community, a low rate of disease and living a healthy lifestyle, being proactive and engaging in the community, along with a thriving economy and accessible healthcare.

A low rate of disease and healthy lifestyles was identified by six stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to low disease rate and healthy lifestyles that a healthy community should have:

- A place with low results of disease and disease risk factors
- A place where the health status of the population is positive
- A place where residents eat healthy and exercise
- A place that provides plenty of safe indoor/outdoor recreation
- A place where people are committed to living a healthy lifestyle
- A place with ample green space for physical activity

APPENDIX C

A physically healthy environment and safe community was identified by five stakeholders on a national level as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to the overall health and safety that a healthy community should have:

- A place with a healthy physical environment (air/water/soil)
- A place that is safe with low crime rates
- A place with low results of environmental health risks
- A place that has an absence of violence in the community

Proactive residents and community engagement were identified by five stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to being proactive and community engagement that a healthy community should have:

- A place where residents are actively engaged
- A place where residents get along
- A place where organizations work together
- A community that works cohesively
- A place that focuses on prevention

A thriving economy/community was identified by three stakeholders as significant to the definition of a healthy community. Specifically, the stakeholders mentioned the following elements relating to the overall economy that a healthy community should have:

- A growing/prospering economy
- A place with affordable and adequate housing

Accessible healthcare was identified by two stakeholders as significant to the definition of a healthy community. Specifically, the stakeholders mentioned the following elements relating to accessible healthcare that a healthy community should have:

- Access to affordable quality healthcare

Regional

Six themes identified upon review of the regional stakeholders' collective definitions of a "healthy community" are: a physically healthy/safe community, recreation & living a healthy lifestyle, a thriving community that offers opportunity to the residents, residents access to healthcare/resources, being proactive and addressing residents needs/concerns and a connected community with civic engagement.

APPENDIX C

A physically healthy environment and safe community was identified by thirteen stakeholders on a regional level as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to the physical environment and safety that a healthy community should have:

- A place that provides a positive quality of life for an individual
- A place where residents feel safe and can move freely about the neighborhood
- A place that has a safe environment and clean water
- A place that provides residents with healthy living conditions
- A place that provides adequate and safe housing for the residents
- A place that focuses on reducing poverty
- A place that is free of crime

Being proactive and addressing the residents' needs/concerns were identified by eleven stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to being proactive and addressing the residents' needs that a healthy community should have:

- A community that is oriented toward being proactive, not reactive
- A place that promotes healthy lifestyles/choices
- A community that focuses on prevention
- A community that educates residents on how to live healthy lifestyles and properly care for illnesses
- A place that identifies concerns and addresses concerns in the community
- A place that is thoughtful of the needs of citizen's
- A place that focuses on physical/emotional/mental health
- A place where healthcare providers/institutions in the community promote healthy living
- A place that promotes healthy living

Recreation and healthy lifestyles was identified by eight stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to the access to recreation and healthy lifestyles that a healthy community should have:

- A place that has plenty of green space so residents are able to engage in outdoor exercise and live healthy lifestyles
- A place that provides accessible healthy foods
- A place that focuses on positive lifestyle changes

A thriving community that offers opportunity to the residents was identified by seven stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to the community's ability to offer opportunity and meet the needs of residents that a healthy community should have:

- A place that provides a broad spectrum of opportunity for the residents
- A place where the community is thriving
- A place that is proactive and provides what residents need to be healthy
- A place that provides employment opportunities to the residents

APPENDIX C

- A place that provides residents with educational opportunities
- A place in which citizens have access to all services that nurture the mind, body and spirit
- A place that is economically sustainable

Residents' access to healthcare and resources were identified by seven stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to residents' access to healthcare and resources that a healthy community should have:

- A place that offers adequate healthcare that is accessible and available to all residents
- A place where goods and services are available to residents (i.e., healthy food options)
- A place where residents have access to healthcare facilities
- A place that provides residents with educational resources

A connected community that displays civic engagement was identified by six stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to a connected community that displays civic engagement that a healthy community should have:

- It is a place where people socialize with another and are not isolated
- It is a place that encourages community participation
- It is a place where residents are engaged
- It is a place where hospitals, churches and schools are all connected

QUESTION #3: *What are some specific health need trends nationally/regionally?*

National

- Health need trends mentioned by national stakeholders include: obesity, diabetes, hypertension, chronic disease, asthma, heart disease, Alzheimer's, stroke, lack of nutrition and depression (in order of most mentioned). Also, accessible healthcare, prevention strategies, better leadership and a clean environment (i.e., absence of toxic substances) were mentioned by stakeholders as health need trends.

Regional

- Health need trends mentioned by regional stakeholders include: Obesity, diabetes, chronic disease, lack of nutrition, heart disease, cancer, high blood pressure, mental health, lead poisoning, childhood obesity, HIV/AIDS, Hepatitis C, persistent low-birth weight, oral hygiene and infant mortality (in order of most mentioned). Also, healthy foods, accessible healthcare and preventive strategies were mentioned by stakeholders as health need trends.

QUESTION #4: *Which target populations' nationally/regionally do you believe have such health needs?*

National

- Respondents on a national level believe that obesity and diabetes span all age groups, heart disease targets the adult population and dementia targets the elderly. Other contributing factors to health needs include: urban vs. rural, low-income families and minority populations.

APPENDIX C

It was also mentioned that increased research was needed to better understand chronic disease management and ways to best reach at risk populations.

Regional

- Respondents on a regional level believe that children in the region suffer from lead poisoning, low-birth weight, obesity, diabetes and lack of nutrition. The adult population suffers from obesity, diabetes, heart disease, cancer, chronic disease, high blood pressure, lack of oral hygiene and mental health issues. Other contributing factors to health needs include: urban vs. rural, low-income families and minority populations.

QUESTION #5: *In order to improve the health of communities, please talk about some of the strengths/resources that communities nationally/regionally have to build upon. List strengths/resources that can be built on and describe how those strengths/resources could be used.*

National

The nine national stakeholders interviewed identified the following strengths/resources and their benefits:

- There is strong leadership along with programs and initiatives in place available to address health needs and concerns:
 - There are community-based organizations in every community (i.e., civic groups, centers and health departments) that all focus on improving health within a community
 - There is strong public health leadership and collaboration
 - There are several revenue streams that focus on healthcare, including multiple areas/structures/organizations that provide a mission
 - There are groups for health advocacy purposes that target specific diseases and risk factors
 - There are people in every community that have a commitment to health wellness
 - Academic medical centers are engaged in research and medical education focused on community health improvement.
- Great healthcare institutions and community resources can be found in the community:
 - Affordable care is available to residents
 - There are qualified health clinics that act for the underserved/uninsured
 - There is a strong presence of academic medical centers that focus on research that leads to improved population health and outcomes
 - Community resources including churches, schools and organizations all support healthy living.

Regional

The twenty-four regional stakeholders interviewed identified the following strengths/resources and their benefits:

- Great healthcare institutions can be found in the community:
 - The community has the best healthcare resources and healthcare institutions in the world
 - There are strong public health departments in the region
 - The community has accessible high-quality healthcare

APPENDIX C

- There is a strong presence of academic medical institutions and clinics that are open and available to community
- There is a big focus on health and healthcare throughout the community
- The quality of healthcare provided in the community is unmatched
- There is a robust healthcare safety net in the community

- It is a philanthropic community and collaboration is strong:
 - There is a deep philanthropic tradition within the region
 - There is a strong safety net in the community
 - There is a strong history of community organizations and development of networks
 - There is a strong presence of hospital collaboration with local community groups/churches/schools, and they all work together to promote healthy living/lifestyle
 - There are solid foundations that invest within the community

- The community has strong leadership that cares about the well-being of the community and supports one another:
 - There is strong public support and a great range of foundation partners in the region, particularly in the health domain
 - There is a strong network of support and public policy
 - There is a strong interest in community health
 - There is a well-aligned network of organizations that share a healthy living initiative, interest and belief
 - There is strong new leadership in the community

- There are a number of non-profit resources and services that can be found in the community:
 - There is an ample amount of valuable non-profit resources in community
 - The community is a service-rich environment
 - There are well-distributed family health centers/clinics throughout the community

- The community has a substantial number of programs and initiatives in place to support and educate the residents:
 - There are a significant amount of resources in the community for outreach purposes
 - Some health and wellness clinics in the community educate residents on how to live healthy
 - The Cleveland Clinic offers a number of preventive programs for residents
 - Residency training programs provide education to patients and community residents
 - The (Healthy Cleveland)¹ initiative is in place
 - Early childhood development programs are available
 - The community provides people with information and knowledge
 - There is a focus on social determinants of health and organizations work to address issues
 - There are a number of school programs available for children and their families
 - There are a number of health initiative programs at work i.e., The Biggest Loser Competition

¹ Healthy Cleveland: A collaboration between the city of Cleveland and Cleveland Clinic, University Hospitals-Case Medical Center, MetroHealth and Sisters of the Charity Hospital System.

APPENDIX C

- The community is invested in infrastructure to keep residents active in the community:
 - The community has invested in green space and parks/recreation
 - The community encourages walkability and exercise
 - The community provides accessible fresh fruits and vegetables
 - The community has strong regional infrastructure

QUESTION #6: *In your opinion, what do you think are the two most pressing health needs facing residents in national/regional communities you serve, especially the underserved? Please explain why.*

National

The nine national stakeholders interviewed identified the following problems and/or barriers as holding residents back from achieving their previously defined visions:

- There are disparities throughout the nation, which can make it unsafe to live:
 - Violence is an issue
 - Residential pollution in the water and soil
 - Lack of safe recreational opportunities
 - Lack of adequate housing and access to resources
- There is a lack of access to healthy foods and healthcare:
 - Lack of access to age-appropriate preventive care
 - Lack of access to quality foods in urban areas
 - Lack of access to quality care
- Residents in the community are unhealthy and uneducated on healthy living:
 - Diabetes is a nationwide concern
 - Obesity is a nationwide concern
 - There is a lack of education on how to live a healthy lifestyle
 - HIV/AIDS and Hepatitis C are both a huge concern throughout the nation
- Unemployment and the state of the economy has impacted the nation and its current financial conditions/living conditions:
 - Unemployment is a huge nationwide concern
 - Resources on all levels have been cut due to the state of the economy

Regional

The twenty-four regional stakeholders interviewed identified the following problems and/or barriers as holding the residents of the 7-county regional community back from achieving their previously defined visions:

- Unemployment and the state of the economy has impacted the community and its current financial conditions/living conditions:
 - There is a lack of jobs in the community and unemployment is high
 - There is a lack of jobs in the community
 - Poverty is an issue in the community
 - There is a lack of financial well-being throughout the community

APPENDIX C

- There are disparities throughout the community, which can make it unsafe to live:
 - Violence is an issue in the community
- Inaccessible healthcare:
 - Residents are unable to afford care
 - Insurance barriers along with the ability to have healthcare coverage is an issue
 - There is a lack of access to preventive care
 - There is a lack of health insurance/coverage
- Residents in the community are unhealthy and uneducated on healthy living:
 - Diabetes and Obesity are two huge health concerns in the region
 - Residents are living unhealthy lifestyles and do not have an appropriate diet
 - There is a lack of knowledge/desire for education
 - There is a lack of knowledge of primary prevention and good health behaviors
 - There is a lack of motivation to give up short-term habits in favor of long-term health happiness
 - Behavioral health is a huge concern throughout the community (i.e., stress, smoking, drug addiction)
 - There is a lack of awareness on resources in the community to help residents live healthy
 - There is a need for increased research directed toward health behaviors and outcome measurements for community health improvement initiatives
 - Physician training needs to be more focused on healthy living and awareness of risk behaviors
- There is a lack of access to healthy foods and economic resources:
 - There is a lack of accessible healthy foods
 - There is a lack of economic resources
- Residents who live in rural areas are unable to receive specialized care:
 - It is a challenge living in a rural area because specialized services are insufficient
 - There are limited healthcare providers that can deliver care in a rural community
 - It is hard to recruit practitioners to rural areas

QUESTION #7: *In response to the issues that were identified, do you believe there are adequate national/regional resources available to address these issues/problems? If no, what your recommendations?*

National

Out of nine national stakeholder responses, one stakeholder responded that they believe there are adequate resources available on a national level to address the aforementioned issues/problems. Seven stakeholders did not believe adequate resources were available and one was unsure if there were available resources.

The one stakeholder that believed there were adequate national resources to resolve the previously identified problems/issues felt there are always ways to reinvent what is currently in place.

APPENDIX C

The seven stakeholders that believed there were not adequate national resources to resolve the previously identified problems/issues cited:

- More could always be done in preparing physicians
- Not anywhere near close to a solution
- There is a need for a prevention agenda which is not currently being funded (i.e., if we don't spend the funds now we pay later in other ways)
- There needs to be improvement in funding for community health research and medical education
- There is a lack of political will to produce resources to address issues

Regional

Out of twenty-four regional stakeholder responses, seven stakeholders responded that they believe there are adequate resources available in the 7-county regional community to address the aforementioned issues/problems. Three stakeholders were unsure if there are adequate resources available to address the problems and fourteen stakeholders did not believe adequate resources were available.

The seven stakeholders that believed there were adequate community resources to resolve the previously identified problems/issues cited the following concerns:

- There is a high initiative but not enough education on behalf of the families that lack access to care
- Not sure if there is adequate access to receive services
- There is a lack of awareness of what services are available to residents
- There are enough resources but they are not focused on solving certain problems (i.e., unhealthy lifestyle and lack of access to healthcare)
- There are adequate resources but there needs to be a remarshaling of resources
- There are too many agencies doing the same thing all at once and not working together
- There are enough healthcare facilities but not enough available jobs

The fourteen stakeholders that believed there were not adequate community resources to resolve the previously identified problems/issues cited:

- There is a lack of economic resources and limited funding
- Healthcare coverage is a national issue
- Need to do a better job at leveraging what we have and re-prioritize needs
- Improve health collection and evaluation process
- Have seen core services get cut and when this happens services need to be deployed
- People who seek assistance who do have issues are not aware of where to receive needed services
- There is a need for a one-stop shop for all health needs

APPENDIX C

QUESTION #8: Do you see any emerging community health needs, especially among underserved populations, that were not mentioned previously? (Please be as specific as possible)

National

Six out of the nine national stakeholders interviewed chose to mention additional concerns and/or expound upon previously expressed concerns.

- Major health systems need to promote healthy living more. There is a need to control individual behaviors and environmental factors. There needs to be a step taken towards improving environmental health. The need to invest in primary care access in urban communities; right now there is not adequate primary care access in the urban communities. There needs to be a change in priorities of some major institutions focusing on serving the underserved in primary care and beyond. Research and medical education needs to be more focused on community health improvement activities.
- Rapid development of infectious diseases and the spread of diseases are emerging health challenges.
- There are some challenges when trying to implement solutions to problems quickly at the state and local level.
- Psychological/mental health issues have not been discussed. Poverty/racism needs to be addressed to help community health needs. It is necessary to address underlying factors to move forward.
- Violence and youth violence is a major concern, there needs to be a greater focus on youth behavior problems.
- There needs to be an increase on the focus of ways to deal with health disparities. The city of Cleveland has really taken an aggressive initiative to reduce chronic disease (Healthy Cleveland Initiative). Concentrate more research resources on measuring health status and focus on behavioral health needs and create a connection to the available resources. Look at ways to improve the health of the youth (i.e., healthier menu options in school).

Regional

Sixteen out of the twenty-four stakeholders interviewed chose to mention additional concerns and/or expound upon previously expressed concerns.

- Youth-on-youth violence is now a public health issue along with domestic violence.
- Access to mental health services is an emerging concern.
- Invest more dollars in updating homes to help low-income families live in a healthy home.
- Health education is needed in the community. It is important to educate the community on health.
- There are not enough pediatricians in the community for teenagers to receive age-appropriate care.
- Prevention information/education for the underserved population could benefit residents and the community.
- Diabetes and heart problems emerge because residents are not maintaining a proper diet.
- There is a lack of income in the underserved community, which plays into the targeted population needing affordable healthcare.

APPENDIX C

- The unemployed are unable to access quality healthcare and good food. It is important to convince retailers to invest in the community so residents have access to quality food and learn how to cook the food.
- Mental health is a major issue, especially among the underserved population.
- As obesity becomes more prevalent heart disease and diabetes are related components that are also going to increase. Right now, the community is not prepared and there is a severe shortage of primary care physicians.
- HIV is still kept private, but there are many people with needs related to this deadly disease that aren't/choose not to come forward and or aren't sure where to go for help (i.e., cost of medicines are so high for those that can't afford it). Also, STD's, is a growing problem, specifically within the younger populations within the inner-city.
- The status of single-family parenting homes has emerged, which can affect children's behaviors.
- There are generations of people who don't have a clue what a healthy lifestyle would look like in any aspect. From a social standpoint, it is an ongoing challenge that grows acute year by year.
- A lot of children in the community are delayed in developing both mentally/physically because of inadequate play/care provided in their home.

QUESTION #9: *Please describe your vision of what the health status nationally/regionally should be in within 5-10 years?*

National

- The community will promote healthy behaviors
- The community will invest in healthcare both public and private
- The community will offer everyone access to quality healthcare
- The community will address all issues and set community targets and goals
- The community will focus research activities on social determinants of health and make sure people have access to food and physical activity so they can participate in healthy behaviors

Regional

- Organizations in the community will work together and have a shared vision around community health
- Residents will take responsibility and be active and put an emphasis on exercise and eating healthy
- The community will focus on awareness and prevention
- The community will decrease disease/illness
- The community will grow companies and increase employment opportunities
- The community will offer everyone access to quality healthcare
- Residents in the community will have access to quality foods
- The community will ensure residents can be educated on healthy living choices
- The community will focus on strong health initiatives
- The community will be physically attractive and continue to grow economically
- The community will have functional green space for residents to exercise and walk
- Residents in the community will have access to all resources needed to live a healthy life
- The community will be a walkable community
- The overall economy will be in a better state

APPENDIX C

- The community will be pedestrian-friendly, and the residents will know how to properly eat healthy and exercise
- School programs will focus on children's overall health and lifestyle

QUESTION #10: *Any additional comments or questions?*

National

Three out of the nine national stakeholders interviewed chose to provide additional comments. Below are the additional comments made by the stakeholders:

- There are access disparities and variable quality outcomes of disease treatment in different areas.
- Need to focus on promoting healthier decision-making by residents (i.e., exercise, healthy eating and prevention).
- Care enough, know enough. Overall, there needs to be better leadership in public health.
- Academic medical centers need to be at the forefront of community health related research and education programs.

Regional

Nine out of the twenty-four stakeholders interviewed chose to provide additional comments. Below are the additional comments made by those stakeholders:

- Continue to have institutions including the Cleveland Clinic stay connected to the community and focus on issues.
- Excited for the Cleveland Clinic to take the lead on this initiative. It would be great to work together to have a huge impact and not act in a vacuum, it is important to work together.
- Organizations need to focus on the topic of health as a discussion and it should be woven into all discussions in neighborhood development. Make sure there is a checklist to attract and retain residents.
- The power of community is a very small presence; advocate understanding lower-level notions of community. Hope to get to a place where we see a sustained change over a period of years.
- A lot of the jury is out based on government regulations.
- Focus resources on filling the existing gaps in the community and centering on both physical/mental health needs.
- The biggest issue is not money; it is people's attitudes. Need to get people's attitudes aligned and working together towards solutions. People need to rise up and become actively involved in getting the job done instead of relying on an external party to get something done.
- It is difficult to only look to the government to get things done; change needs to be made through partnerships.
- Mental health is a problem in the community as far as lacking funding for appropriate resources to meet the community's needs.

APPENDIX C

APPENDIX 1:

CLEVELAND CLINIC CHNA	
KEY STAKEHOLDERS QUESTIONNAIRE	

Introduction:

Name:

Title:

Date:

1. Could you please briefly elaborate on how your job position interfaces with community health?

2. How would you describe a healthy community?

3. What are some specific health need trends nationally/regionally?

4. Which target populations nationally/regionally do you believe have such health needs?

APPENDIX C

5. In order to improve the health of communities, please talk about some of the strengths / resources that communities nationally/regionally have to build upon. List strengths / resources that can be built on and describe how those strengths / resources could be used.

Strength #1

Strength #2

6. In your opinion, what do you think are the 2 most pressing health needs facing residents in national/regional communities you serve, especially the underserved? Please explain why.
- Community Issue #1

Community Issue #2

APPENDIX C

7. In response to the issues that were identified, do you believe there are adequate national / regional resources available to address these issues / problems? If no, what your recommendations?

8. Do you see any emerging community health needs, especially among underserved populations, that were not mentioned previously? (Please be as specific as possible)

9. Please describe your vision of what the health status nationally/regionally should be in within 5-10 years?

10. Any additional comments or questions?

APPENDIX C

APPENDIX 2:

QUESTION #1: *Could you please briefly elaborate on how your job position interfaces with community health?*

National

1. It is a center for health and policy research about medical systems.
2. It has a big presence in the public health arena, especially in policy and funding in the NE Ohio region. Also, involved in family planning and HIV/AIDS funding.
3. Job is related to tax exemption and community benefits. Also, involved in advocacy and work with the IRS and financial committee to develop resources to provide community benefits.
4. It has a corporate structure to control health and wellness. It has an enterprise in large-scale health research.
5. Principle role is to serve level of federal policy regulation and legislative issues. Seek to introduce innovation. It is an effort to focus on advocacy, efficiency, innovation and delivery of care.
6. Have a large number of physicians in community. Have a significant community engagement presence.
7. Skipped this question due to limited time.
8. In-depth focus on community health in all areas.
9. Organization conducts research that cover policies to help improve the health of everyone. Work with research member institutions to engage in research regarding community.

Regional

1. Serve 6,400 kids a year in 10 locations throughout the urban community. Cleveland Clinic is a partner and sponsor for programming support. Represent 3,000 families in the urban community.
2. Grant maker in health and medicine.
3. Responsible for the health and well-being of 6,000 students and 1,200 employees. Deal with physical and mental health issues, attendance and academic performance.
4. Part of movement is to distribute food to low-income people facing health challenges. Distribute healthy food and information to the residents. One priority is to address obesity since it is a large-scale issue and help educate the community on healthy eating. Cheaper foods are easily accessible compared to grocery stores, which are not easily accessible. Help member agencies educate their clients.
5. Master planner of community and work with stakeholders' needs/desires to come up with neighborhood vision and plan. Anyone who wants to come and participate in strategic plan is welcome. Work in community gardens, schools and health/safety. A contractor with the city of Cleveland to implement programs to address needs.
6. Place students in hospitals throughout the community. Educate students, along with school systems in community on health.

APPENDIX C

7. The University provides education through nursing programs, physical therapy programs, occupational therapy programs, etc. Interface with the health of the community and education.
8. Raise a great deal of money and invest the money in programs and projects throughout the community. Focus on health and human services to improve people's lives in Cleveland. Invest in programs and projects and have priorities in health issues.
9. A trade association that advances neighborhood communities and development associations by proactively engaging in advocacy and public policy. Support community efforts, training, technical assistance, educating and mentoring.
10. Focus on social behavioral dimensions. Center is heavily engaged in a wide range of community programs and it crosses various domains of the Ohio department of health.
11. Cancer support center that focuses on providing a better place for people to live who have been touched by cancer. Focuses on a healthy mind, body and spirit.
12. Developing partnerships with community organizations. Get involved in community health initiatives.
13. Run a community health foundation and responsible for making \$10 million worth of grants.
14. Communicate with 125 local health departments on a weekly basis. Regularly communicate and help work through their issues and start policies at the state level.
15. Supply medical care to a 20-county area and provide free exams and free clinics for both general and specific care.
16. Staff county executive. Work in community health and wellness. Help launch County Health Alliance.
17. Strategically look at need in the community by both employers and residents to bridge an educational partnership.
18. It is a faith-based organization. Launched an HIV outreach clinic with Cleveland Clinic in 1999. The first faith-based clinic of its type in OH that provided testing and counseling. Also, a part of a hunger outreach program. Within the church, interact with residents on a daily basis regarding all levels of community health needs. In 2001/02 and currently, through the church offer program that works with Hepatitis C and diabetes patients, but really needs funding (currently is through a Community Development Health Corporation that was created through church). These programs work specifically with the African-American community. Used to have a full-time nurse that was paid by CC, but that funding has been cut. The church leased a standalone building to operate a food pantry (since 2008). Overall, very supportive for all kinds of things (located 89th/Cedar).
19. Non-profit organization with a statewide scope that is supported primarily through foundations. The strategic objective is to achieve and maintain health wellness.
20. Dean of Urban Affairs. There are 360 undergrad students and 340 grad students under this institution. All the students get involved in community development.
21. Overlook functions of the entire campus. Folks that work on campus do provide direct health services to the community. Offer preventive care, healthcare services and oral hygiene services all at a low fee to the community. Also, have direct involvement in community education programs that support community health initiatives and focus on helping folks in the neighborhood.
22. Help organize placement of students throughout the community and focus on health needs of the community.
23. A trade association that represents hospital advocacy in NE Ohio.
24. Work on identifying the health needs of the community and creating legislative changes to address the needs.

APPENDIX C

APPENDIX 3:

QUESTION #2: *How would you describe a healthy community?*

National

1. Literal: Low results of disease, disease risk factors and environmental health risks. Metaphorical: Residents get along and it has a growing/prospering economy.
2. Qualitative ways: healthy physical environment (air/water/soil) provides plenty of safe indoor/outdoor recreation and determining noise levels. A safe community tends to make people happy. Quantitative: Health status of the population and community and census data.
3. In terms of the world health organization definition (below): "Health is not only the absence of infirmity and disease but also a state of physical, mental and social well-being." It is more than absence of disease and absence of risky behavior in the community.
4. People who are actively engaged in age-appropriate preventative care and agree to be in special treatment plans and engage in preventive care activities. A place where residents eat well, exercise and push to contribute health.
5. Depends on point of view. Recognize and serve at a local level, take national model/programs and incorporate them within the community. Depending on system, it can be narrowly defined or broadly defined.
6. A place where residents can access healthcare and has a focus on prevention.
7. A community that works collectively and has the environment to support health. It is a place in which people are committed to health and have access to quality healthcare.
8. A place where residents have access to quality healthcare, affordable housing, job opportunities, education, healthy foods and ample green space for physical activity. It is a place that is safe with clean air quality.
9. It is a place that is emotionally, physically and socially healthy. It is a place that provides a quality of life for the residents.

Regional

1. Children Perspective: Kids will be fed on a regular basis both healthy and wholesome food. Accessible healthcare available to serve families. Residents are able to freely move about the neighborhood.
2. A community that engages in preventive care.
3. A community that is oriented toward being proactive, not reactive, and promotes healthy lifestyles/choices. It is a place that encourages community participation and offers adequate healthcare prevention and appropriate care. It is a place that has a broad spectrum and offers a lot of opportunity for the residents.
4. First, reduce significantly incidence of obesity, which would decrease diabetes and heart disease. Second, reduce insurance premiums.
5. A place that provides an overall positive quality of life for an individual. A place with safe and quality housing stock. A place where residents feel safe and can walk in streets. It is a place where goods and services are available to residents and all basic needs are met. It is a walk able neighborhood that has quality foods and education available for residents. It is a place where

APPENDIX C

people socialize with one another and are not isolated. It is important to promote/create an environment to make people want to participate in activities. It is a place with hospitals, churches and schools that are all connected in a way for a person to reach.

6. A place that has a safe environment, clean water, little crime and plenty of green space so residents can get out and exercise. A place where residents have access to healthcare facilities.
7. A community that focuses on prevention. A community that educates residents on how to live healthy lifestyles and care for illness.
8. A place where residents live good healthy lifestyles. A place that identifies concerns in the community. It is a place that provides residents with healthy living conditions and is thriving. A place with great healthcare facilities.
9. A place that provides opportunity for residents and visitors to access green space and healthy food. It is a place that is walk able, affordable and provides safe housing for the residents. It is a place where residents are engaged.
10. A place that has a range of positive indicators of social support and wellness and low indicators of bad. A place that focuses on physical/mental health, a healthy environment and wellness. A place that addresses concerns and works together.
11. A place that is thoughtful of the needs of citizens. A place that focuses on preventive care and provides residents with resources and education.
12. A place that focuses on looking at health statistics on disease/illness and comparing the numbers to similar communities. Focus on the resident's access to healthcare and make sure the community meets the needs of residents.
13. A place that provides people what they need to be healthy in the first place. It starts in the family/home and then spreads to the community.
14. A place that focuses on health and not on sickness. A place where people in the community focus on optimizing their health and well-being.
15. A place that has adequate preventive medical care and treatment available to all. A place that focuses on lifestyle changes and works with healthcare providers/institutions in the community to promote healthy living.
16. A place with common interests around safety (i.e., air quality and crime) and access (i.e., healthcare, food, green space, education and job opportunities).
17. A place that focuses on physical, emotional, mental and financial health.
18. A place that focuses on reducing inner-city poverty. Poverty affects every aspect of life for residents in this community. A place that provides employment opportunities and promotes healthy living. It is a place that provides healthy living choices, a safe environment that is crime-free and education on all levels (i.e., trade/skill building, technical degrees, associate level, bachelorette degrees, etc.).
19. One in which citizens have access to healthy foods, adequate green space, quality healthcare and other services that nurture the mind, body and spirit.
20. It is a place that is multi-faceted. A place that provides jobs and has a set of issues around safety and physical health/well-being. It is a place with set norms and behaviors.
21. Health is a broader concept; it is physical, economical, social and intellectual. A healthy community is a place where folks are well-educated and continue education, economically sustainable and mindful in maintaining a healthy lifestyle.
22. A place that is multi-dimensional. It is a place that is physically, spiritually and emotionally healthy.

APPENDIX C

23. It is a place that provides the residents the ability to be healthy if they choose to. It is a place that provides residents access to healthy foods, healthcare, preventive care and resources. It is a place with a healthy environment.
24. A place where residents have access to healthcare, a clean environment, job opportunities and recreation. It is a place that is safe.

APPENDIX 4:

QUESTION #3: *What are some specific health need trends nationally/regionally?*

National

1. Obesity, diabetes, hypertension, heart disease and end-of-life issues, such as chronic conditions (Alzheimer's).
2. Nutrition, clean environment (absence of toxic substances) and access to affordable primary care.
3. Stroke, heart disease, obesity, asthma and not having access to primary or chronic care.
4. Access to healthcare and disparities in healthcare, there is a large underserved/uninsured community.
5. 80% of population doesn't need service and the 20% who do need service consumes 80% of resources. Chronic disease linked to lifestyles and episodes of care that need medical attention. Combination of multitude of factors: diabetes, obesity, hypertension, depression and other medical issues.
6. Need access to care and wellness/prevention strategies. Need proper long-term care along with robust healthcare improvements.
7. There is a lot of chronic disease throughout the nation. There are two disparities: need better leadership that work towards the same goal and have the coverage to do enough.
8. Behavioral health is a specific health need trend on the rise both nationally and regionally.
9. Childhood obesity, aging workforce and lack of access to healthcare.

Regional

1. Obesity and diabetes, it is an alarming trend.
2. Access to the following: mental health services, primary prevention, health education and oral health.
3. Obesity, high blood pressure, heart disease and diabetes.
4. Obesity, lack of access to good food, lack of awareness and understanding.
5. Childhood obesity, diabetes and high blood pressure. Encourage residents to stop smoking and offer alternatives.
6. There should be a school nurse in each school for eight hours a day addressing both mental and physical health.
7. Chronic lung disease, diabetes and cardiac issues.
8. Obesity, high percentage of people smoke, not enough available nutritional foods and not enough affordable healthcare.
9. Obesity, diabetes, lead poisoning, lack of access to food, lack of access to quality healthcare and health literacy.

APPENDIX C

10. Early childhood-lead poisoning and persistent low birth weight. Youth chain- nutrition and obesity.
11. Cancer and survivorship needs of people with chronic illness.
12. Chronic diseases and risk factors. High rates of heart disease, diabetes, obesity and cancer.
13. Violence is a huge issue. Need to focus on chronic disease management and eliminate smoking. Provide access to fresh/healthy food.
14. Chronic disease, obesity, nutrition issues and diabetes.
15. Obesity. There is a need for preventive care, smoking is an issue and there is lack of access to medical care.
16. Heart disease, cancer, obesity and diabetes. Need to focus on prevention.
17. Obesity impacts the community, which is a driver to diabetes and cardiac issues. Residents need to maintain a healthy diet and stop smoking.
18. Obesity at all levels of age (related to poverty factors). Lead poisoning in inner-city within very old houses that aren't up to regulations and no one is maintaining the properties, this has negative health effects on early childhood development, can also effect pre-existing health conditions – Hepatitis C, HIV, diabetes and smoking/second-hand smoke.
19. Ohio does not rank high in health and wellness indicators. There are 1.5 million people in the state of Ohio who are uninsured.
20. The recession is long and deep. Poverty is a huge issue and kids are affected. People are becoming homeless and ruthless.
21. The economic status contributes to a measure of health disparities including diabetes, heart disease and infant mortality.
22. Obesity, diabetes and lack of healthcare.
23. Pediatric/adolescent mental health services are non-existent. Dental care is a specific health need in the community. The lack of access to primary care and preventive care services. The housing stock is old, which creates significant environmental issues that affect children (lead poisoning). The school system is financially challenged and physical education has been cut.
24. Diabetes, high blood pressure, obesity, HIV/STD's and cancer.

APPENDIX 5:

QUESTION #4: *Which target populations' nationally/regionally do you believe have such health needs?*

National

1. Obesity/Diabetes spans all age groups. Heart Disease affects the adult population. Dementia is an elderly concern.
2. All urban areas in every community and rural areas. There are concentrations in all cities.
3. The low-income populations disadvantaged by the healthcare system are vulnerable.
4. Nationally, the minority groups (African-American etc.) have problems with access and disparities.
5. Individuals linked with poverty. The impoverished is the target population, which the majority of this population include people with color, women and children under of the age of 18 or over 65. Another contributing factor is urban vs. rural.
6. All populations.
7. Individuals living in both urban communities and rural communities.

APPENDIX C

8. Medically underserved and vulnerable populations.
9. Urban health needs vs. rural health needs. Lack of healthcare access for the LGTB population in all communities.

Regional

1. The African-American community.
2. The entire community; the minority health prospects fall under the lack of access.
3. Youth population suffers from obesity, diabetes and poor diet issues. Adult population suffers from obesity, diabetes, work-related heart issues and high blood pressure.
4. Individuals who live in either the inner-city or rural areas of Cuyahoga County.
5. Children suffer from. Adult population suffers from diabetes and high blood pressure.
6. Students.
7. Elderly population 60 years or older.
8. Hispanic and African-American community, along with the unemployed population.
9. Lower-income to very low-income families. Ranges from infants to elderly, it is a broad range.
10. Low-income families.
11. It varies.
12. Low-income populations and minority populations.
13. Urban poor.
14. Adults and children are all affected by obesity, diabetes and lack of nutrition. Adults suffer from chronic disease.
15. It has a lot to do with lifestyle, with a focus in the rural and urban areas.
16. Underserved populations – low-income and minority populations (African-American and Hispanic).
17. Not one particular population, it is across the board. Healthy foods are expensive and smoking is a habit.
18. Inner-city, specifically the African-American population. Resources are there, but the need is so great.
19. Largely people of lower income. There is a wide range of health disparities in the state.
20. Lower-income populations.
21. Minority community, particularly the African-American community.
22. Minority community and the urban population.
23. Majority of minority and low-income populations. There has been a significant amount of immigrants that have moved into the community and there are language barriers.
24. Residents who are considered low-income.

APPENDIX 6:

APPENDIX C

QUESTION #5: *In order to improve the health of communities, please talk about some of the strengths/resources that communities nationally/regionally have to build upon. List strengths/resources that can be built on and describe how those strengths/resources could be used.*

National

1. Community-based organizations in every community — civic groups, centers and health departments all focus on improving health within a community.
2. Groups for health advocacy purposes that target specific diseases and risk factors. Also, farmer's markets, community sponsored parks and schools.
3. Strong regional public health leadership.
4. Affordable care.
5. Infrastructure of health and community services.
6. Qualified health clinics act for underserved/uninsured. Not sure any additional strength.
7. Depends but generalizing on strengths and resources there are several revenue streams to focus on healthcare, including multiple areas/structures/organizations that provide a mission. All organizations have campaigns beyond getting funded, but they do not demand to work together. They work as a single entity to do a united approach. There is potential there, but it is not being realized that there needs to be collaboration across all entities to address all issues.
8. Strong presence of academic medical centers with a focus on research that leads to overall improved population health and outcomes.
9. Community resources including churches, schools and organizations that all support healthy living.
10. People in the community who have commitment to living healthy.
11. Strong collaboration and coordination of resources.
12. Quality healthcare providers and community-based organizations.
13. There is a knowledgeable healthcare workforce that is empowered to help their community.
14. There are strong partnerships throughout communities.
15. Academic medical centers are engaged in research and medical education that has a focus on community health improvement.

Regional

1. Strong interest in health of community. Strong partnerships with Cleveland Clinic.
2. Strong network and Healthy Cleveland Initiative.
3. The opportunities for physical fitness – parks and safe neighborhoods. There are early childhood development programs.
4. Nutrition education and access to fresh fruits and vegetables. Access to medical care.
5. Excellent medical facilities along with high-quality care available to the residents.
6. A community that has invested in green space and parks/recreation. A community that encourages walkability and exercise.
7. Access to the two best healthcare facilities in the country – Cleveland Clinic and University Hospital.
8. A significant amount of resources to do outreach and provide people with information and knowledge, which in return give hope to the residents.
9. Home to Cleveland Clinic Main Campus and have the ability to reach out to them.

APPENDIX C

10. Health and wellness clinics provided by the Cleveland Clinic show residents how to live healthy. Cleveland Clinic offers preventive programs for residents.
11. A significant number of caregiving resources for older adults (recreation and healthcare).
12. Strong presence of clinics which are open and available to community.
13. Three hospitals in the county that provide care to residents.
14. Solid healthcare system in community. Cleveland Clinic has world-class leaders and physicians. Same with University Health System and Metro Health.
15. There is a big focus on health and healthcare.
16. Strong network of support and public policy.
17. Strong presence of academic medical institutions and clinics that is available to community.
18. It is a service rich environment. There are a lot of organizations /non-profits. The challenge is how to coordinate the services and expand services.
19. Deep philanthropic tradition in region. There is strong public support and a great range of foundation partners in region, particularly in the health domain.
20. Access to high quality healthcare.
21. Provision of valuable non-profit resources.
22. Best healthcare resources and healthcare institutions in the world.
23. Strong public health departments in region — need to focus on prevention.
24. A strong safety net but needs to be stronger.
25. Well-distributed family health centers throughout the community.
26. A well-aligned network of organizations that share a healthy living initiative, interest and belief. There is a collective impact.
27. There is a focus on social determinants of health and organizations work together to address the issues.
28. The free clinic system is very helpful.
29. Strong hospital collaboration with local community groups/churches/schools and they all work together and meet regularly to promote healthy living/lifestyle.
30. Quality of healthcare is unmatched. Also, a strong history of community organizations and development of networks.
31. New political leadership.
32. There are a number of programs for children and they can bring the material home to their parents, in return, parents can adopt the positive behaviors.
33. There are a number of health assessment work programs. The real initiative is to save money on health insurance, but need to have the person's well-being in mind.
34. Apprenticeship programs — need to re-embrace this concept (brand these programs as something that is positive and can really lead to job opportunities), nowadays, not everyone is college material, but these types of programs need to be more attractive to those that could really flourish within them. Cleveland has a strong manufacturing community, re-adopt this base and provide opportunity to residents. Give residents the opportunity to learn these skills through the programs, give options other than just college (these can go hand-in-hand with the biomedical field where these skills are also needed along with the researchers and physicians, etc.). Replace those folks that are retiring and add to skill base for those that really need it (it will have an all-around positive effect on the individuals and community).
35. Historic foundations that invest within the community continue to increase their work right at the front line. Cleveland Foundation is based right here. Invest more with all organizations.
36. Several large hospital systems. There is a robust healthcare safety net.
37. Very philanthropic community.

APPENDIX C

38. Strong regional infrastructure.
39. Despite the recession, there is economic opportunity showing up. Oil and gas development are huge.
40. There is a lot of expertise in the community through core notions of healthcare.
41. The infrastructure, particularly in NE Ohio, is well-developed and connected to the community.
42. There are a number of services and resources available to help low-income families.
43. The YMCA promotes healthy living and provides programs to live a healthy lifestyle.
44. It is a strong hospital community.
45. There is a very well organized health system in the community.
46. There are a number of educational institutions throughout the community.
47. There are a number of hospitals and health centers located throughout the community.

APPENDIX 7:

QUESTION #6: *In your opinion, what do you think are the two most pressing health needs facing residents in national/regional communities you serve, especially the underserved? Please explain why.*

National

1. Diet and obesity.
2. Violence.
3. There is an enormous remediation problem. Residential pollution in the water and soil. Many people live in conditions where poison surrounds them. For instance, in our region, Lake Erie is full of toxic substances and has a runoff of pesticides.
4. Lack of safe recreational opportunities. There is an absence of programs. Lack of access to quality foods in urban areas.
5. Lack of access.
6. Disparities.
7. Lack of access to age-appropriate preventive care.
8. Need to improve access to healthcare services.
9. Address lack of education, jobs, adequate housing and access to resources. Look to allocate and restrict resources but doesn't get underlying cause.
10. Lack of access to quality care and prevention/wellness.
11. Lack of education on what it means to live a healthy lifestyle.
12. Infectious diseases. Need to make a progress towards HIV/AIDS and Hepatitis C. The major issues are unsafe sex and drug use.
13. Chronic diseases – Obesity leads to diabetes and cancer. Focus on obesity because it leads to health problems.
14. Resources have been cut on a national and regional level in all areas.
15. There is a lack of access to healthcare. Also, there is a lack of residents that understand health information.
16. Health disparities are widening.

APPENDIX C

Regional

1. Diabetes.
2. Obesity.
3. Lack of primary prevention and good health behaviors.
4. Lack of motivation to give up short-term bad habits in favor of long-term health happiness.
5. Lack of appropriate diet.
6. Poor prenatal care/early childhood care.
7. Lack of access to good food.
8. Lack of knowledge/desire for education.
9. High blood pressure.
10. Diabetes. In general, concerned with overall health of the population.
11. Safety.
12. Lack of access to healthy food. Need to make healthy foods available and affordable for the residents.
13. It is a challenge living in a rural area to receive specialized services.
14. There are limited healthcare providers that can deliver care. It is hard to recruit practitioners to rural areas.
15. Ability to have healthcare coverage is difficult to provide. There is access and quality care but cost is outrageous.
16. Unemployment. Need to focus on job creation.
17. Lack of education.
18. Lack of access to quality healthcare along with provider and insurance barriers.
19. Poverty. The community is still suffering the effects from the foreclosure crisis and pushing poverty.
20. Focus on system response to suburbanization of poverty. There are sub-populations of families with multiple concerns including mental/substance abuse.
21. Lack of economic resources.
22. Lack of education.
23. Unhealthy lifestyles. Residents need to make changes to eat healthier and live healthier.
24. Lack of access to healthcare. Everybody who needs healthcare should have access to it.
25. Extreme tobacco use.
26. Obesity.
27. Lack of access to healthcare and prevention, especially among the underserved population.
28. Social determinants (lack of jobs, lack of education, unsafe environment).
29. Lack of education on preventive care and a healthy diet.
30. Lack of access to care for the working poor.
31. Behavioral health is a real concern – stress, alcohol and drug addiction.
32. Obesity and diabetes.
33. Obesity and smoking.
34. Negative financial well-being.
35. Obesity affects on all levels, it is a negative factor that plays on all other diseases. It is a downhill slope that leads to multiple health problems.
36. Diabetes, it is so widespread and relates to lifestyle choices. HIV is very silent within the community but such a big issue, especially within inner-city Cleveland.
37. Lack of insurance.
38. Lack of capacity to support health choices.
39. Lack of health insurance coverage.

APPENDIX C

40. Lifestyle issues. There is a lack of recreational opportunities for residents to participate in.
41. Although there is strong infrastructure, the dots are not connected. Do not do a good job leveraging the assets to the needs.
42. It isn't just about healthcare, a focus needs to be put on understanding the community and partner with the community and larger networks.
43. There is a need for increased research directed toward health behaviors and outcome measurements for community health improvement initiatives
44. Physician training needs to be more focused on healthy living and awareness of risk behaviors
45. Lack of awareness of programs.
46. Lack of affordable healthcare.
47. Poor diet and unhealthy eating habits. There is a lack of access to healthy foods.
48. Lack of dental insurance.
49. Lack of access to healthcare.
50. Lack of affordable healthcare.

APPENDIX 8:

QUESTION #7: *In response to the issues that were identified, do you believe there are adequate national/regional resources available to address these issues/problems? If no, what your recommendations?*

National

1. No.
2. No.
3. No, don't think that they are made available. The need is for a prevention agenda and it is not being funded right now. Don't spend the funds now, we pay later.
4. For most part yes, but there is always ways to reinvent what's currently in place.
5. Not anywhere near close to a solution. Municipal sewer systems go over capacity and raw sewage goes into the water system. There needs to be improvement and disconnection of storm sewers from sanitary sewers. It is an extremely important issue.
6. There needs to be improvement in funding for community health research and medical education.
7. Issues are local so it depends on community.
8. There is no political will to produce resources to address issues.
9. More could always be done.
10. Money is not the only issue; it is important to focus on building long-term relationships.

Regional

1. No.
2. No.
3. The issues are starting to be addressed. There is a high initiative, but not enough education on behalf of the families' that lack the access to care.
4. No one including government provides funding and resources for prevention.

APPENDIX C

5. Could be improved but not sure if there is adequate access to receive the services. A majority of people do not have healthcare or access to receive care.
6. There are adequate resources but need to do a remmarshaling of resources. There are too many agencies doing the same thing all at once and not working together.
7. Yes, there are lots of programs and initiatives, but people are not always connected to them. There is not a shortage of initiatives and programs, but need to bring the initiatives into the environment and deliver in a way people can understand so if they want they can take advantage of them. There are a lot of good wills and initiatives to focus on health of families.
8. Yes, able to access care if willing to drive to a city/urban community.
9. There are enough healthcare facilities but not enough jobs. More needs to be done for the residents in the community. Create jobs and have programs available for those who can't afford health coverage.
10. Yes, there is wonderful movement. The issue is translation of information; need to bring it to a level where everyone is able to understand (use explainable terms).
11. No, have seen core services get cut and when that happens need to deploy services.
12. There is a lack of economic resources.
13. There are enough resources but they are not focused on solving these problems (unhealthy lifestyle and lack of access to healthcare).
14. No, there is not enough emphasis and focus because of financial strains. Not able to prevent illness because have a limited amount of dollars, which focuses on healing the sick. Need to focus on prevention.
15. No, not at all. There needs to be many more resources available to address healthcare issues. Healthcare issues are inter-related with the economy. When people don't have jobs they buy cheaper foods.
16. No, there never really is. Need to do a better job at leveraging what we have. There should be better data collection and evaluation.
17. No, need to recognize how fragmented systems are. Organizations are doing the same kinds of work. People who seek assistance who do have issues don't know where to go. Need a one-stop shop for all health needs.
18. No, there needs to be a re-prioritization/change in priority of needs. Money is always there and available, but whether they choose to put it in the correct places falls into a battle of state/county needs.
19. Yes, there are adequate resources.
20. No, healthcare coverage is a national issue. Funding cuts have contributed to public facilities shutting down.
21. No, there is a narrow sense of healthcare and promoting healthcare because only focusing on one part of it. Need to work together to leverage resources to meet the needs of residents in the community.
22. There are resources but residents are not aware of them. Need to focus on awareness.
23. No, not for dental care. Resources are there but they need to be accessible.
24. No.

APPENDIX 9:

QUESTION #8: *Do you see any emerging community health needs, especially among underserved populations, that were not mentioned previously? (Please be as specific as possible)*

APPENDIX C

National

1. No.
2. No.
3. No.
4. Major health systems in town need to promote health instead of treating sickness. Need to control individual behaviors and environmental factors. There needs to be a step taken towards improving environmental health. Stop investing in additional facilities and invest in primary care access in urban communities; right now there is not adequate primary care access in the urban communities. There needs to be a change in priorities of major institutions focusing on serving the underserved in primary care and beyond. Research and medical education needs to be more focused on community health improvement activities.
5. Infectious diseases and rapid development and spread of diseases are a huge concern. Need to focus on implementing solutions to problems quickly at state and local level; it is a challenge.
6. Psychological/mental health issues have not been discussed. Poverty/racism needs to be addressed to help community health needs. It is necessary to address the underlying factors to move forward.
7. Violence/youth violence. Focus on behavior.
8. Increase focus on ways to deal with health disparities. The city of Cleveland has really taken an aggressive initiative to reduce chronic disease (Healthy Cleveland Initiative). Concentrate on measuring health status and focus on behavioral health needs and get them connected to the available resources. Look at ways to improve the health of the youth (healthier menu options in school).
9. An unattended emergency is an emerging concern Example) Hurricane Katrina. A catastrophe places an extra burden on the system. An acute situation then becomes a serious issue that increases the chronic problem of access.

Regional

1. No.
2. No.
3. No.
4. No.
5. No.
6. No.
7. No.
8. No.
9. Youth-on-youth violence is now a public health issue along with domestic violence.
10. Access to mental health services is an emerging issue.
11. Folks are concerned about living in healthy homes. Would like to see more dollars invested in updating homes to help low-income families live in a healthy home.
12. Health education is needed in the community. It is important to educate the community on health. Also, there are not enough places in the community where teenagers could go to receive care.
13. Information/education for the underserved could benefit residents and community from the prevention part of it.

APPENDIX C

14. Diabetes and heart problems emerge because residents are not maintaining a proper diet. There is a lack of income in the underserved community, which plays into the targeted population needing healthcare.
15. Unemployment staying an issue is a concern. The unemployed are unable to access quality healthcare and good food. Also, need to convince retailers to invest in the community so residents have access to quality food and learn how to cook the food.
16. Mental health is an emerging issue and a concern throughout the community.
17. Mental health is a major issue, especially among the underserved population.
18. As the population grows in size (obesity) heart disease and diabetes are all related components that are going to grow. Right now the community is not prepared for the growth, and there is a severe shortage of primary care physicians.
19. HIV is still kept private, but there are many people with needs related to this deadly disease that aren't/choose not to come forward and/or aren't sure where to go for help (cost of medicines are so high for those that can't afford it). STD's is a growing problem, specifically within the younger populations within the inner-city.
20. The status of single-family homes has emerged and affecting children.
21. There are whole generations of people who don't have a clue what a healthy lifestyle would look like in any aspect. From a social standpoint, it is an ongoing challenge that grows acute year by year.
22. A lot of children in the community are late in developing because of inadequate play/care.
23. STD's is an emerging concern. The lack of transportation is an emerging concern, especially for people who have medical needs.
24. The continued rise of obesity and hypertension in the community is an emerging concern.

APPENDIX 10:

QUESTION #9: *Please describe your vision of what the health status nationally/regionally should be in within 5-10 years?*

National

1. Graphically – A vertical axis showing functional health would be near top.
2. All systems in public health all across the nation promote healthy behaviors; invest in regional health public and private.
3. There will be access for all persons, lack of disparities and people are able to meet their own health needs.
4. Should have a healthcare system that provides access to all individuals. It could be a combination of insurance coverage by the government (federal/state) to provide healthcare to all.
5. All issues identified and addressed through understanding of baseline health statuses and national agenda to address health needs. Need to get specific and set meaningful targets, get most specific in underserved social determinants and go from there.
6. Ideally, every family/person would have a primary care provider that is linked to a health system. Also, all records will be able to be accessed through electronic medical records.
7. Should have universal access to care and no one should be left out. The health of the nation is in fact the wealth of the nation. Focus on social determinants of health; people need to have access to food and physical activity so they can participate in healthy behaviors.

APPENDIX C

8. Will begin to see improvement in all areas. Help support substance abuse issues, engage in recreation, provide jobs for the residents and eliminate crime.
9. There will be a focus on health equity. Organizations will focus on all aspects of health (social, physical and emotional health). Continue research on social determinants of health access to clinical care.

Regional

1. People will be active and put an emphasis on exercise and healthy food choices. There is initiative in the community with the creation of urban gardens.
2. 100% of Americans should have access to primary/secondary resources. Americans should individually take responsibility for good trends and outcomes.
3. Hope to move to a higher degree of awareness to proactive services. People will live healthy lifestyles and make healthy choices.
4. A community with access to healthy foods and knowledge of what to do with the food.
5. Sustainability of every neighborhood in Cleveland. Fairfax is in location near Cleveland Clinic Main Campus and should have a strong health initiative. It is not that large of a neighborhood and the residents should be engaged, educated and involved in living a healthy lifestyle. It will be a place where everyone knows what it means to be energy efficient, exercise regularly, eat healthy and be active within the neighborhood. It is also important to bring in quality infrastructure to build a healthy neighborhood. Work with the Cleveland Clinic to improve landscaping.
6. Everybody should have access to healthcare for both physical and mental health services. There is a short amount of mental health clinics in the community and they need to offer education and resources for residents to get involved.
7. Improved healthcare, better health prevention and residents living healthy lifestyles. Right now the underserved population is not involved in prevention (exercise programs, healthy eating programs etc.). Overall, have residents committed to living healthy lifestyles.
8. Anyone who needs healthcare has it. A system should be in place that balances work and people who earn healthcare. Provide enough jobs and healthcare insurance for residents. For those who are unable to work, provide same quality coverage. Make a differentiation between those who can and can't work and make sure everyone receives high-quality care and support. Cleveland Clinic continues to grow and benefit from world leadership.
9. Decrease rate of obesity, lead poisoning, diabetes and heart disease. The community will be more forthright with information. Residents will have gardens and the community will have useable/functional green space.
10. A number of players coming together with a shared vision around community health. All groups work together in dimensions; it is one piece of the bigger picture.
11. Provision of healthcare would be provided in the community. There will be no barriers and all residents will have access to high-quality care.
12. Love to see a decrease in obesity and an increase in primary care.
13. Equitable/equal access to resources that residents need to live healthy. There should be a strong emphasis on prevention.
14. Everyone should have access to coordinated and comprehensive care that involves the patient as a participant.
15. It is going to get worse because there will be an increase in obesity/heart disease and a decrease in activity.

APPENDIX C

16. Would like to see Cuyahoga County the healthiest county in the state. Put money into preventive care.
17. The community will be a walkable community. The community should be a lot healthier than it is now because we are starting to come out of the recession.
18. 5 years, still a ways to go, but will be improving, there are enough people that view the aforementioned as problems but right now we are all underfunded. In 10 years, hoping there is a better overall economy.
19. People will be living healthy and longer lives with less instances of hospitalization. Primary care will be well coordinated for people to access.
20. The community will be pedestrian-friendly and the residents will know what it is to eat healthy and exercise. School programs will focus on children's overall health and lifestyle.
21. Attend to physical health and have more physical activity to make use on the front end with health expertise. Engage in a broad spectrum of health, wealth and education.
22. Get people in Cleveland to embrace outdoor activity and go outside. Focus on promoting outdoor activities.
23. There needs to be a plan in place to create accessible primary care. Goals should be placed around moderating disease in the community.
24. Don't see much change in the next five years; the resources are not there.

APPENDIX 11:

QUESTION #10: *Any additional comments or questions?*

National

1. No.
2. No.
3. No.
4. No.
5. No.
6. No, major issues were covered.
7. Access disparities and variable quality outcomes of disease treatment in different areas.
8. Need to focus on promoting healthier decision-making (exercise, eating and prevention).
9. Care enough, know enough. Overall, there needs to be better leadership in public health.
10. Academic medical centers need to be at the forefront of community health related research and education programs.

Regional

1. No.
2. No.
3. No.
4. No.
5. No.
6. No.
7. No.

APPENDIX C

8. No.
9. No.
10. No.
11. No.
12. No.
13. No.
14. No.
15. No.
16. Have institutions including the Cleveland Clinic stay connected to the community and focus on issues.
17. Excited for the Cleveland Clinic to take lead on this initiative. It would be great to work together to have a huge impact and not act in a vacuum, it is important to work together.
18. Organizations need to focus on the topic of health as a discussion and it should be woven into all discussions in neighborhood development. Make sure there is a checklist to attract and retain residents.
19. Power of community is a very small presence; advocate understanding lower-level notions of community. Hope to get to a place where we see a sustained change over a period of years.
20. A lot of the jury is out based on government regulations.
21. Focus resources on filling the existing gaps in the community, centering on both physical and mental health needs.
22. The biggest issue is not money; it is people's attitudes. Need to get people's attitudes aligned and working together towards solutions. People need to rise up and become actively involved in getting the job done, instead of relying on an external party to get something done.
23. Can't look to the government to get things done, change needs to be made through partnerships.
24. Mental health is a problem as far as lacking funding for appropriate resources. There are overcrowded prisons, so they are releasing those that are considered "mentally impaired" and putting them back on the streets and eventually back within the communities where there isn't the capacity to deal with their issues/needs, so they are adding to the negativity of the community.

APPENDIX D

ADULT RESIDENTS OF COMMUNITIES WITHIN THE 10-ZIP CODE COMMUNITY OF THE CLEVELAND CLINIC MAIN CAMPUS FOCUS GROUP INPUT

Community:

For the purposes of this focus group discussion, report participants represent the local community defined as the 10-zip code surrounding main campus.

INTRODUCTION:

The following qualitative data were gathered during four individual discussion groups conducted with target populations of adult residents of communities adjacent to Cleveland Clinic Main Campus¹ between May 2011 and January 2012. The target population was defined by an advisory committee of Main Campus Hospital executive leadership. The Cleveland Clinic operates eight community hospitals in Northeast Ohio. The discussion groups were conducted by Tripp Umbach consultants and located in Cleveland, OH at the Fairfax Renaissance Development Corporation² in Fairfax; University Settlement³ in Slavic Village; Fatima Family Center⁴ in Cleveland's Hough neighborhood and The Free Medical Clinic of Greater Cleveland⁵. Each participant was provided an incentive of twenty-five dollars. Each discussion group was conducted using a discussion guide previously created by Tripp Umbach and reviewed by Main Campus Hospital executive leadership (Appendix 1). The purpose of these discussion groups was to identify community health needs and concerns affecting adult residents of the aforementioned local community (further referred to as residents of the local community), as well as ways to address those concerns for this specific population.

¹ Fairfax, OH, Hough, OH, East Cleveland, OH, Slavic Village, OH

² Fairfax Renaissance Development Corporation's (FRDC) is a community development organization in the Fairfax neighborhood in Cleveland, OH.

³ University Settlement is a neighborhood center that provides social services to residents of the Broadway/Slavic Village neighborhood in southeast Cleveland, OH.

⁴ Fatima Family Center in Cleveland's Hough neighborhood provides programs and services for residents of all ages in the community and is a program of Catholic Charities.

⁵ The Free Medical Clinic of Greater Cleveland ("The Free Clinic") provides healthcare services at no cost to the un/underinsured community in Greater Cleveland.

APPENDIX D

GROUP RECOMMENDATIONS:

The group provided several recommendations to address community health needs and concerns for adult residents of the local community. A summary of the recommendations are distributed throughout the following pages. Below is a list of the recommendations that were given in several key areas:

PRIMARY AND PREVENTIVE HEALTH SERVICES:

- *Emergency medical transportation services could utilize the nearest emergency room*
- *Increase the number of clinical services and healthcare professionals providing services*
- *Provide free handicap accessible transportation for medical appointments*

COMMUNITY AND ECONOMIC DEVELOPMENT

- *Increase local transit services*
- *Neighborhood Development*
- *Assign space for community gardens*
- *Bring a quality grocery store to the community*
- *Develop economic support*
- *Increase crime control in the community*

COMMUNITY SERVICES

- *Increase the number of affordable after-school activities for youth*
- *Increase the effectiveness of local homeowner assistance programs*
- *Use net-income for means-tested financial assistance programs*
- *Increase community activities for all residents*

RESIDENT ENGAGEMENT

- *Residents take responsibility in the community*
- *Increase community dialogue*
- *Help parents identify and engage support networks*

APPENDIX D

PROBLEM IDENTIFICATION:

During the discussion group process, residents of the local community discussed four community health needs and concerns in their communities. These were:

1. **Primary and preventive health services**
2. **Community and Economic Development**
3. **Community Services**
4. **Resident Engagement**

PRIMARY AND PREVENTIVE HEALTH SERVICES:

Residents of the local community perceived primary and preventive health services provided by medical facilities (i.e., hospitals, private practitioners, etc.) in their communities to be limited in the areas of medical transportation, awareness of residents about available services, preventive care, workforce for under/uninsured medical care, and scheduled appointments.

Perceived Contributing Factors:

- Participants believed healthcare clinics are not close within proximity of one another and limited public transportation can make it difficult for some residents to obtain health services.
- Participants were under the impression emergency medical transportation services choose to transport residents to University Hospital for emergency medical treatment.
- Participants were under the impression residents may not be aware of available services (i.e., mental health services).
- Participants believed the community needs additional health education and prevention programs.
- Participants were under the impression there are not enough healthcare professionals or clinics to meet the demand for under/uninsured medical care.
- Participants believed medical appointments scheduled with physicians at some local hospitals are poorly timed due to lengthy waiting periods for previously scheduled appointments and rushed services provided by physicians.

Mitigating Resources:

Residents of the local community identified the following existing resources in their community that they felt could help improve primary and preventive health services:

- Langston Hughes Center provides medical care and educational materials to under/uninsured residents
- There are some clinics available for emergencies (i.e., Broadway Clinic, urgent care clinics and CVS Minute Clinic)

APPENDIX D

- Cleveland Clinic Health System will provide medical care to residents without insurance
- There are local universities and colleges with medical programs that provide services
- Some mental health services are available
- There are free screenings and health fairs offered in the community several times a year

Group Suggestions/Recommendations:

Residents of the local community offered the following as a possible solution to improve their access to primary and preventive health services in their communities:

- ***Emergency medical transportation services could utilize the nearest emergency room:*** Participants are under the impression that emergency medical transportation services are transporting residents to University Hospital, which participants felt was not the closest facility for emergency treatment. Participants felt that emergency medical transportation could transport residents to the nearest facility within their communities.
- ***Increase the number of clinical services and healthcare professionals providing services:*** Participants believe local healthcare clinics, colleges and universities could collaborate to expand medical education efforts to insure that healthcare professionals are trained and remain in the community. Increased healthcare professional retention rates within their communities could reduce waiting periods at healthcare clinics. Participants also felt the local healthcare providers should provide educational information on weight management and healthy lifestyle choices.
- ***Provide free handicap accessible transportation for medical appointments:*** Participants felt that local hospitals could provide a free door-to-door transit service that would be available when residents had medical appointments. Participants believe providing free handicap accessible transportation would make it easier for residents to get to and from medical appointments.

COMMUNITY AND ECONOMIC DEVELOPMENT

Residents of the local community perceived that the infrastructure of their communities is limited in the areas of transportation, financial resources, housing, and availability of healthy food options.

Perceived Contributing Factors:

- Participants perceived affordable healthy fresh food is not always available within walking distance. Additionally, participants were under the impression RTA Paratransit service restricts the number of bags residents can carry to four, which participants perceived to limit their ability to shop outside of their communities for items such as healthy produce.
- Participants were under the impression while financial assistance resources may be present in their community, some residents may not have access to those resources. Also, participants believed that funding has been reduced for many community programs and services.

APPENDIX D

- Participants perceived there are abandoned/condemned/unsafe homes and industrial properties in their community. Participants were under the impression these properties in their community may provide outlets for criminal activities.
- Participants perceived a lack of transportation in their communities due to the reduction in local RTA services (i.e., circular service and bus routes). Participants were also under the impression it may take as much as two days to schedule Paratransit services.

Mitigating Resources:

Residents of the local community identified the following existing resources in their community that they felt could help improve the infrastructure in their communities:

- There is available space within the community for creation of community gardens
- Senior Transportation Connection, a non-profit organization that provides affordable transportation for senior adults in Cuyahoga County, offers transit services to senior residents
- Senior bus services are available in some areas for \$1 each way once a week and caregivers can ride with them

Group Suggestions/Recommendations:

Residents of the local community offered the following as possible solutions to help improve the infrastructure in their communities:

- ***Increase local transit services:*** Participants felt that communities could increase local transit services by reinstating bus routes, circular bus services and van transportation. Specifically, participants recommended communities reinstate shuttle bus services similar to the former circular bus service. Participants believe increasing local transit services could improve the convenience of public transportation, access to healthy food and healthcare services and seniors' accessibility to services.
- ***Neighborhood Development:*** Participants felt that communities could improve community infrastructure, including institutional buildings such as factories and public school buildings, by demolishing homes that cannot be repaired, rehabilitating abandoned homes and revitalizing buildings. Participants believe addressing infrastructure in a sustainable way increases the continued success of the community.
- ***Assign space for community gardens:*** Participants felt residents and local elected officials should work together to assign space for community gardens that local churches could then help run and maintain. Participants felt that there are vacant lots available in the community where community gardens would thrive. Participants believe this is a sustainable way to increase residents' access to seasonably fresh produce, as well as promote community pride and cohesion.
- ***Bring a quality grocery store to the community:*** Participants believe City Council members can work to bring a quality grocery store to the community that offers affordable, healthy food

APPENDIX D

options. Participants were under the impression that currently there is no grocery store that provides quality produce. Participants indicated the stores that are available do not stock quality food, and when quality food is available, it is costly.

- ***Develop economic support:*** Participants believe community leaders, elected officials, residents, local businesses and local hospitals can increase local, state and corporate funding to keep resources strong and viable. Participants felt local hospitals could stimulate the economy through employee integration and co-op agreements to purchase local goods and services from neighborhood merchants and businesses. Participants also recommended the community increase social service programs to support community residents.
- ***Increase crime control in the community:*** Participants felt that the community could increase the number of police officers working in the community by increasing the funding available to pay for their services, which would increase police presence and allow the response to emergency calls to be more efficient. Increasing police presence could in-turn, decrease the prevalence of crime and make residents feel safer. Additionally, participants felt that residents could form neighborhood watch programs to ensure a strong watch-group presence. Participants felt that increasing their vigilance could decrease the prevalence of crime in their community.

COMMUNITY SERVICES:

Residents of the local community indicated that while their communities have available services in some areas, many participants perceived services to be limited in the areas of the number and response of safety services and activities for all residents, including youth.

Perceived Contributing Factors:

- Participants believed there have been funding cuts to community-based organizations such as the local YMCA and United Way, which have reduced the number of services and programs offered to community residents and increased the cost of family participation, making programs unaffordable for some residents.
- While participants acknowledged there are programs available in their communities for youth, they perceive there is a lack of transportation to get to and from available programs.
- Participants were under the impression crime is prevalent in many local parks, making them unsafe for residents to use.
- Participants were under the impression police response can be limited at times in their community. Additionally, participants believed residents are not always calling the police to report crimes they have witnessed.

Mitigating Resources:

Residents of the local community identified the following existing resources in their community that they felt could increase access to community services:

APPENDIX D

- Healthcare providers providing resources to local institutions (i.e., public schools and non-profits)
- Communities have strong institutions serving residents (i.e., the Manner House, Fairfax Renaissance Development Corporation, Kiwanis Club, cultural centers, Boys and Girls Club on Broadway, etc.)
- The local YMCA, United Ways and other family organizations are available
- There are local coordinators working to connect residents to relevant community services

Group Suggestions/Recommendations:

Residents of the local community offered the following as possible solutions to increase access to community services in their communities:

- ***Increase the number of affordable after-school activities for youth:*** Participants felt that communities could use some of the space in buildings that are currently empty to offer affordable after-school activities that are accessible to youth within the community. Participants believe providing after-school activities that are affordable and accessible to youth using some of the vacant buildings in the community could offer a sustainable way to engage young people in the community, while at the same time reducing the number of empty buildings.
- ***Increase the effectiveness of local homeowner assistance programs:*** Participants felt that communities could ensure that local homeowner assistance programs are more effective at increasing home ownership by increasing funding and public influence of such programs. Participants believe improving the effectiveness of homeowner assistance programs could increase the likelihood that homeowners are able to maintain their residences, which would decrease the rate of foreclosure and prevalence of empty buildings in the community.
- ***Use net-income for means-tested financial assistance programs:*** Participants felt that financial assistance programs, in general, could use net-income when testing residents' means to determine eligibility. Participants believe using net-income for means-tested financial assistance programs, in general, could ensure residents are considered for financial assistance based on the amount of financial resources they have available after monthly bills are paid. Additionally, participants felt the number of residents eligible for financial assistance would increase.
- ***Increase community activities for all residents:*** Participants felt that communities, businesses and local hospitals could collaborate to increase community activities for all residents regardless of age. Also, participants felt that it would be beneficial to provide sports leagues, parades, health fairs, volunteer work and other activities that could increase interaction among residents of all ages. Additionally, participants felt increasing the use of cultural centers could increase community connection and provide an outlet to residents.

RESIDENT ENGAGEMENT:

APPENDIX D

Residents of the local community perceived the engagement of residents in their communities to be limited in the areas of accountability of industries and residents, resident connectedness, involvement with youth, communication with decision-makers.

Perceived Contributing Factors:

- Participants gave the impression residents do not always take responsibility for their individual health statuses and behaviors (i.e., choosing to smoke).
- Participants believed neighbors are not always watching out for one another and calling police when criminal activity takes place, which has caused block watches to decline in their communities.
- Participants perceived neighbors may not always participate in the lives of young people in the neighborhood as much as participants believed they could.
- Participants believed that at times some residents may need to find information on their own.
- Participants gave the impression residents do not always adequately communicate the needs of the community to decision-makers.

Mitigating Resources:

Residents of the local community identified the following as existing resources in their communities that they felt could increase resident engagement:

- There are volunteer opportunities available in the community
- There are some local coordinators working to connect residents to relevant community services
- There are strong community-based organizations that engage and unite residents in some communities

Group Suggestions/Recommendations:

Residents of the local community offered the following as possible solutions to increase resident engagement in their communities:

- ***Residents take responsibility in the community:*** Participants recommended residents become more responsible for their own unhealthy behavior. Participants also indicated residents do not take responsibility of their own community. Participants felt that residents are not always aware that they have the right to take control of their own environment. Participants believed that residents could begin fundraising to generate funding for community needs and initiate projects (i.e., the local library, community gardens, block watch programs, etc.). Participants felt that residents could band together, network among themselves and communicate with one another.

APPENDIX D

Participants felt that residents could hold each other accountable and local industry accountable once each was engaged.

- ***Increase community dialogue:*** Participants felt that there is little engagement between residents within the communities and residents and local institutions. Participants believe re-introducing street clubs and/or community block parties could increase information dissemination; generate a sense of community; increase residents' awareness of the environment and be a positive socialization event. Additionally, participants felt increasing community dialogue could increase community and institutional awareness of the positive and negative impact local health facilities can have on adjacent communities, as well as offer residents the opportunity to be involved in solving some challenges in the community.
- ***Help parents identify and engage support networks:*** Participants felt that local schools could help parents identify and engage local support networks (i.e., other parents willing to help). Participants were under the impression local schools have a connection with parents and resources in the community and could create support groups that could connect parents with one another for supportive purposes. Participants believe helping parents identify and engage support networks could increase the amount of help parents receive with providing for their own children.

APPENDIX D

•
APPENDIX 1:

GENERAL FOCUS GROUP DISCUSSION GUIDE

I. GREETINGS – INTRODUCTION BY CONTACT PERSON

II. GROUP DISCUSSION FORMAT

A. INTRODUCTION

- Thanks for coming here today. My name is _____, we are helping [name of community hospital] conduct a community health assessment.
- Our goal is that everyone here will feel comfortable speaking openly and contributing to our discussion. There are no wrong answers, just different experiences and points of view. So please feel free to share your experiences and your point of view, even if it is different from what others have said.
- Your comments will be summarized in a report, but nobody here will be identified by name, and no comment will be connected to any individual, so you can be sure of your anonymity.
- Because we are taping this discussion so that we can write our report, it is important for everyone to speak up and that only one person talks at a time.
- My role will be to ask questions and listen. It is important for us to hear from all of you because you all have different and valuable experiences. If we haven't heard from some of you, don't be surprised if I call on you to share something about your experiences.
- Does anyone have any questions before we begin?

B. EVERYONE INTRODUCES HIM OR HERSELF

- I'd like to start by going around the table and have everyone introduce themselves and how long you have lived in the community.

C. FOCUS GROUP

APPENDIX D

1. What is a healthy community?
2. Do you think your community is a healthy place – (Why? Why not? Explain ...)
3. What are the biggest health issues or concerns in your community? (Where you live)

(Health concerns for you, for your family, for others in your neighborhood)? *(Have everyone share their top health concerns. The facilitation team will make a quick list of what everyone says and place check marks next to repeats to get a quick prioritized list.)*

REPEAT THESE QUESTIONS FOR EACH ITEM THAT CAME UP AS A TOP CONCERN (top 4 or 5)

- a. Why do you think _____ is a problem in this community?
- b. What are the resources in the community to help solve this problem?
- c. What ideas do you have to solve this problem?
- d. How would your community be different (better, improved, etc.) if this issue went away?

Is there anything we haven't discussed today that you would like to talk about?

Thank You!!

Provide them with incentive

APPENDIX E

FAMILY HEALTH CENTER PHYSICIANS FOCUS GROUP INPUT

Community:

For the purposes of this focus group discussion, report participants represent the regional community.

INTRODUCTION:

The following qualitative data were gathered during a discussion group conducted with a target population of Cleveland Clinic primary care physicians located at Cleveland Clinic Family Health Centers. The target population was defined by an advisory committee of Main Campus Hospital executive leadership. The Cleveland Clinic operates eight community hospitals in Northeast Ohio. The discussion group was conducted by Tripp Umbach consultants and was located at the Cleveland Clinic Independence Family Health Center in Independence, OH. The discussion group was conducted using a discussion guide previously created by Tripp Umbach and reviewed by Main Campus Hospital executive leadership (Appendix 1). The purpose of this discussion group was to identify community health needs and concerns affecting the patients who are seen by Cleveland Clinic Family Health Center Physicians (further referenced as Family Health Center Physicians) as well as ways to address those concerns for this specific population.

GROUP RECOMMENDATIONS:

The group provided many recommendations to address community health needs and concerns for patients who are seen by family health center physicians in the Main Campus Hospital community. Below is a brief summary of the recommendations:

- ***Increase the opportunities residents have to walk around their own community:*** Participants felt that a community that is walkable could have a positive impact on the physical and mental health of residents.
- ***Increase health education:*** Participants felt that the community, local hospitals and community based organizations could increase health education to residents of all ages. Participants felt that increasing health education could improve the accuracy of information that residents receive about medical care, which in turn could improve patient care.
- ***Increase access to healthy food options:*** Participants felt that the community and local businesses could increase access to healthy food options by lowering the cost of healthy food. Participants believed that if healthy food was more affordable residents would have greater access to healthy food options.

PROBLEM IDENTIFICATION:

APPENDIX E

During the discussion group process, Family Health Center Physicians discussed three community health needs and concerns in their community. These were:

1. **Primary and preventative health services**
2. **Access to mental health services**
3. **Health information**
4. **Access to healthy food**

PRIMARY AND PREVENTIVE HEALTH SERVICES:

Family Health Center Physicians perceived primary and preventive health services provided by medical facilities (i.e., hospitals, private practitioners, etc.) in their communities to be adequate. However they perceive that some residents may not have unrestricted access to such services due to limited public transportation, family support, and resources (i.e., money and time).

Perceived Contributing Factors:

- Participants perceived patients in their communities may have difficulty accessing medical care due to limited public transportation, limited family support and isolation.
- Participants were under the impression that residents may not be able to afford medical care if they are unemployed or without medical insurance.
- Participants believed it may be difficult for some residents to get to the doctor if they are working long hours and or multiple jobs.
- Participants were under the impression working parents are not seeking medical care due to the high cost of child care, which may be necessary during scheduled medical appointments.

Mitigating Resources:

Family Health Center Physicians did not identify existing resources in their community that they felt could help improve access to primary and preventive health services.

Group Suggestions/Recommendations:

Family Health Center Physicians did not offer possible solutions to improve their access to primary and preventive health services in their community:

APPENDIX E

ACCESS TO MENTAL HEALTH SERVICES:

Family Health Center Physicians perceived a growing concern regarding the mental health status of residents due to a perceived increase in the need for mental health medications.

Perceived Contributing Factors:

- Participants were under the impression that residents may be dealing with chronic stress and/or chronic anxiety.
- Participants believed the number of patients they are seeing that are taking anti-depressants has risen.
- Participants were under the impression each community can improve access to mental health.
- Participants believed residents may feel isolated and mentally unhealthy due to work/life balance issues.

Mitigating Resources:

Family Health Center Physicians did not identify existing resources in their community that they felt could help improve access to mental health services.

Group Suggestions/Recommendations:

Family Health Center Physicians offered the following as a possible solution to improve mental health of residents:

- ***Increase the opportunities residents have to walk around their own community:*** Participants felt that a community that is walkable could have a positive impact on the mental health of residents.

MISINFORMED CONSUMERS:

Family Health Center Physicians perceived that many residents and patients can be misinformed due to the internet, late night television commercials and individual preferences.

Perceived Contributing Factors:

- Participants were under the impression residents may be getting their health-related information from the internet and or late night television commercials, which participants did not believe are always accurate.
- Participants perceived residents prefer immediate treatment, which participants did not believe always effectively resolves medical issues residents may have. Additionally, participants believed residents may not always be resolving their health needs with long-lasting healthy solutions.

APPENDIX E

- Participants were under the impression it may be difficult for physicians to ensure that patients are properly informed due to limited control over where medical care information can be found (i.e., internet, booklets, etc.). Participants were under the impression not all resources provide patients accurate and reliable medical information.

Mitigating Resources:

Family Health Center did not identify existing resources in their community that they felt could help address the misinformation of consumers.

Group Suggestions/Recommendations:

Family Health Center Physicians offered the following as possible solutions to address the misinformation of consumers in their community:

- ***Increase health education:*** Participants felt the community, local hospitals and community based organizations could increase health education to residents of all ages. Participants felt increasing health education could improve the accuracy of information that residents receive about medical care, which in turn could improve patient care.

ACCESS TO HEALTHY FOOD:

Family Health Center Physicians indicated that residents do not have access to healthy food options. Additionally, participants believed that not all residents are aware of how to eat in a healthy way when healthy food is available.

Perceived Contributing Factors:

- Participants were under the impression residents do not have access to affordable healthy food options.
- Participants believed some patients are not aware of how to cook or prepare foods that are healthy.

Mitigating Resources:

Family Health Center Physicians identified the following existing resource in their community that they felt could increase access to healthy food:

- Wayne County has access to fresh foods

Group Suggestions/Recommendations:

APPENDIX E

Family Health Center Physicians offered the following as a possible solution to increase access to healthy food in their community:

- ***Increase access to healthy food options:*** Participants felt the community and local businesses could increase access to healthy food options by lowering the cost of healthy food. Participants believed that if healthy food was more affordable residents would have greater access to healthy food options.

APPENDIX E

APPENDIX 1:

GENERAL FOCUS GROUP DISCUSSION GUIDE

I. GREETINGS – INTRODUCTION BY CONTACT PERSON

II. GROUP DISCUSSION FORMAT

A. INTRODUCTION

- Thanks for coming here today. My name is _____, we are helping [name of community hospital] conduct a community health assessment.
- Our goal is that everyone here will feel comfortable speaking openly and contributing to our discussion. There are no wrong answers, just different experiences and points of view. So please feel free to share your experiences and your point of view, even if it is different from what others have said.
- Your comments will be summarized in a report, but nobody here will be identified by name, and no comment will be connected to any individual, so you can be sure of your anonymity.
- Because we are taping this discussion so that we can write our report, it is important for everyone to speak up and that only one person talks at a time.
- My role will be to ask questions and listen. It is important for us to hear from all of you because you all have different and valuable experiences. If we haven't heard from some of you, don't be surprised if I call on you to share something about your experiences.
- Does anyone have any questions before we begin?

B. EVERYONE INTRODUCES HIM OR HERSELF

- I'd like to start by going around the table and have everyone introduce themselves and how long you have lived in the community.

APPENDIX E

C. FOCUS GROUP

1. What is a healthy community?
2. Do you think your community is a healthy place – (Why? Why not? Explain ...)
3. “What are the biggest health issues or concerns in your community? (Where you live)

(Health concerns for you, for your family, for others in your neighborhood)?” *(Have everyone share their top health concerns. The facilitation team will make a quick list of what everyone says and place check marks next to repeats to get a quick prioritized list.)*

REPEAT THESE QUESTIONS FOR EACH ITEM THAT CAME UP AS A TOP CONCERN (top 4 or 5)

- a. Why do you think _____ is a problem in this community?
- b. What are the resources in the community to help solve this problem?
- c. What ideas do you have about to solve this problem?
- d. How would your community be different (better, improved, etc.) if this issue went away?

Is there anything we haven't discussed today that you would like to talk about?

Thank You!!

Provide them with incentive

APPENDIX F

NATIONAL COMMUNITY PHYSICIANS FOCUS GROUP INPUT

Community:

For the purposes of this focus group discussion, report participants represent the national community.

INTRODUCTION:

The following qualitative data were gathered during a discussion group conducted with a target population of primary care physicians from the Northeast and Midwest regions¹ of the United States. The target population was defined by an advisory committee of Main Campus Hospital executive leadership. The Cleveland Clinic Health System operates eight community hospitals in Northeast Ohio. The discussion group was conducted by Tripp Umbach consultants using a conference call format. Each participant received an incentive of \$150 for participating. The discussion group was conducted using a discussion guide previously created by Tripp Umbach and reviewed by Main Campus Hospital executive leadership (Appendix 1). The purpose of this discussion group was to identify trending health needs and concerns affecting patients seen by primary care physicians from throughout the Northeast and Midwest regions of the United States (further referred to as national community physicians), as well as ways to address those concerns.

GROUP RECOMMENDATIONS:

The group provided many recommendations to address trending community health needs and concerns for patients who are seen by national community physicians in the Main Campus Hospital community. Below is a brief summary of the recommendations:

- ***Increase physician workforce development:*** Participants felt there are a shortage of primary care physicians and specialists due, in part, to increased regulatory requirements. Participants believed that increasing the independence of practitioners by reducing the amount that they are regulated could attract additional younger physicians to the workforce. Increasing physician workforce development could have a positive impact on the shortage of primary care physicians and specialists.
- ***Make healthcare more affordable:*** Participants felt healthcare may be unaffordable for some people. Participants believed healthcare could be made available to more people if the cost was reduced through tort reform, increasing competition among insurance providers, widely improved individual health statuses and increased consumer choice/control. Making health care more affordable could potentially improve the access all residents have to unaffordable health services.

¹ Indiana, Kentucky, Michigan, New York, Ohio, Pennsylvania, West Virginia

APPENDIX F

- ***Increase awareness about cost-effective forms of prescription medication:*** Participants felt physicians and patients may not have a comprehensive awareness of cost-effective options that are available, such as generic medications. Participants believed pharmacies could provide a generic drug representative to educate physicians at their place of practice. Additionally, participants recommended a comprehensive website be made available that would allow physicians to search for generic brands of prescription medication by their name brand equivalents. Finally, participants felt mass advertising to medical care consumers through Medicare/Medicaid about generic medication options could increase the consumer demand for lower-cost prescription medications. Increasing awareness about cost-effective forms of prescription medication could make prescription medication more affordable.
- ***Improve access to medical records from practice to practice:*** Participants felt services may be duplicated due to limited access to a patients test results and medical records. Participants believed a national-level electronic medical record system would decrease the duplication of services and increase the effectiveness of electronic medical records throughout the United States. Participants felt that national-level practices could take the lead.
- ***Increase health education:*** Participants felt health education could be increased to residents of all ages. Participants felt hospitals could collaborate with community-based organizations like the YMCA to increase health education and outreach. Additionally, participants believed an extension of medical practices should be available to refer patients for dietary and fitness training in the community. Finally, participants believed the dissemination of health education could be increased through 90 second sound bites and columns being published in local newspapers in communities nationwide. Participants felt increasing health education could improve the accuracy of information that residents receive about medical care.
- ***Increase individual accountability for personal health status:*** Participants believed patients were largely responsible for their own health outcomes. Participants also were under the impression that patients would feel better about themselves and their health statuses if they had exerted more control over their individual behaviors and choices. Increasing individual accountability for personal health status could improve the health status of patients nationwide.
- ***Develop wellness centers:*** Participants felt their patients could benefit from having a wellness center, which would house a dietician, a registered nurse and fitness experts in one location. Participants believed patients could be referred to the wellness center and receive services regardless of insurance status. Participants believed insurance companies could fund local wellness centers outright in every community. Developing insurance-funded wellness centers could improve the individual health statuses of patients.
- ***Develop collaborative efforts to provide additional wellness services:*** Participants believe local medical practices, hospitals and community-based organizations could collaborate to secure grants and fund a nutritionist that would split their time among partnering organizations to provide dietary education and health screenings to consumers free of charge.

APPENDIX F

- ***Make healthy behavior profitable:*** Participants felt people do not strive to be healthy because it takes effort and is not directly profitable for “corporate America.” Participants were under the impression that individual behavior may be difficult and slow to change; however, participants believed that corporate behavior changes quickly and may have a direct impact on individual behavior. Making healthy behavior profitable could leverage the power of corporations to change individual health status.
- ***Lead by example:*** Participants felt physicians could lead by example in order provide patients a role model for healthy behavior. Participants believe patients are more likely to listen to the advice of their physician if it is apparent that a physician is practicing their own advice.
- ***Make accurate healthcare information and advice readily available online:*** Participants felt nationally recognized healthcare providers could provide healthcare information online and then allow community and private practices to link to their websites. Making accurate healthcare information and advice readily available online could provide patients in smaller communities with information that may not otherwise be available.
- ***Increase the amount of information available about autism:*** Participants felt that while autism is increasingly being diagnosed, physicians do not always have access to local resources to refer parents to for treatment. Many resources for autism are scattered throughout the nation. Participants felt the provision of a national autism resource database could help physicians guide the treatment of autistic individuals in their community, as well as educate parents of autistic children.

PROBLEM IDENTIFICATION:

During the discussion group process, national community physicians discussed three community health needs and concerns in their community. These were:

1. **Primary and preventive health services**
2. **Health education and healthy behaviors**
3. **Access to mental health services**

PRIMARY AND PREVENTIVE HEALTH SERVICES:

National community physicians perceived primary and preventive health services provided by medical facilities (i.e., hospitals, private practitioners, etc.) in their communities to be good but limited in their effectiveness due to workforce shortages, cost of healthcare and health insurance, consumer controls and information sharing.

Perceived Contributing Factors:

APPENDIX F

- Participants were under the impression that the physician workforce is limited in primary and specialty medical care. Participants were under the impression people with the potential to be good physicians are not entering medical school and/or practicing medicine due to stringent government restrictions and controls, malpractice suits, and growing penalties for physicians. Participants believe a shortage of available physicians can lead to lengthy waiting periods for medical appointments and increased use of emergency medical care for non-emergent issues.
- Participants were under the impression that Medicaid recipients may have multiple health needs at times that may not always be covered by their health insurance plan. Additionally, participants believed medications can be more difficult for Medicaid recipients to secure at times due to limited coverage.
- Participants believed there is a growing population of uninsured patients that do not qualify for medical assistance of any kind for whom individual medical insurance coverage may be unaffordable. Participants were under the impression that uninsured patients are less likely to seek medical care, which participants believed may result in untreated illness and a poorer health status.
- Some participants were under the impression preventive services may have decreased in some communities due to reduced funding and limited financial resources.
- Participants believed the growing under/uninsured population is due to the weak economy and an increased unemployment rate, which participants felt may present some patients with barriers to accessing medical care, such as higher medical insurance deductibles and/or costly fees for medical services that may be unaffordable for some patients. Participants felt this may be particularly true for patients who are younger (i.e., 20-40 years of age) and unemployed or earning a low wage working for an employer that may offer limited medical insurance benefits.
- Participants were under the impression small businesses may be unable to afford healthcare coverage.
- Participants believed the cost of name-brand medication may be unaffordable for some patients. Some participants gave the impression it may be difficult for physicians to be aware of all generic brand medications because of the large variety of such medications. Additionally, participants felt that patients often refuse generic brand medications, which participants believed to be the result of limited awareness and marketing strategies that are used for name-brand medications.
- Participants were under the impression some patients may receive the same services from different facilities due to limited connectivity in the medical industry as a result of the number of providers throughout the nation and no formal connection (i.e., national electronic medical records) at times may lead to the duplication of services.

Mitigating Resources:

National community physicians identified the following existing resources in their community that they felt could increase access to primary and preventive health services:

- Under/uninsured medical care at free clinics
- Medical students get to experience primary care rotations

APPENDIX F

- Pharmacies provide physicians a comprehensive list of generic medications that are available in some communities
- Some communities are addressing the potential for duplicity of services by instituting electronic medical records that can be accessed regionally

Group Suggestions/Recommendations:

National community physicians offered the following as possible solutions to improve their access to primary and preventive health services in their community:

- **Increase physician workforce development:** Participants felt there are a shortage of primary care physicians and specialists due, in part, to increased regulatory requirements. Participants believed increasing the independence of practitioners by reducing the amount that they are regulated could attract additional younger physicians to the workforce. Increasing physician workforce development could have a positive impact on the shortage of primary care physicians and specialists.
- **Make healthcare more affordable:** Participants felt healthcare may be unaffordable for some people. Participants believed healthcare could be made available to more people if the cost was reduced through tort reform, increased competition among insurance providers, widely improved individual health statuses and increased consumer choice/control. Making health care more affordable could potentially improve the access all residents have to unaffordable health services.
- **Increase awareness about cost-effective forms of prescription medication:** Participants felt physicians and patients may not have a comprehensive awareness of cost-effective options that are available, such as generic medications. Participants believed pharmacies could provide a generic drug representative to educate physicians at their place of practice. Additionally, participants recommended a comprehensive website be made available that would allow physicians to search for generic brands of prescription medication by their name brand equivalents. Finally, participants felt mass advertising to medical care consumers through Medicare/Medicaid about generic medication options could increase the consumer demand for lower-cost prescription medications. Increasing awareness about cost-effective forms of prescription medication could make prescription medication more affordable.
- **Improve access to medical records from practice to practice:** Participants felt services may be duplicated due to limited access to a patients test results and medical records. Participants believed a national-level electronic medical record system would decrease the duplication of services and increase the effectiveness of electronic medical records throughout the United States. Participants felt national-level practices could take the lead.

HEALTH EDUCATION AND HEALTHY BEHAVIORS:

APPENDIX F

National community physicians perceived that health education may be limited in their communities in the areas of dissemination, retention, and use of information, the personal choices patients make, availability of unhealthy options, and prevalence of lifestyle driven diseases.

Perceived Contributing Factors:

- Participants gave the impression health education may be limited due to patients' retention of information that is provided, limited health education offerings in the community and/or ineffective placement/use of educational materials (e.g., internet-based education with less computer-savvy patients and/or medical information broadcasted on the television that may have unintended consequences). Additionally, participants believed that some of their patients at times may have a limited awareness of healthy and unhealthy options.
- Participants believed there has been a rise in lifestyle driven diseases (i.e., diabetes, hypertension, etc.), some of which may be controllable when patients are aware of and implement health behaviors (i.e., healthy eating habits, stress management, etc.).
- Participants believed poor health choices may lead to poor health statuses, which, in turn, may lead to an increase in healthcare expenditures and costs.
- Participants perceived residents prefer an immediate treatment, which participants did not believe always effectively resolves each medical issue that residents may have. Additionally, participants believed that residents may not always be resolving their health needs with long-lasting healthy solutions (i.e., dietary changes, stress management, etc.). Participants specifically mentioned a younger population that may not always take responsibility for their individual health status.
- Participants perceived there has been an increase in the number of unhealthy options (i.e., television, fast food, etc.) that are available to their patients and that such options overshadow healthier options in their community. Additionally, participants were under the impression that unhealthy options may be more affordable than healthy options for some of their patients.
- Participants felt the prevalence of obesity may be on the rise nationally for all people including children, which participants felt may be the result of cultural changes and generational traditions/behaviors throughout the United States. Additionally, participants gave the impression that unhealthy behavior at times may be motivated by a variety of factors that are not always directly related to the behavior itself (e.g., overeating as a result of feeling lonely).
- Participants were under the impression that some physicians may approve the use of short-term solutions that may not be as healthy as longer-term solutions. This increases the likelihood that the physician can continue to provide education to the patient on healthy choices.

Mitigating Resources:

National community physicians identified the following existing resource in their community that they felt could increase health education and healthy behaviors in their community:

- Participants believed older adults may take more responsibility for their health status than younger people.

APPENDIX F

Group Suggestions/Recommendations:

National community physicians offered the following as possible solutions to increase health education and healthy behaviors in their community:

- ***Increase health education:*** Participants felt health education could be increased to residents of all ages. Participants felt hospitals could collaborate with community-based organizations like the YMCA to increase health education and outreach. Additionally, participants believed an extension of medical practices should be available to refer patients for dietary and fitness training in the community. Finally, participants believed the dissemination of health education could be increased through 90 second sound bites and columns being published in local newspapers in communities nationwide. Participants felt increasing health education could improve the accuracy of information that residents receive about medical care.
- ***Increase individual accountability for personal health status:*** Participants believed that patients were largely responsible for their own health outcomes. Participants also were under the impression that patients would feel better about themselves and their health statuses if they had exerted more control over their individual behaviors and choices. Increasing individual accountability for personal health status could improve the health status of patients nationwide.
- ***Develop wellness centers:*** Participants felt their patients could benefit from having a wellness center, which would house a dietician, a registered nurse and fitness experts in one location. Participants believed patients could be referred to the wellness center and receive services regardless of insurance status. Participants believed insurance companies could fund local wellness centers outright in every community. Developing insurance-funded wellness centers could improve the individual health statuses of patients.
- ***Develop collaborative efforts to provide additional wellness services:*** Participants believe local medical practices, hospitals and community-based organizations could collaborate to secure grants and fund a nutritionist that would split their time among partnering organizations to provide dietary education and health screenings to consumers free of charge.
- ***Make healthy behavior profitable:*** Participants felt that people do not strive to be healthy because it takes effort and is not directly profitable for “corporate America.” Participants were under the impression that individual behavior may be difficult and slow to change; however, participants believed that corporate behavior changes quickly and may have a direct impact on individual behavior. Making healthy behavior profitable could leverage the power of corporations to change individual health status.
- ***Lead by example:*** Participants felt that physicians could lead by example in order provide patients a role model for healthy behavior. Patients are more likely to listen to the advice of their physician if it is apparent that a physician is practicing their own advice.
- ***Make accurate healthcare information and advice readily available online:*** Participants felt that nationally recognized healthcare providers could provide healthcare information online and then allow community and private practices to link to their websites. Making accurate

APPENDIX F

healthcare information and advice readily available online could provide patients in smaller communities with information that may not otherwise be available.

ACCESS TO MENTAL HEALTH SERVICES:

National community physicians perceived a growing concern regarding the mental health status of their patients due to limited resources, awareness, professional turnover rate, continuity of care and patient navigation.

Perceived Contributing Factors:

- Participants were under the impression that there are limited psychological/psychiatric specialists available in their communities (i.e., Geri-psych specialist). Participants gave the impression that they did not believe that general practitioners were prepared to manage mental health diagnoses without specialized training.
- Participants were under the impression that mental health services in their communities may be limited in number and the scope of services available and be disjointed and difficult for their patients to navigate at times. Participants believed that as a result of these issues, their patients who suffer mental illness may not always be getting their needs met.
- Participants perceived that the turnover rate among professionals in the mental health field may have an impact on a treatment and the continuity of mental health care.
- Participants perceived an increase in the prevalence of autism. Additionally, participants were under the impression that there are limited resources to treat autism in their community. Participants gave the impression that there is limited understanding about autism among general practitioners without specialized training, which they felt may make it difficult for some physicians to educate and direct parents of autistic children once they are diagnosed. Participants specifically discussed the lack of local specialists and resources for adults with an autism diagnosis.

Mitigating Resources:

National community physicians did not identify existing resources in their communities that they felt could help improve access to mental health services.

Group Suggestions/Recommendations:

National community physicians offered the following as a possible solution to help improve the access to mental health services in their community:

- ***Increase the amount of information available about autism:*** Participants felt that while autism is increasingly being diagnosed, physicians do not always have access to local resources to refer parents to for treatment. Many resources for autism are scattered throughout the nation. Participants felt that the provision of a national autism resource database could help physicians

APPENDIX F

guide the treatment of autistic individuals in their community, as well as educate parents of autistic children.

APPENDIX F

APPENDIX 1:

GENERAL FOCUS GROUP DISCUSSION GUIDE

I. GREETINGS – INTRODUCTION BY CONTACT PERSON

II. GROUP DISCUSSION FORMAT

A. INTRODUCTION

- My name is _____, we are helping [name of community hospital] conduct a community health assessment.
- Our goal is that everyone here will feel comfortable speaking openly and contributing to our discussion. There are no wrong answers, just different experiences and points of view. So please feel free to share your experiences and your point of view, even if it is different from what others have said.
- Your comments will be summarized in a report, but nobody here will be identified by name, and no comment will be connected to any individual, so you can be sure of your anonymity.
- Because we are taping this discussion so that we can write our report, it is important for everyone to speak up and that only one person talks at a time.
- My role will be to ask questions and listen. It is important for us to hear from all of you because you all have different and valuable experiences. If we haven't heard from some of you, don't be surprised if I call on you to share something about your experiences.
- Does anyone have any questions before we begin?

B. EVERYONE INTRODUCES HIM OR HERSELF

- I'd like to start by going around the table and have everyone introduce themselves and how long you have lived in the community.

C. FOCUS GROUP

APPENDIX F

1. What is a healthy community?
2. Do you think your community is a healthy place – (Why? Why not? Explain ...)
3. What are the biggest health issues or concerns in your community? (Where you live)

(Health concerns for you, for your family, for others in your neighborhood)? *Have everyone share their top health concerns. The facilitation team will make a quick list of what everyone says and place check marks next to repeats to get a quick prioritized list.)*

REPEAT THESE QUESTIONS FOR EACH ITEM THAT CAME UP AS A TOP CONCERN (top 4 or 5)

- a. Why do you think _____ is a problem in this community?
- b. What are the resources in the community to help solve this problem?
- c. What ideas do you have to solve this problem?
- d. How would your community be different (better, improved, etc.) if this issue went away?

Is there anything we haven't discussed today that you would like to talk about?

Thank You!!

Provide them with incentive

APPENDIX G

<p>Tripp Umbach completed an inventory of community resources available in the Cleveland Clinic Main Campus Hospital service area using resources identified by the Cleveland Clinic, internet research and United Way's 211 First Call for Help community resource database. Using the zip codes which define the Cleveland Clinic Main Campus Hospital community (44103, 44104, 44106, 44108, 44112, 44114, 44115, 44118, 44120, 44127) more than 300 community resources were identified with the capacity to meet the three community health needs identified in the Cleveland Clinic Main Campus Hospital CHNA. (Please refer to the Community Health Needs Assessment Report to review the detailed community needs.)</p>											
<p>An inventory of the resources in the Cleveland Clinic Main Campus Hospital community found that there is at least one and often multiple resources available to meet each identified community health need. The following table meets CHNA community inventory requirements set forth in IRS Notice 2011-52. (See Table)</p>											
<p>INVENTORY OF COMMUNITY RESOURCES AVAILABLE TO ADDRESS COMMUNITY HEALTH NEEDS IDENTIFIED IN THE CLEVELAND CLINIC MAIN CAMPUS HOSPITAL CHNA</p>											
<p>http://www.osteopathic.org/Pages/default.aspx</p>											
Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
211 / FIRST CALL FOR HELP	Cuyahoga	1331 Euclid Ave., Cleveland, OH 44115 ~(216) 436-2000 ~www.211cleveland.org	More Information	No restrictions.	Offers 24-hour telephone information about health and human services in Cuyahoga County. Specializes in referrals to senior programs, alcohol and drug addiction services, homeless shelters and food programs. Serves as the County's after-hours day care referral line. Provides printed directories for seniors, youth and others, and maintains a comprehensive database of health and human services.				*		
211 / FIRST CALL FOR HELP	Geauga	209 Center Street, Chardon, OH 44024 ~(440) 285-3194 ~www.211geauga.org	More Information	No restrictions.	Offers 24-hour telephone information about health and human services in Geauga County. Specializes in referrals to senior programs, alcohol and drug addiction services, homeless shelters and food programs. Serves as the County's after-hours day care referral line. Provides printed directories for seniors, youth and others, and maintains a comprehensive database of health and human services.				*		
211 / FIRST CALL FOR HELP	Lake	54 S State Street, Painesville, OH 44077 ~(866) 981-3937 or (440) 639-4420 ~www.lclifeline.org/211LakeCounty.html	More Information	No restrictions.	Offers 24-hour telephone information about health and human services in Lake County. Specializes in referrals to senior programs, alcohol and drug addiction services, homeless shelters and food programs. Serves as the County's after-hours day care referral line. Provides printed directories for seniors, youth and others, and maintains a comprehensive database of health and human services.				*		
211 / FIRST CALL FOR HELP	Lorain	1875 N Ridge Road E, Ste. H, Lorain, OH 44055 ~(800) 275-6106 ~www.211lorain.org	More Information	No restrictions.	Offers 24-hour telephone information about health and human services in Lorain County. Specializes in referrals to senior programs, alcohol and drug addiction services, homeless shelters and food programs. Serves as the County's after-hours day care referral line. Provides printed directories for seniors, youth and others, and maintains a comprehensive database of health and human services.				*		
211 / FIRST CALL FOR HELP	Medina	704 N Court Street, Medina, OH 44256 ~(888) 330-4211 ~www.211medina.org	More Information	No restrictions.	Offers 24-hour telephone information about health and human services in Medina County. Specializes in referrals to senior programs, alcohol and drug addiction services, homeless shelters and food programs. Serves as the County's after-hours day care referral line. Provides printed directories for seniors, youth and others, and maintains a comprehensive database of health and human services.				*		
211 / FIRST CALL FOR HELP	Portage	218 West Main Street, Ravenna, OH 44266 ~(800) 961-0191 or (330) 297-4636 ~www.uwportage.org	More Information	No restrictions.	Offers 24-hour telephone information about health and human services in Portage County. Specializes in referrals to senior programs, alcohol and drug addiction services, homeless shelters and food programs. Serves as the County's after-hours day care referral line. Provides printed directories for seniors, youth and others, and maintains a comprehensive database of health and human services.				*		
211 / FIRST CALL FOR HELP	Summit	703 South Main Street, Suite 211, Akron, OH 44311 ~(888) 212-5041 ~www.211summit.org	More Information	No restrictions.	Offers 24-hour telephone information about health and human services in Summit County. Specializes in referrals to senior programs, alcohol and drug addiction services, homeless shelters and food programs. Serves as the County's after-hours day care referral line. Provides printed directories for seniors, youth and others, and maintains a comprehensive database of health and human services.				*		
AARP SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP)	Cuyahoga	4614 Prospect Ave. Ste. 211, Cleveland, OH 44103 ~(216) 981-1155 ~www.aarp.org	More Information	Unemployed adults, ages 50 and older, who reside in Cuyahoga County and have income at or below 125% of the Federal Poverty Guidelines.	Offers a work-training program designed to help older adults to develop or improve working skills and to remain in or re-enter the workforce. Participants are placed in temporary employment for at least 18 hours per week where they receive job training and earn an income (at least minimum wage). Participants receive supportive services such as a yearly physical examination and membership in AARP.				*		
AIDS TASKFORCE OF GREATER CLEVELAND	Cuyahoga	3210 Euclid Ave., Cleveland, OH 44115 ~(216) 621-0766 ~www.aidstaskforce.org	More Information	Targets individuals living with AIDS/HIV and their families/partners.	Provides a comprehensive and compassionate response to HIV and AIDS in the Greater Cleveland community through supportive services, educational, and advocacy.			*	*		
AKRON SUMMIT COMMUNITY ACTION, INC	Summit	55 E. Mill Street, Akron, Ohio 44309-2000 ~(330) 376-7730 ~www.ascainc.org	More Information	Summit County residents.	Food bank, dental care, eye care, prevention education, shelter and referrals.	*	*	*	*		
ALCOHOL, DRUG ADDICTION AND MENTAL HEALTH SERVICES BOARD OF LAKE COUNTY	Lake	~(440) 350-3117 ~www.lakeadams.org	More Information	Lake County residents.	Provides a system of prevention and care for persons suffering from addiction and/or mental illness.	*		*	*		
ALCOHOL, DRUG ADDICTION AND MENTAL HEALTH SERVICES BOARD OF MEDINA COUNTY	Medina	246 Northland Dr., Medina City, OH 44256 ~(330) 723-9642 ~www.mcdac.com	More Information	Medina County residents.	Provides a system of prevention and care for persons suffering from addiction and/or mental illness.	*		*	*		
ALCOHOL, DRUG ADDICTION AND MENTAL HEALTH SERVICES BOARD OF SUMMIT COUNTY	Summit	100 W. Cedar Street, Suite 300, Akron, OH 44307 ~(330) 762-3500 ~www.admboard.org	More Information	Summit County residents.	Provides a system of prevention and care for persons suffering from addiction and/or mental illness.	*		*	*		
ALCOHOL, DRUG ADDICTION, AND MENTAL HEALTH SERVICES BOARD OF CUYAHOCA COUNTY	Cuyahoga	2012 W 25th St. 6th Fl., Cleveland, OH 44113 ~(216) 241-3400 ~www.adamhsc.org	More Information	Cuyahoga County residents.	Provides a system of prevention and care for persons suffering from addiction and/or mental illness.	*		*	*		
ALL CARE TRANSPORTATION	Cuyahoga	13117 Cedar Rd., Cleveland Hts., OH 44118 ~(216) 326-0502	More Information	Serves Cuyahoga County.	Provides door-to-door non-emergency transportation for persons who are frail or disabled.				*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
ALTA HOUSE	Cuyahoga	12510 Mayfield Rd., Cleveland, OH 44106 ~(216) 421-1536 ~www.altahouse.org	More Information	Targets residents of Mayfield-Murray Hill and University Circle neighborhoods.	Offers a community center servicing seniors, youth, and families with social, educational, recreational and human services.	*	*	*	*		
ALTERNATIVE PATHS	Medina	246 Northland Drive, Suite 200 A, Medina, OH 44256 ~(330) 725-9195 ~www.alternativepaths.org	More Information	Medina County residents.	Provides community support services for adult individuals who are severely mentally disabled. Assists persons with acute or chronic severe mental illness helping to develop their autonomy without being isolated or excluded from the community. Operates suicide hotline and mental health crisis hotline.		*	*	*		
AMERICAN CANCER SOCIETY - CUYAHOGA COUNTY HOPE LODGE	Cuyahoga	11432 Mayfield Rd., Cleveland, OH 44106 ~(888) 227-6446 ~www.cancer.org	More Information	Serves cancer patients and families/friends of cancer patients.	Provides support for cancer patients and their families. Offers such services as referral to resources (including financial assistance and clinical trials), help with arrangements such as transportation, assistance with insurance or Medicare questions, and answering questions about the disease. Provides free housing to any adult who has come to Cleveland to receive cancer treatment at a local hospital.		*		*		
AMERICAN CANCER SOCIETY - NORTH REGIONAL OFFICE	Cuyahoga	10501 Euclid Ave., Cleveland, OH 44106 ~(888) 227-6446 ~www.cancer.org	More Information	Cuyahoga County residents with cancer and their families.	Works toward the elimination of cancer as a major health problem by preventing cancer, saving lives, and diminishing suffering from cancer via research funding, education, advocacy and service. Provides information about both cancer and resources for cancer patients. Also sponsors a range of support groups and one-to-one visitation programs for cancer patients.		*	*			
AMERICAN CARE MEDICAL TRANSPORTATION	Cuyahoga	3615 Superior Ave. E, Ste. 3101F, Cleveland, OH 44114 ~(216) 881-0793 ~www.americancaremedical.com	More Information	No restrictions.	Provides a range of transportation services, including Medicaid non-emergency medical transportation, human service center transportation, and managed care organization transportation services.				*		
AMERICAN DIABETES ASSOCIATION - NORTHEAST OHIO REGIONAL OFFICE	Cuyahoga	4500 Rockside Rd. Ste. 440, Independence, OH 44131 ~(216) 328-9989 ~www.diabetes.org	More Information	No restrictions.	Provides educational materials and seminars, fundraising, and community outreach regarding diabetes.			*			*
AMERICAN HEART ASSOCIATION GREAT RIVERS AFFILIATE: CLEVELAND	All Counties	1689 E. 115 St., Cleveland, OH 44106 ~(216) 791-7500 ~www.heart.org	More Information	No restrictions.	Provides resources, education, advocacy, and outreach related to cardiovascular disease and stroke.			*			*
AMERICAN LUNG ASSOCIATION OF OHIO - NORTHEAST REGION	Cuyahoga and Summit	6100 Rockside Woods Blvd. #260, Independence, OH 44131 ~(216) 524-5864 ~www.midlandlung.org	More Information	No restrictions.	Offers literature on smoking and health, smoking cessation, asthma, air pollution.			*			*
AMERICAN MEDICAL ASSOCIATION	No restrictions	515 N. State Street, Chicago, IL 60654 ~(800) 621-8335 ~www.ama-assn.org/	More Information	No restrictions.	Non-profit national professional association of physicians promoting the art and science of medicine and the improvement of public health. Provides continuing medical for physicians. Offers policy, research, and educational resources to professionals and the public. Provides patient education materials including health literacy resources.			*		*	*
AMERICAN OSTEOPATHIC ASSOCIATION	No restrictions	142 E. Ontario St., Chicago, IL 60611-2864 ~(800) 621-1773 or (312) 202-9000 ~www.osteopathic.org	More Information	No restrictions.	Non-profit national professional association representing more than 78,000 osteopathic physicians and medical students. Accrediting agency for all osteopathic medical schools. Has federal authority to accredit hospitals and health care facilities. Provides continuing medical education for osteopathic physicians and resources for medical students, interns, and residents.			*		*	*
AMERICAN RED CROSS OF GREATER CLEVELAND	Cuyahoga, Geauga, and Lake	3747 Euclid Avenue, Cleveland, OH 44115 ~(216) 431-3010 ~www.redcross-cleveland.org/	More Information	No restrictions.	Provides emergency assistance in times of disaster, health and safety education, counseling and access to financial assistance for military personnel and their families, international tracing services, and volunteer involvement programs.				*		
AMERICAN RED CROSS - SUMMIT COUNTY CHAPTER	Summit and Portage	501 W. Market St. Akron, OH 44303 ~(330) 535-6131 ~www.summitcounty.redcross.org	More Information	No restrictions.	Provides emergency assistance in times of disaster, health and safety education, counseling and access to financial assistance for military personnel and their families, international tracing services, and volunteer involvement programs. Also provides transportation.				*		
AMERICAN RED CROSS MEDINA COUNTY CHAPTER EXPANDED TRANSPORTATION OPTIONS (ETO)	Medina	780 E. Smith Rd. Ste. A, Medina City, OH 44256 ~(330) 723-4565 ~www.medinaredcross.org	More Information	Medina County residents age 60+ or with disabilities.	Provides paratransit services to qualified individuals with physical disabilities or older adults. Offers transportation to out of county medical appointments which may include but is not limited to hospitals, doctor appointments such as the Cleveland Clinic.				*		
ARTHRITIS FOUNDATION - GREAT LAKES REGION - NORTHEASTERN OHIO	Cuyahoga and Summit	4630 Richmond Rd. Ste. 240, Warrensville Hts., OH 44128 ~(216) 831-7000 ~www.arthritis.org	More Information	Any person diagnosed with arthritis.	Provides leadership in the prevention, control and cure of arthritis and related diseases.			*			
ASAP HOME CARE AND HOME NURSES	Medina	One Park Centre Dr. Ste. 17, Wadsworth, OH 44281 ~(330) 334-7027 ~www.asaphomecare.com	More Information	Medina County residents.	Provides a variety of home health and home care services.	*	*	*			
ASIAN SERVICES IN ACTION - CLEVELAND	Cuyahoga	3631 Perkins Ave. 2A-W, Cleveland, OH 44114 ~(216) 881-0330 ~asiainc-ohio.org/	More Information	Cuyahoga County residents.	Site of mentoring, after-school, language translation services, tobacco use prevention and advocacy and a program to engage elders in the community, vocational and job skills training and placement assistance. Supports the entire spectrum of education, research, and patient care activities conducted by member institutions.			*	*		
ASSOCIATION OF AMERICAN MEDICAL COLLEGES	All Counties	2450 N Street, NW, Washington, DC 22037 ~(202) 828-1125 ~www.aamc.org	More Information	No restrictions.	Serves and leads the academic medicine community to improve the health of all. Represents 137 accredited U.S. medical schools, 400 major teaching hospitals and health systems, and 90 academic and scientific societies.					*	*
BATTERED WOMEN'S SHELTER OF MEDINA COUNTY	Medina	3637 Medina Road, Medina, OH 44256 ~(330) 723-9610	More Information	Women, men or children who are victims of domestic violence primarily from Medina County but will service clients outside the county if space is available.	Offers immediate shelter and several other supportive services to those experiencing domestic violence.				*		
BELLEFAIRE JEWISH CHILDREN'S BUREAU - MAIN SITE	Cuyahoga, Geauga, Lake, Portage and Summit	22001 Fairmount Blvd., Shaker Hts., OH 44118 ~(800) 879-2522 ~www.bellefairejcb.org	More Information	Residents of Cuyahoga, Geauga, Lake, Portage and Summit Counties.	Offers programs designed to meet the emotional, physical, and intellectual needs of children, youth, and families. Services include residential treatment; individual, group, and family outpatient counseling; psychological testing and assessment; in-home and school-based programs; foster care; adoption; and autism services.	*	*	*			

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
BOY SCOUTS OF AMERICA	Cuyahoga and Summit	Greater Cleveland Council, 2241 Woodland Ave., Cleveland, Ohio 44115 ~(216) 861-6060 ~councils.scouting.org/council440.aspx	More Information	Male youth, ages 7-17.	Provides a program for boys.			*	*		
BOYS & GIRLS CLUBS OF CLEVELAND	No restrictions	6114 Broadway Ave., Cleveland, OH 44127 ~(216) 883-2106 ~www.clevelandkids.org	More Information	Youth, ages 6-18.	Provides programs and activities for youth.			*	*		
BRATENAH, VILLAGE OF	Cuyahoga	411 Bratenahl Rd., Bratenahl, OH 44108 ~(216) 681-4266 ~www.bratenahl.org	More Information	Targets residents of Bratenahl.	Administers public services for residents of the Village of Bratenahl.			*	*		
CALVARY PRESBYTERIAN CHURCH	Cuyahoga	2020 E 79th St., Cleveland, OH 44103 ~(216) 391-8448	More Information	Open to those in zip code 44103 who have income within USDA income limits.	Provides those in need with bags of groceries sufficient for approximately three days, supplies are proportional to family size.				*		
CARE ALLIANCE - HEALTH CENTER	Cuyahoga	1530 Saint Clair Ave., Cleveland, OH 44114 ~(216) 781-6724 ~www.carealliance.org	More Information	Anyone residing in Cuyahoga County who is uninsured or underinsured. Targets those who are homeless or living in public housing.	Provides primary medical services, including screenings, physicals, wound care, and routine blood work. Offers podiatry clinic once per month. Will also provide substance abuse and behavioral health counseling for clients who are being seen for a health care issue. Helps clients find patient assistance programs that provide prescriptions. Will help complete and mail applications for these programs.	*	*	*			
CARE ALLIANCE AT CARL B. STOKES CLINIC	Cuyahoga	6001 Woodland Ave. #D602, Cleveland, OH 44104 ~(216) 923-5000 ~www.carealliance.org	More Information	Uninsured or underinsured Cuyahoga County residents. Targets those who are homeless or living in public housing.	Provides a non-profit community health center that offers primary care, dental services and behavioral health care.	*	*	*			
CASE WESTERN RESERVE UNIVERSITY- COMMUNITY OUTREACH ONLINE PROGRAM INVENTORY	Cuyahoga	10900 Euclid Ave., Cleveland, OH 44106 ~blog.case.edu/community/	More Information	No restrictions.	Provides an extensive inventory of community outreach programs and partnerships throughout the Greater Cleveland region.				*		
CASE WESTERN RESERVE UNIVERSITY - SCHOOL OF LAW	Cuyahoga	11075 East Blvd., Cleveland, OH 44106 ~(216) 688-2766 ~law.case.edu/clinic	More Information	Adults 18+, low-income, and residents of Cuyahoga County. Call for specific income limits. Will take calls regarding predatory lending issues for anyone with those issues, including individuals with property they live in and property they rent out. Criminal cases can be handled in Euclid and Cleveland Heights courts.	Provides representation by 3rd-year law students, operating under the supervision of faculty. Cases handled include consumer home repair, predatory lending, misdemeanor criminal cases (in select suburban courts), benefits advocacy, Social Security Disability appeals, health care issues, guardianship removal, and organizations seeking non-profit status.			*			
CASE WESTERN RESERVE UNIVERSITY - SCHOOL OF MEDICINE	All Counties	2109 Adelbert Rd., Cleveland, OH 44106 ~www.netwellness.org	More Information	No restrictions.	Offers a non-commercial health web site, with information created and evaluated by Case Western Reserve University, The Ohio State University and University of Cincinnati Medical Schools. It features easy to understand information on hundreds of health topics, current health news, and allows people to ask health-related questions of a medical professional. Over 325 academic medical and research professionals from the partner universities donate their time by writing articles on health topics, and by answering visitors' questions via the site's Ask an Expert feature.		*	*			
CASE WESTERN RESERVE UNIVERSITY - SCHOOL OF MEDICINE	No restriction	10900 Euclid Avenue, Cleveland, OH 44106 ~(216) 368-2000 ~casemed.case.edu	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*
CATHOLIC CHARITIES COMMUNITY SERVICES - MEDINA	Medina	740 E. Washington St. Ste. E-4, Medina City, OH 44256 ~(330) 723-9615 ~clevelandcatholiccharities.org	More Information	Medina County residents.	Provides counseling services to guide clients in problem solving to become participating members of the community. Offers services for families, children, married couples, parents and spousal abusers. Works towards prevention of family breakdown and domestic violence as well as relieving marital problems. Works with families on parent-child relationships, treatment of personality disorders as well as emotional and mental illness	*	*	*	*		
CATHOLIC CHARITIES HEALTH AND HUMAN SERVICES - EMERGENCY ASSISTANCE SERVICES	Cuyahoga	1736 Superior Ave. Bishop William M. Cosgrove Center, Cleveland, OH 44114 ~(216) 781-8262 ~www.clevelandcatholiccharities.org	More Information	Targets residents of 3 Cuyahoga Metropolitan Housing Authority high-rise estates: Bohn Tower, St. Clair Place, and Winton Manor (formerly Carter Manor). Also serves residents of Cleveland north of Orange Ave. who reside in zip codes 44114 or 44115. Service is provided to each client once each month. Program is limited to 175 individuals (not households).	Site which provides a food pantry and hot meals for those in need, and services for the homeless, including meals, a drop-in center for the general homeless population, showers, a pay phone, a mailing address, and referrals to relevant community resources.		*	*	*		
CATHOLIC CHARITIES SERVICES OF CUYAHOGA COUNTY	Cuyahoga	7800 Detroit Ave., Cleveland, OH 44102 ~(216) 939-3700 ~www.clevelandcatholiccharities.org	More Information	Cuyahoga County residents.	Offers a wide variety of services to children and families, the elderly, and the disabled in Cuyahoga County. Includes but is not limited to outpatient mental health services, chemical dependency services, employment services, services for seniors, services for youth, and Head Start.	*	*	*	*		
CATHOLIC CHARITIES SERVICES OF CUYAHOGA COUNTY - CHEMICAL DEPENDENCY	Cuyahoga	Midtown Professional Building 3135 Euclid Ave. Rm. 202, Cleveland, Ohio 44115 ~(216) 391-2030 ~www.clevelandcatholiccharities.org	More Information	Cuyahoga County residents.	Provides assessment for substance abusers, decides what services are most appropriate for them, and refers them to suitable programs.	*		*			
CATHOLIC CHARITIES SERVICES OF CUYAHOGA COUNTY - EMPLOYMENT AND TRAINING	Cuyahoga	Midtown Professional Building 3135 Euclid Ave. Rm. 101, Cleveland, OH 44115 ~(216) 426-9870 ~www.clevelandcatholiccharities.org	More Information	Adults, ages 18+	Main and administrative site of Employment and Training services under Catholic Charities. Provides job readiness training and placement assistance to adults needing this service.				*		
CATHOLIC CHARITIES SERVICES OF CUYAHOGA COUNTY - FATIMA FAMILY CENTER	Cuyahoga	6600 Lexington Ave., Cleveland, OH 44103 ~(216) 391-0505 ~www.clevelandcatholiccharities.org	More Information	Targeted to residents within the Hough Parish boundaries.	Human service organization, designed to promote maximum development of individuals and families. Founded as the social ministry arm of St. Agnes-Our Lady of Fatima Church. Provides nutritional, educational, social, and spiritual nourishment to largely African-American population. Serves as a location for a Head Start Program, and a site of GED instruction through the Cleveland Metropolitan School District.			*	*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
CATHOLIC CHARITIES SERVICES OF CUYAHOGA COUNTY - ST. MARTIN DE PORRES FAMILY CENTER	Cuyahoga	1264 E 123rd St., Cleveland, OH 44108 ~(216) 268-3909 ~www.clevelandcatholiccharities.org	More Information	Most services targeted to residents living in 44108.	Provides a wide variety of services to youth, families, and seniors, including emergency food, congregate meals, recreation programs, life skills and parenting instruction mandated through the courts, juvenile delinquency prevention, and adult day care. Member of Neighborhood Centers Association.			*	*		
CATHOLIC CHARITIES SERVICES OF CUYAHOGA COUNTY - ST. PHILIP NERI FAMILY CENTER	Cuyahoga	799 E 82nd St., Cleveland, OH 44103 ~(216) 391-4415 ~www.clevelandcatholiccharities.org	More Information	Targets residents in 44103, 44106 and 44108.	Provides food and other types of assistance primarily for those in need. Also the site of the Catholic Charities alternative school program for pregnant teens.				*		
CENTER FOR FAMILIES AND CHILDREN	Cuyahoga	4500 Euclid Ave., Cleveland, OH 44103 ~(216) 432-7200 ~www.c4fc.org	More Information	Cuyahoga County residents.	Provides a variety of services designed for the complex needs of families and individuals, with programs for children, teens and adults. Offers behavioral health, child day care, youth substance abuse prevention, parenting programs and a variety of community-based programs.			*	*		
CENTERS FOR DISEASE CONTROL AND PREVENTION	No restrictions	1600 Clifton Road Northeast, Atlanta, GA 30329 (800) 232-4636 www.cdc.gov	More Information	No restrictions.	Federal agency and national public health institute providing expertise, information, and tools that people and communities need to protect their health. Works with partners throughout the nation, including state health departments, to monitor health, detect and investigate health problems, conduct research to enhance prevention, develop and advocate public health policies, implement prevention strategies, promote healthy behaviors, and foster safe and healthful environments.			*		*	
CENTRAL NEIGHBORHOOD OPPORTUNITY CENTER AND WORKFORCE DEVELOPMENT	Cuyahoga	1835 Prospect Ave. Ste. 200, Cleveland, OH 44115 ~(216) 357-2621	More Information	Must be County residents, age 18 or older, and have family income up to 125% of poverty level.	Provides community services to low income County residents, including information/referral, social work/case management, counseling, and income tax preparation assistance. Also site of workforce development services for CEOGC.				*		
CHILDREN'S SERVICES OF SUMMIT COUNTY	Summit	264 South Arlington Street, Akron, OH 44306 ~(330) 379-9094 ~www.summitkids.org	More Information	Summit County residents.	Provides children services, parent education.			*	*		
CHURCH OF GOD AND TRUE HOLINESS	Cuyahoga	7710 Euclid Ave., Cleveland, OH 44103 ~(216) 391-2167 ~trueholiness temple.net	More Information	Serves residents of zip code 44103.	Provides worship services and food for those in need.				*		
CITY MISSION	Cuyahoga	5310 Carnegie Ave., Cleveland, OH 44103 ~(216) 431-3510 ~www.thecitymission.org	More Information	No restrictions for most services. Residential program at this site if for men only.	Provides programs emphasizing spiritual growth, education, rehabilitation employment readiness, leadership, and recreation. Services include housing, food, clothing, and medical care for homeless men, women, and children; no-cost clothing distribution, residential programs for men and women who have been in crisis and who want to develop skills to reintegrate into society, recreational and educational opportunities for youth and services to inmates.	*	*	*	*		
CLERK OF COURTS OF CUYAHOGA COUNTY - CIVIL DIVISION	Cuyahoga	1200 Ontario St. 1st Fl., Cleveland, OH 44113 ~(216) 443-7950 ~cpdocket.cp.cuyahogacounty.us	More Information	No restrictions, but only has information about properties in Cuyahoga County.	Maintains and provides certified and non-certified copies of documents in the court files dealing with foreclosure. Provides information to let individuals know if a particular property (house, business etc.) located in Cuyahoga County is in foreclosure.				*		
CLEVELAND, CITY OF - DEPARTMENT OF PUBLIC HEALTH	Cuyahoga	75 Erieview Plaza. 2nd Fl., Cleveland, OH 44114 ~(216) 664-2324 ~www.clevelandhealth.org	More Information	Residents of Cleveland.	Provides Cleveland residents with health information and education activities, primary care services through health clinics and at community locations, mental health and substance abuse programs, air pollution monitoring, lead hazard control, and oversight, inspection, and complaint investigation of health and food facilities that operate in the city of Cleveland.	*	*	*	*		
CLEVELAND, CITY OF - DEPARTMENT OF PUBLIC SAFETY	Cuyahoga	601 Lakeside Ave. Rm. 230, Cleveland, OH 44114 ~(216) 664-2200 ~www.city.cleveland.oh.us	More Information	Targets residents of the City of Cleveland.	Provides a wide range of services that protect the life and property of the Cleveland community. Operates the divisions of Police, Fire, and Emergency Medical Services as well as the House of Corrections and the Dog Kennels.				*		
CLEVELAND CLINIC - AVON LAKE FAMILY HEALTH CENTER	All Counties	450 Avon Belden Road, Avon Lake, Ohio 44012 ~(440) 930-6800 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - AVON POINTE FAMILY HEALTH CENTER	All Counties	36901 American Way, Avon, Ohio 44011 ~(440) 930-6250 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - BEACHWOOD FAMILY HEALTH AND SURGERY CENTER	All Counties	26900 Cedar Road, Beachwood, Ohio 44112 ~(216) 839-3000 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - BRUNSWICK FAMILY HEALTH CENTER	All Counties	3574 Center Road, Brunswick, Ohio 44212 ~(330) 225-8886 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - CHAGRIN FALLS FAMILY HEALTH CENTER	All Counties	551 East Washington Street, Chagrin Falls, Ohio 44022 ~(440) 893-9393 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - CHILDREN'S HOSPITAL	Cuyahoga	2032 Clinic Dr. Bldg. M, Cleveland, OH 44195 ~(216) 444-5437 ~www.clevelandclinic.org	More Information	Women and children.	Provides pediatric primary and preventive care and women's health services.	*	*		*		
CLEVELAND CLINIC - CHILDREN'S HOSPITAL FOR REHABILITATION - MAIN SITE	All Counties	2801 Martin Luther King Jr. Dr., Cleveland, OH 44104 ~(216) 448-6170 ~www.clevelandclinic.org	More Information	Children to 18 years of age, 21 years in some cases.	Provides pediatric, primary, preventive and rehabilitative care. Provides inpatient and outpatient services for children with chronic illnesses and disabilities.	*	*				
CLEVELAND CLINIC - ELYRIA FAMILY HEALTH AND SURGERY CENTER	All Counties	303 Chestnut Commons Drive, Elyria, Ohio 44035 ~(440) 366-9444 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - EUCLID HOSPITAL	All Counties	18901 Lakeshore Blvd., Euclid, OH 44119 ~(216) 531-9000 ~www.euclidhospital.org/	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
CLEVELAND CLINIC - FAIRVIEW HOSPITAL	All Counties	18101 Lorain Avenue, Cleveland, OH 44111 ~(216) 476-7000 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
CLEVELAND CLINIC - HILLCREST HOSPITAL	All Counties	6780 Mayfield Road, Mayfield Heights, OH 44124 ~(440) 312-4500 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
CLEVELAND CLINIC - INDEPENDENCE FAMILY HEALTH CENTER	All Counties	5001 Rockside Road, Crown Center II, Independence, Ohio 44131 ~(216) 986-4000 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - LAKEWOOD FAMILY HEALTH CENTER	All Counties	16215 Madison Avenue, Lakewood, Ohio 44107 ~(216) 521-4400 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - LAKEWOOD HOSPITAL	All Counties	14519 Detroit Road, Lakewood, Ohio 44107 ~(216) 521-4200 ~www.lakewoodhospital.org/	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
CLEVELAND CLINIC - LORAIN FAMILY HEALTH AND SURGERY CENTER	All Counties	5700 Cooper Foster Park Road, Lorain, Ohio 44053 ~(440) 204-7400 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - LERNER COLLEGE OF MEDICINE AT CASE WESTERN RESERVE UNIVERSITY	No restrictions	10900 Euclid Avenue, Cleveland, OH 44106 ~ (216) 368-2000 ~casemed.case.edu ~portals.clevelandclinic.org/cclcm	More Information	No restrictions	Accredited academic medical education and research institution.					*	*
CLEVELAND CLINIC - LUTHERAN HOSPITAL	All Counties	1730 West 25th Street, Cleveland, Ohio 44113 ~(216) 696-4300 ~www.lutheranhospital.org/	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
CLEVELAND CLINIC - MAIN CAMPUS HOSPITAL	No restrictions	9105 Cedar Ave. Bldg. E, Cleveland, OH 44195 ~(800) 223-2273 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
CLEVELAND CLINIC - MARYMOUNT HOSPITAL	All Counties	12300 McCracken Road, Garfield Heights, Ohio 44125 ~(216) 581-0500 ~www.marymount.org/	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
CLEVELAND CLINIC - MEDINA HOSPITAL	All Counties	1000 E. Washington Street, Medina, Ohio 44256 ~(330) 725-1000 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
CLEVELAND CLINIC - RICHARD E. JACOBS HEALTH CENTER	All Counties	33100 Cleveland Clinic Blvd., Avon, Ohio 44011 ~(440) 695-4000 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - SOLON FAMILY HEALTH CENTER	All Counties	29800 Bainbridge Road, Solon, Ohio 44139 ~(440) 519-6800 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - SOUTH POINTE HOSPITAL	All Counties	20000 Harvard Rd, Warrensville Heights, Ohio 44122 ~(216) 491-6000 ~www.southpointehospital.org/	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
CLEVELAND CLINIC - STEPHANIE TUBBS JONES HEALTH CENTER	All Counties	13944 Euclid Ave., East Cleveland, Ohio 44112 ~(216) 767-4242 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - STRONGSVILLE FAMILY HEALTH AND SURGERY CENTER	All Counties	16761 South Park Center, Strongsville, Ohio 44136 ~(440) 878-2500 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - TWINSBURG FAMILY HEALTH AND SURGERY CENTER	All Counties	8701 Darrow Road, Twinsburg, Ohio 44087 ~(330) 888-4000 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - WILLOUGHBY HILLS FAMILY HEALTH CENTER	All Counties	2550 & 2570 SOM Center Road, Willoughby Hills, Ohio 44094 ~(440) 943-2500 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND CLINIC - WOOSTER FAMILY HEALTH CENTER	All Counties	1740 Cleveland Road, Wooster, Ohio 44691 ~(330) 287-4500 ~www.clevelandclinic.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
CLEVELAND FOODBANK	Cuyahoga	15500 S Waterloo Rd., Cleveland, OH 44110 ~(216) 738-2067 ~www.clevelandfoodbank.org	More Information	No restrictions.	Provides benefits screening to find out if client is eligible for government assistance.				*		
CLEVELAND HEIGHTS, CITY OF - DEPARTMENT OF COMMUNITY SERVICES	Cuyahoga	40 Severance Cir., Cleveland Hts., OH 44118 ~(216) 291-2323 ~www.clevelandheights.com/citydept_community.asp	More Information	Targets residents of Cleveland Heights.	Provides recreational programming and community/social services for residents of all ages. Includes community relations, and recreational facilities.			*	*		
CLEVELAND HEIGHTS OFFICE ON AGING	Cuyahoga	1 Monticello Blvd., Cleveland Heights, OH 44118 ~(216) 691-7377 ~www.clevelandheights.com	More Information	Seniors 60+.	Provides transportation, a free newsletter, meals on wheels, screenings, education, volunteer and employment opportunities and a senior center with wellness activities, exercise classes and social opportunities.		*	*	*		
CLEVELAND POLICE ATHLETIC LEAGUE	Cuyahoga	1300 Ontario St., Cleveland, OH 44113 ~(216) 687-9135 ~www.clevelandpal.org	More Information	Targets youth residents of Cuyahoga County.	Provides a wide range of services that protect the life and property of the Cleveland community. Operates the divisions of Police, Fire, and Emergency Medical Services as well as the House of Corrections and the Dog Kennels. PALSITES Program in 44103, 44104, 44106, 44108 and 44115.			*	*		
CLEVELAND PUBLIC LIBRARY - MAIN LIBRARY	Cuyahoga	325 Superior Ave, NE, Cleveland, OH 44114 ~(216) 623-2800 ~www.cpl.org	More Information	No restrictions.	Provides access to educational materials and community programs for all ages with several branches.			*	*		
CLEVELAND STATE UNIVERSITY MAXINE GOODMAN LEVIN COLLEGE OF URBAN AFFAIRS	Cuyahoga	1717 Euclid Ave. UR335 Cleveland, OH 44115 (216) 687-2233 www.csuohio.edu	More Information	Students and alumni of Cleveland State University.	Provides an online Internet service that lists job openings in non-profit organizations located in Northeast Ohio and that allows non-profit job seekers to post their resumes.				*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
CLEVELAND TREATMENT CENTER	Cuyahoga	1127 Carnegie Ave., Cleveland, OH 44115 ~(216) 861-4246 ~www.clevelandtreatmentcenter.org	More Information	Cuyahoga County residents.	A methadone maintenance/opioid agonist medication outpatient drug treatment facility for opiate and other drugs of addiction. Treatment includes individual or group counseling, medical evaluations, and a program for pregnant or postpartum addicted women which offers case management services and links to community resources. Provides alcohol and drug assessments as well as referrals to other appropriate programs. The center also offers educational and prevention programs targeted against drugs and urban violence.	*	*	*	*		
COMMUNITY ACTION AGAINST ADDICTION	Cuyahoga	5209 Euclid Ave., Cleveland, OH 44103 ~(216) 881-0765	More Information	Targets Cuyahoga County residents.	Provides services for the chemically dependent. Services include outpatient treatment, outpatient detoxification services, methadone maintenance, methadone detoxification, aftercare, prevention education, and HIV testing and counseling.	*	*	*	*		
COMMUNITY ACTION WAYNE/MEDINA COUNTY	Medina	820 B West Lafayette Road, Medina, OH 44256 ~(330) 723-2229 ~www.cawm.org	More Information	Medina County residents.	Serves as the Community Action Agency for Wayne and Medina Counties. Purpose is to alleviate the effects and causes of poverty through a variety of programs that serve low-income families, children, and older adults. Generally, programs address unemployment, inadequate housing and utilities, poor nutrition, and the lack of educational opportunities in the community.				*		
COMMUNITY SERVICES CENTER	Medina	655 N Broadway, Medina City, OH 44256 ~(330) 725-4690	More Information	Medina County residents.	Provides primary assistance, including food, clothing, bedding and basic household items. Additionally offers financial assistance for rent/mortgage, utility disconnects, and prescriptions. Operates food pantry.				*		
COMPLETE HOME HEALTH SERVICES	Cuyahoga	25000 Euclid Ave. Ste. 206, Euclid, OH 44117 ~(216) 261-0211	More Information	Cuyahoga County residents.	Provides transportation and home health services, including health aids, personal care, physical therapy, occupational therapy and speech therapy.	*	*				
CONCORD BAPTIST CHURCH	Cuyahoga	1175 E 125th St. East Cleveland, OH 44112 ~(216) 249-1455	More Information	Residents of Cuyahoga County who are low-income.	Offers weekly worship services and a food pantry.				*		
CONTINUE LIFE	Cuyahoga	17917 Euclid Ave., Cleveland, OH 44112 ~(216) 383-1984 ~www.continuelife.org	More Information	Homeless pregnant and homeless parenting women.	Addresses the physical, mental, and spiritual needs of homeless and pregnant women and families through programs and services in a home-like setting with the goal of returning the family to the community. Services include case management, structured program of instruction on parenting and/or birth, life skills, domestic violence, and substance abuse education. Transportation is provided for necessary appointments.	*	*	*	*		
CONTRACT TRANSPORT SERVICES	Cuyahoga	3223 Perkins Ave., Cleveland, OH 44114 ~(216) 357-3377 ~www.ctsoh.net	More Information	Serves Cuyahoga County.	Provides non-emergency transportation services.				*		
COUNCIL FOR ECONOMIC OPPORTUNITIES IN GREATER CLEVELAND - HEAD START CENTER	Cuyahoga	14209 Euclid Ave., East Cleveland, OH 44112 ~(216) 541-7878 ~www.ceogc.org	More Information	Pregnant women, mothers, and children ages 6 weeks through 18 months at intake. Must live in East Cleveland, Glenville, Hough, Clark-Fulton, or Detroit-Shoreway SPAs, unless child is registered with the Dept. of Mental Retardation/Developmental Disability (MR/DD), in which case can live anywhere in Cuyahoga County.	Site of CEOG Early Head Start Program and customer service job training. Family income in most cases up to 100% of federal poverty level; children in foster care in the County and all children of Ohio Works First parents are eligible, and 10% of slots are reserved for special needs children, and 10% for those over income (up to 185% of poverty).	*	*		*		
CROHN'S AND COLITIS FOUNDATION OF AMERICA - NORTHEAST OHIO CHAPTER	No restrictions	4700 Rockside Rd. Ste. 425, Independence, OH 44131 ~(216) 524-7700 ~www.cdfa.org/chapters/neoio	More Information	Persons with Crohn's or ulcerative colitis (IBD - inflammatory bowel disease), their families, friends, and medical and healthcare professionals.	Provides education and information. Offers educational seminars, printed materials, membership, information Resource Center and support groups about inflammatory bowel disease (IBD).		*	*			
CUSTODY MEDIATION SERVICES	Cuyahoga	9300 Quincy Ave. 2nd Fl., Cleveland, OH 44106 ~(216) 443-3149 ~www.cuyahogacounty.us/ja	More Information	Anyone seeking custody/visitation of a minor. Mainly serves parents who were never married, grandparents, and legal custodians. Child must have been living in Cuyahoga County for at least 6 months, but will make exceptions in cases where the child is at an age under 6 months.	Provides technical assistance, mediation, and information to those who want to obtain custody, visitation or shared parenting of a minor when not part of divorce or legal separation case. Handles cases such as when parents were never married, third parties such as grandparents and legal custodians seeking custody or visitation, and parents that are married and no longer together but not legally separated.				*		
CUSTODY MEDIATION SERVICES PRO SE CENTER AT CUYAHOGA SUPPORT ENFORCEMENT AGENCY	Cuyahoga	1640 Superior Ave., Cleveland, OH 44114 ~(216) 443-5282 ~www.cuyahogacounty.us/ja	More Information	Anyone seeking custody/visitation of a minor. Mainly serves parents who were never married, grandparents, and legal custodians. Child must have been living in Cuyahoga County for at least 6 months, but will make exceptions in cases where the child is at an age under 6 months.	Provides technical assistance, mediation, and information to those who want to obtain custody, visitation or shared parenting of a minor when not part of divorce or legal separation case. Handles cases such as when parents were never married, third parties such as grandparents and legal custodians seeking custody or visitation, and parents that are married and no longer together but not legally separated.				*		
CUYAHOGA COMMUNITY COLLEGE	Cuyahoga	700 Carnegie Ave., Cleveland, OH 44115 ~(216) 987-4000 ~www.tri-c.edu	More Information	No restrictions.	Provides education, recreation, preventive care, dental care and job assistance.	*	*	*	*		
CUYAHOGA COUNTY BOARD OF HEALTH	Cuyahoga	5550 Venture Drive, Parma, OH 44130 ~(216) 201-2001 ~www.ccbh.net	More Information	Cuyahoga County residents.	Conducts a wide range of health-related education, regulation, and support services within its jurisdiction. Includes: Environmental Health Division, Prevention and Wellness Division, and Epidemiology/Surveillance Division. Acts as liaison with Early Start and Bureau for Children with Medical Handicaps.		*	*	*		
CUYAHOGA COUNTY PUBLIC LIBRARY	Cuyahoga	2111 Snow Rd., Parma, OH 44134 ~(216) 398-1800 ~www.cuyahogalibrary.org/	More Information	No restrictions.	Provides access to educational materials and community programs for all ages with several branches.				*		
CUYAHOGA TAPESTRY AT UNIVERSITY SETTLEMENT - CENTRAL CLUSTER	Cuyahoga	4800 Broadway Ave., Cleveland, OH 44127 ~(216) 456-0907 ~www.cuyahogatapestry.org	More Information	Children, ages 5-18 years, and their families living in 44127, 44105, 44128.	Provides coordination of care through multiple neighborhood based service providers to meet the specific needs of young persons with severe emotional disturbances.	*	*				

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
CYSTIC FIBROSIS FOUNDATION NORTHERN OHIO CHAPTER	Cuyahoga and Summit	5410 Transportation Blvd., Cleveland, OH 44125 ~(216) 292-4437 ~www.cff.org	More Information	Cuyahoga and Summit County residents.	Provides information about cystic fibrosis and makes referrals for medical treatment of cystic fibrosis.			*			
DEPARTMENT OF CHILDREN AND FAMILY SERVICES OF CUYAHOGA COUNTY	Cuyahoga	3955 Euclid Ave., Jane Edna Hunter Bldg., Cleveland, OH 44115 ~(216) 431-4500 ~cfs.cuyahogacounty.us/	More Information	Targets at risk children of Cuyahoga County.	Provides whatever services are required to protect and care for any child whose family cannot or does not provide them that care and protection.	*	*		*		
DEPARTMENT ON AGING OF GEauga COUNTY	Geauga	12555 Ravenwood Dr., Chardon, OH 44024 ~(440) 279-2130 ~www.co.geauga.oh.us/departments/aging.htm	More Information	Geauga County residents.	Advocates, plans, coordinates, and delivers needed services to enhance the quality of life for Geauga County's seniors. Services include adult day care, emergency respite care, home maintenance, chore services, wellness programming, companionship, escorts, home-delivered meals, outreach, and other supportive services.		*		*		
DEVELOPMENTAL DISABILITIES BOARD OF CUYAHOGA COUNTY - EAST CLEVELAND ADULT ACTIVITIES CENTER	Cuyahoga	13231 Euclid Ave., East Cleveland, OH 44112 ~(216) 681-4433 ~www.cuyahogabdd.org	More Information	Cuyahoga County with a developmental disability and their families.	Provides, case management, transportation, educational programs, residential assistance, physical, occupational and speech therapy, employment training/placement and recreational programming.			*	*		
DEVELOPMENTAL DISABILITIES BOARD OF MEDINA COUNTY	Medina	4691 Windfall Rd., Granger Twp., OH 44256 ~(330) 725-7751 ~www.mcdbd.org	More Information	Medina County residents with developmental disabilities and their families.	Provides, case management, transportation, educational programs, residential assistance, physical, occupational and speech therapy, employment training/placement and recreational programming.			*	*		
DIABETES PARTNERSHIP OF CLEVELAND	Cuyahoga, Lake, Lorain, Geauga, Portage, Summit	3601 S Green Rd. #100, Beachwood, OH 44122 ~(216) 591-0800 ~www.diabetespartnership.org/	More Information	No restriction, diabetes patients.	Provides education, research and advocacy for the prevention and management of diabetes in Greater Cleveland. Offers services and education programs for those with diabetes, as well as information and screening services for the general public.		*	*			
DUNHAM AVENUE CHRISTIAN CHURCH - DISCIPLES OF CHRIST	Cuyahoga	1629 E 66th St., Cleveland, OH 44103 ~(216) 432-1234	More Information	No restrictions.	Offers worship services and provides a hot meal, and an emergency food program for all those in need.				*		
EAST CLEVELAND, CITY OF	Cuyahoga	14340 Euclid Ave., East Cleveland, OH 44112 ~(216) 681-5020 ~www.eastcleveland.org	More Information	Targets residents of East Cleveland.	Provides various public services for the residents of the City of East Cleveland.				*		
EAST CLEVELAND WIC SITE	Cuyahoga	16200 Euclid Ave. Second Fl., East Cleveland, OH 44112 ~(216) 451-3800	More Information	Women and children residents of Cuyahoga County.	Provides supplemental food vouchers; nutrition education; breastfeeding education, support and counseling; and referral services to eligible women and children.		*	*	*		
EAST END NEIGHBORHOOD HOUSE	Cuyahoga	2749 Woodhill Rd., Cleveland, OH 44104 ~(216) 791-9378 ~www.eenh.org	More Information	Targets residents of Buckeye/ Woodland Hills/ Shaker Square/ Kinsman area.	Provides a variety of services to people of all ages with the goal of enhancing the quality of life for families and individuals, and to develop the full potential of those served. Member of Neighborhood Centers Association and Council of Neighborhood Leaders.				*		
EAST MT. ZION BAPTIST CHURCH	Cuyahoga	9990 Euclid Ave., Cleveland, OH 44106 ~(216) 231-0284	More Information	Anyone who is low income (TEFAP income guidelines) and has need for services provided. There is no geographic restriction.	Offers worship services and serves as a site for a food pantry (The Lifeline Program).				*		
EMERGENCY COMMUNICATION SYSTEM OF CUYAHOGA COUNTY	Cuyahoga	1255 Euclid Ave. Ste. 102, Cleveland, OH 44115 ~911 ~ecomstraffic.cuyahogacounty.us	More Information	No restrictions.	Operates as an emergency communication system for Cuyahoga County. Coordinates cellular and wireless 911 calls, establishes and coordinates ambulance to hospital communications and coordinates communications with police and fire departments and health care agencies. Is the contact point for all Emergency Alert System (EAS) broadcasts for Cuyahoga County and all Amber Alert broadcasts for a nine county area in Northeast Ohio.				*		
EMERGENCY FOOD LINE	Summit	703 South Main Street, Suite 211, Akron, Ohio 44311 ~(888) 212-5041 ~www.infolineinc.org	More Information	Summit County residents.	Provides referrals to area food pantries for individuals and families in need of a 3-day emergency supply of food or baby formula and diapers. Callers may receive emergency food assistance up to 6 times per year (no more than 1 referral per month); assistance with diapers is available one time per 12-month period.				*		
EMPLOYMENT AND FAMILY SERVICES OF CUYAHOGA COUNTY	Cuyahoga	1641 Payne Ave. Rm. 520, Cleveland, OH 44114 ~(216) 987-7000 ~employment.cuyahogacounty.us	More Information	Disadvantaged residents of Cuyahoga County.	Operates several Neighborhood Family Service Centers which provide cash benefits (such as Ohio Works First welfare benefits), food assistance (food stamps), medical coverage, employment/training assistance, child care vouchers, and supportive services to Cuyahoga County residents who meet eligibility requirements. Clients are assigned to a Service Center according to their zip code. Spanish-speaking staff are available.	*			*		
EMPLOYMENT AND FAMILY SERVICES OF CUYAHOGA COUNTY - FAIRFAX NEIGHBORHOOD FAMILY SERVICE CENTER AT QUINCY PLACE	Cuyahoga	8111 Quincy Ave., Cleveland, OH 44104 ~(216) 987-7000 ~www.odjfsbenefits.ohio.gov	More Information	Cuyahoga County residents.	Neighborhood service center which provides cash benefits including Food Assistance (food stamps), medical coverage through Medicaid including help with Medicare costs, child care vouchers, employment/training assistance and supportive services to Cuyahoga County residents who reside in the area and meet eligibility requirements. Goal is to provide assistance in a convenient location and in an efficient manner to help participants become self-sufficient and increase personal responsibility.	*			*		
EMPLOYMENT AND FAMILY SERVICES OF CUYAHOGA COUNTY - OLD BROOKLYN NEIGHBORHOOD FAMILY SERVICE CENTER	Cuyahoga	4261 Fulton Pkwy., Cleveland, OH 44144 ~(216) 987-7000 ~www.odjfsbenefits.ohio.gov	More Information	Cuyahoga County residents.	Neighborhood service center which provides cash benefits including Food Assistance (food stamps), medical coverage through Medicaid including help with Medicare costs, child care vouchers, employment/training assistance and supportive services to Cuyahoga County residents who reside in the area and meet eligibility requirements. Goal is to provide assistance in a convenient location and in an efficient manner to help participants become self-sufficient and increase personal responsibility.	*			*		
EMPLOYMENT AND FAMILY SERVICES OF CUYAHOGA COUNTY - SOUTHGATE NEIGHBORHOOD FAMILY SERVICE CENTER	Cuyahoga	5398 1/2 Northfield Rd., Maple Hts., OH 44137 ~(216) 987-7000 ~www.odjfsbenefits.ohio.gov	More Information	Cuyahoga County residents.	Neighborhood service center which provides cash benefits including Food Assistance (food stamps), medical coverage through Medicaid including help with Medicare costs, child care vouchers, employment/training assistance and supportive services to Cuyahoga County residents who reside in the area and meet eligibility requirements. Goal is to provide assistance in a convenient location and in an efficient manner to help participants become self-sufficient and increase personal responsibility.	*			*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
EMPLOYMENT AND FAMILY SERVICES OF CUYAHOGA COUNTY - VIRGIL BROWN NEIGHBORHOOD FAMILY SERVICE CENTER	Cuyahoga	1641 Payne Ave. Rm. 380, Cleveland, OH 44114 ~(216) 987-7000 ~www.odjfsbenefits.ohio.gov	More Information	Cuyahoga County residents.	Neighborhood service center which provides cash benefits including Food Assistance (food stamps), medical coverage through Medicaid including help with Medicare costs, child care vouchers, employment/training assistance and supportive services to Cuyahoga County residents who reside in the area and meet eligibility requirements. Goal is to provide assistance in a convenient location and in an efficient manner to help participants become self-sufficient and increase personal responsibility.	*			*		
EMPLOYMENT AND FAMILY SERVICES OF CUYAHOGA COUNTY - WESTSHORE NEIGHBORHOOD FAMILY SERVICE CENTER	Cuyahoga	9830 Lorain Ave., Cleveland, OH 44102 ~(216) 987-7000 ~www.odjfsbenefits.ohio.gov	More Information	Cuyahoga County residents.	Neighborhood service center which provides cash benefits including Food Assistance (food stamps), medical coverage through Medicaid including help with Medicare costs, child care vouchers, employment/training assistance and supportive services to Cuyahoga County residents who reside in the area and meet eligibility requirements. Goal is to provide assistance in a convenient location and in an efficient manner to help participants become self-sufficient and increase personal responsibility.	*			*		
EMPLOYMENT CONNECTION - MAIN SITE	Cuyahoga	1020 Bolivar Rd., Cleveland, OH 44115 ~(216) 664-4673 ~www.employmentconnection.us	More Information	Adults 18 years and older who are residents of Cuyahoga County. There may be income eligibility for some services and programs.	Provides job search and job readiness assistance and access to education and training to those who are unemployed or underemployed.				*		
EMPLOYMENT CONNECTION AT MT. PLEASANT NEIGHBORHOOD FAMILY SERVICE CENTER	Cuyahoga	13815 Kinsman Ave., Cleveland, OH 44120 ~(216) 561-5649 ~www.employmentconnection.us	More Information	Adults 18+ who are residents of Cuyahoga County.	Provides access to vocational training, job placement and supportive social services for unemployed or under-employed individuals.				*		
EMPOWERING AND STRENGTHENING OHIO'S PEOPLE (ESOP)	No restrictions	3631 Perkins Ave. 4th Floor, Cleveland, OH 44114 ~(216) 361-0718 ~www.esop-cleveland.org	More Information	Homeowners 18+ who are behind on their mortgage payments or are in foreclosure on their primary residence.	Works to organize leadership around issues that impact neighborhood life such as predatory lending and day labor conditions. Particularly works to include those who have traditionally been left out of their community's decision-making process. Interested persons are encouraged to join the committee structure and participate in the process.				*		
EMPOWERING AND STRENGTHENING OHIO'S PEOPLE (ESOP) - ESOP AT MEDINA COUNTY AUDITOR	No restrictions	144 N. Broadway 3rd Floor, County Administration Building, Medina, OH 44256 ~(330) 725-9137	More Information	Homeowners 18+ who are behind on their mortgage payments or are in foreclosure on their primary residence.	Satellite office that provides mortgage foreclosure counseling to help homeowners address their current or impending mortgage foreclosure situation. Advocates on behalf of the client with mortgage holders and other creditors. Provides information on budgeting and credit issues, available community resources, and options one might have when facing foreclosure.				*		
EMPOWERMENT CENTER OF GREATER CLEVELAND	Cuyahoga	3030 Euclid Ave. Ste. 100, Cleveland, OH 44115 ~(216) 432-4770 ~www.ecgccleveland.org	More Information	Residents of Cuyahoga County. Restrictions apply for some programs.	Acts as an advocacy organization for low-income people. Educates and informs the public about the laws and regulations that impact low-income people. Works to stimulate personal development and to effect positive change for the benefit of low-income people. Provides outreach programs to connect eligible low-income people with the food stamp program and Ameritech telephone discounts.				*		
ENHANCEMENT MINISTRIES	Cuyahoga	5246 Broadway Ave., Cleveland, OH 44127 ~(216) 271-3650 ~www.enhancementministriesinc.org	More Information	Serves the city of Cleveland. Generally, income should be 200% of the Federal Poverty Limit or less. Households that do not meet the income guidelines but have extenuating circumstances (such as loss of income or some other financial hardship) may be served on a case by case basis.	Provides weekly worship services, a food pantry, benefits screening, and a hot meal program.				*		
FAIRHILL PARTNERS	Cuyahoga	12200 Fairhill Rd., Cleveland, OH 44120 ~(216) 421-1350 ~www.fairhillpartners.org	More Information	Targets older adults, their families and caregivers.	Fosters successful aging by providing an array of programs for older adults, caregivers and families. Connects consumers to individual, organizational and community resources. Several organizations with a similar mission also operate offices located on the campus.	*	*		*		
FAITH BAPTIST COMMUNITY CENTER	Cuyahoga	2355 E 55th St., Cleveland, OH 44104 ~(216) 881-8816 ~www.freehope.org	More Information	Adults 18 and older who are residents of the City of Cleveland.	Provides a wellness and medical clinic, a pregnancy clinic, a dental clinic, clothing, parenting skills classes for women with infants, basic computer classes, recreational opportunities and hot meals.	*	*	*	*		
FAITH IN ACTION	Medina	780 Smith Rd. Ste. A, Medina, OH 44256 ~(330) 952-0342 ~www.fiamedina.org	More Information	Medina County Seniors 60+ and Adults 18+ with a disability that prevents them from driving.	Offers senior ride and medical transportation programs for seniors and the disabled within Medina County, and paratransit service from Medina to medical appointments in the outlying counties. Also provides in-home assistance with paperwork and light housekeeping.				*		
FEEDING MEDINA COUNTY	Medina	120 West Washington Street, Suite 3D, Medina, OH 44256 ~(330) 421-4816		Medina County families in need.	Strives to make more food available to all of the County's Food Pantries.				*		
FIRST CHOICE HOME HEALTH CARE SERVICES	Cuyahoga, Lorain, Geauga, Lake, Medina	1457 W 117th St., Cleveland, OH 44107 ~(800) 568-6216 ~www.firstchoiceohio.com	More Information	Individuals, ages 18+.	Non-emergency medical transportation				*		
FRAGILE X ALLIANCE OF OHIO	Cuyahoga and Summit	6790 Ridgecliff Dr., Solon, OH 44139 ~(440) 519-1517 ~www.fragilexohio.org	More Information	No restrictions.	Provides information, education and support to families and interested persons. Supports a Fragile X Syndrome clinic at Akron Children's Hospital, and Works to find effective treatments for Fragile X Syndrome.			*			
FREE MEDICAL CLINIC OF GREATER CLEVELAND	Cuyahoga	12201 Euclid Ave., Cleveland, OH 44106 ~(216) 721-4010 ~www.thefreeclinic.org	More Information	Adults, ages 18 and older.	Provides medical and mental health care, and related services, for individuals who lack appropriate alternatives. Advocates for policy changes that make health care available for all.	*	*				
FREEDOM COVENANT CENTER	Cuyahoga	9700 Kinsman Rd., Cleveland, OH 44104 ~(216) 341-2010	More Information	Must meet TEFAP (Emergency Food Assistance Program) income guidelines. May receive food once a month.	Offers clothing, a food pantry, and worship services.				*		
FREEDOM EMPOWERMENT YOUTHBUILD	Cuyahoga	765 E 154th St., Cleveland, OH 44110 ~(216) 451-6414 ~www.feyb.org	More Information	Ages, ages 18-24, who are residents of Cuyahoga County.	Provides a job-training program where youth get supervision and training in construction skills while participating in community service by building needed housing. Training includes opportunities for leadership development, literacy skill building (tutoring for GED testing if needed), counseling, peer support, and life planning. A small stipend and job placement after completing the program also may be offered.				*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
FULL GOSPEL EVANGELISTIC CENTER	Cuyahoga	2856 Martin Luther King Jr. Dr., Cleveland, OH 44104 ~(216) 791-6800 ext. 115 ~myfullgospel.org	More Information	Serves residents of Cleveland. Must have an income that follows the guidelines of The Emergency Food Assistance Program (TEFAP). TEFAP guidelines are based on 150% (1.5 times) of the Federal Poverty guidelines that were in effect on the previous Oct. 1st. Client can receive assistance once every 30 days.	Offers worship services and a food pantry.				*		
GARFIELD PARK NATURE CENTER	Cuyahoga	11350 Broadway Ave. Garfield Park Reservation, Garfield Hts., OH 44125 ~(216) 341-1707	More Information	No restrictions.	Provides a mobile, interactive classroom off-site classes for preschool children.			*			
GIRL SCOUTS OF NORTH EAST OHIO	Cuyahoga and Summit	Macedonia, Ohio 44056-2156 ~(330) 864-9933 ~www.gsneo.org	More Information	Female youth, Grades K-12.	Provides programs that build girls of courage, confidence, and character, who make the world a better place.			*			
GLENVILLE NEIGHBORHOOD OPPORTUNITY CENTER	Cuyahoga	540 E 105th St. Shore Bank Bldg., Cleveland, OH 44108 ~(216) 268-1600 ~www.ceogc.org	More Information	Low income Cuyahoga County Residents.	Provides services to low-income residents including anger management, counseling, parenting classes, an infant mortality reduction program, mental health workshops, and information and referral (including referral for food and clothing).		*		*		
GLOBAL CLEVELAND	Cuyahoga	300 Public Square Ste. 150, Huntington National Bank Bldg., Cleveland, OH 44114 ~(216) 472-3282 ~www.globalclevelandinitiative.com	More Information	Serves immigrant who are new to, or who are interested in relocating to the Greater Cleveland area.	Connects immigrants to various resources in the Greater Cleveland area. Provides housing search assistance as well as help with searching for employment. The Welcome Hub has the ability to match the newcomer with a volunteer of the same ethnicity or nationality who can guide the immigrant to various cultural and community resources as well as professional networking opportunities. Also provides pre-job guidance such as interviewing skills, resume help, etc.				*		
GOD'S HOUSE OF PRAYER	Cuyahoga	2654 Woodhill Rd., Cleveland, OH 44104 ~(216) 229-5606	More Information	Must reside in zip code 44104 with income at or below 100% federal poverty guidelines.	Provides worship services and a monthly food pantry.				*		
GOODRICH-GANNETT NEIGHBORHOOD CENTER	Cuyahoga	1400 E 55th St., Cleveland, OH 44103 ~(216) 432-1717 ~www.ggnc.org	More Information	Residents of the Goodrich/Kirtland Park and St. Clair-Superior neighborhoods.	Offers a community center servicing seniors, youth, and families with social, educational, recreational and human services.	*		*	*		
GOODWILL INDUSTRIES - CLEVELAND OFFICE AND 55TH ST. RETAIL STORE	Cuyahoga	2295 E 55th St., Cleveland, OH 44103 ~(216) 431-8300 ~www.goodwillgoodskills.org	More Information	Adult residents of Cuyahoga County.	Provides a wide range of employment and social services to people with physical and/or mental disabilities, people who are socially and/or economically disadvantaged, and people who are ex-offenders. Operates stores throughout Cuyahoga County which generate revenue to fund many of the programs provided.		*		*		
GOODWILL INDUSTRIES OF AKRON - MEDINA	Medina	3500 Medina Rd., Medina City, OH 44256 ~(330) 722-0503 ~www.goodwillakron.org	More Information	Medina County residents who have disabilities or other barriers to employment.	Provides assessment, employment readiness, skill training, placement and support services for individuals facing barriers to employment because of physical, mental or socially induced disabilities. Offers Vocational Training programs. Offers Goodwill store vouchers for clothing, linens, furniture and kitchenware to qualified individuals.		*		*		
GREATER CLEVELAND HABITAT FOR HUMANITY	Cuyahoga	2110 W 110th St., Cleveland, OH 44102 ~(216) 429-1299 ~www.clevelandhabitat.org	More Information	No restrictions.	Seeks to eliminate substandard housing and revitalize neighborhoods by working to develop housing through private funding and volunteer labor for and with people in need.				*		
GREATER CLEVELAND REGIONAL TRANSIT AUTHORITY - MAIN SITE	Cuyahoga	1240 W 6th St., Cleveland, OH 44113 ~(216) 621-9500 ~www.riderta.com	More Information	Cuyahoga County residents.	Operates a public transportation system with bus and rapid transit service. Provides service on nearly 100 routes with local and express service. Special Downtown Loop, Neighborhood Community Circulator and Paratransit service available. Primarily services Cuyahoga County, but offers some connections to other counties. Mobility Specialists are also available off-site at the Cuyahoga County Employment and Family Services Neighborhood Family Service Centers.				*		
GUIDESTONE - CLEVELAND CAMPUS	Cuyahoga	3500 Carnegie Ave., Cleveland, OH 44115 ~(440) 260-8300 ~www.bchfs.org	More Information	Some restrictions apply but targets Northeast Ohio.	Provides job programs and mental health services.		*		*		
GUIDESTONE - EUCLID OUTPATIENT COUNSELING CENTER	Cuyahoga	333 Babbitt Rd. Ste. 242, Euclid, OH 44123 ~(440) 260-8300 ~www.bchfs.org	More Information	No restrictions.	Provides individual, marital, and group counseling. Helps clients to deal with acute crises related to marital problems, grief, abuse, phobia, and depression. Also provides counseling for major psychiatric disorders such as: Schizophrenia, Bi Polar Disorder, etc. Psychiatric case management may be included for those who require support in managing their symptoms or in accessing community services.	*	*				
HABITAT FOR HUMANITY MEDINA COUNTY	Medina	PO Box 1291, Medina, OH 44258 ~(330) 722-4494 ~www.medinahabitat.org	More Information	No restrictions.	Builds houses with volunteers and participating low-income families and then houses are sold to the families with a no interest mortgage and for no profit. Accepted families also receive home ownership training. Accepts donations of new or gently used building supplies, tools and equipment to either sell at the ReStore or use to finish projects. Accepts volunteers to help in building projects.				*		
HARD HATTED WOMEN	Cuyahoga	4415 Euclid Ave. Ste. 201, Cleveland, OH 44103 ~(216) 861-6500 ~www.hardhattedwomen.org	More Information	Women who wish to work in non-traditional fields, such as industrial work, plumbing, carpentry, construction, manufacturing, police, firefighting, etc.	Provides listings of job openings for women seeking employment in non-traditional fields. Offers information sessions on the physical and educational requirements for particular jobs. Does not provide job placement. Also, provides services to female youth.				*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
HARVARD MEDICAL SCHOOL	No restrictions	25 Shattuck Street, Boston, MA 02115 ~ (617) 432-1000 ~hms.harvard.edu/	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*
HEALTH DEPARTMENT OF MEDINA COUNTY	Medina	4800 Ledgewood Dr., Medina Twp., OH 44256 ~(330) 723-9688 ~ www.medinahhealth.org	More Information	Medina County residents.	Provides non-emergency primary and preventive care to residents of all ages including women's health care. Offers the Women, Infants and Children's nutrition program (WIC), dental clinics, health education, car seat safety checks.	*	*	*			
HEALTH DEPARTMENT OF PORTAGE COUNTY	Portage	449 S. Meridian St., 3rd Floor, Portage County Admin. Bldg., Ravenna, Ohio 44266 ~(330) 296-9919 ~www.co.portage.oh.us	More Information	Portage County residents.	Provides non-emergency primary and preventive care to residents of all ages including women's health care. Offers the Women, Infants and Children's nutrition program (WIC), dental clinics, health education, car seat safety checks.	*	*	*	*		
HEALTH DISTRICT OF GEAUGA COUNTY	Geauga	470 Center St., Bldg. #8, Chardon, OH 44024 ~(440) 279-1950 ~www.geaugacountyhealth.org	More Information	Geauga County residents.	Provides non-emergency primary and preventive care to residents of all ages including women's health care. Offers the Women, Infants and Children's nutrition program (WIC), dental clinics, health education, car seat safety checks.	*	*	*	*		
HEALTH DISTRICT OF LAKE COUNTY	Lake	33 Mill Street, Painesville, OH 44077 ~(440) 350-2543 ~www.lcghd.org	More Information	Lake County residents.	Provides non-emergency primary and preventive care to residents of all ages including women's health care. Offers the Women, Infants and Children's nutrition program (WIC), dental clinics, health education, car seat safety checks.	*	*	*	*		
HEALTH DISTRICT OF LORAIN COUNTY	Lorain	9880 South Murray Ridge Road, Elyria, Ohio 44035 ~(440) 322-6367 ~www.loraincountyhealth.com	More Information	Lorain County residents.	Provides non-emergency primary and preventive care to residents of all ages including women's health care. Offers the Women, Infants and Children's nutrition program (WIC), dental clinics, health education, car seat safety checks.	*	*	*	*		
HEALTH DISTRICT OF SUMMIT COUNTY	Summit	1100 Graham Road Circle, Stow, OH 44224-2992 ~(877) 687-0002 ~www.scpho.org	More Information	All residents of Summit County.	Coordinates Access to Care, a volunteer-based health care referral system that matches eligible uninsured persons with a primary care physician who will provide regular care and referrals for specialty and other medical care services, including limited pharmaceutical assistance and primary, preventive and dental health care.	*	*				
HELP ME GROW OF CUYAHOGA COUNTY	Cuyahoga	8111 Quincy Ave. Ste. #344, Cleveland, OH 44104 ~(216) 698-7500 ~www.helpmegrow.org	More Information	Disadvantaged residents of Cuyahoga County.	Plans and manages County Help Me Grow services for children through age 2, including prenatal home visits, on-going home visits, and specialize services for children with developmental delays or disabilities. Help Me Grow conducts central intake for these services. Provides information to families with young children who are in need of services.		*		*		
HITCHCOCK CENTER FOR WOMEN	No restrictions	1227 Ansel Rd., Cleveland, OH 44108 ~(216) 421-0662 ~hcfw.org	More Information	Adult women.	Operates a multi-service agency for chemically dependent adult women with or without children. Offers assessment and residential treatment for alcohol and other drug addictions.	*	*	*	*		
HOLY MARTYRS MINISTRY OF ASSISTANCE	Medina	3100 S. Weymouth Rd., Medina Twp., OH 44256 ~(330) 635-4989 ~www.holymartyrs.net	More Information	Medina County residents with low income.	Offers worship services, weekly food pantry and emergency financial assistance.				*		
HUNGER NETWORK OF GREATER CLEVELAND BREAD OF LIFE - HUNGER NETWORK SITE	Cuyahoga	8520 Carnegie Ave., Cleveland, OH 44106 ~(216) 436-2000 ~www.hungernetnetwork.org	More Information	Serves parts of ZIP codes 44103, 44104 and 44106 within the City of Cleveland.	Operates as a hunger center which provides emergency food for families and single persons who reside in the defined area and demonstrate need.				*		
HUNGER NETWORK OF GREATER CLEVELAND CALVARY LUTHERAN CHURCH - HUNGER NETWORK SITE	Cuyahoga	13101 Euclid Ave., East Cleveland, OH 44112 ~(216) 436-2000 ~www.hungernetnetwork.org	More Information	Serves parts of 44112 and 44118 in the City of Cleveland, the Forest Hills and surrounding area of East Cleveland.	Operates as a hunger center which provides emergency food for families and single persons who reside in the defined area and demonstrate need.				*		
HUNGER NETWORK OF GREATER CLEVELAND CORY UNITED METHODIST CHURCH - HUNGER NETWORK SITE	Cuyahoga	1117 E 105th St., Cleveland, OH 44108 ~(216) 619-8155 ~www.hungernetnetwork.org	More Information	Serves parts of ZIP codes 44106 and 44108 within the City of Cleveland and all of the City of Bratenah (ZIP codes 44108 and 44110).	Operates as a hunger center which provides emergency food for families and single persons who reside in the defined area and demonstrate need.				*		
HUNGER NETWORK OF GREATER CLEVELAND TRIEDSTONE BAPTIST CHURCH - HUNGER NETWORK SITE	Cuyahoga	3782 Community College Ave., Cleveland, OH 44115 ~(216) 436-2000 ~www.hungernetnetwork.org	More Information	Serves part of zip code 44115 within the City of Cleveland.	Operates as a hunger center which provides emergency food for families and single persons who reside in the defined area and demonstrate need.				*		
HUNGER NETWORK OF GREATER CLEVELAND UNIVERSITY SETTLEMENT HUNGER CENTER - HUNGER NETWORK SITE	Cuyahoga	4800 Broadway Ave., Cleveland, OH 44127 ~(216) 436-2000 ~www.hungernetnetwork.org	More Information	Serves parts of ZIP codes 44105, 44125 and 44127 within the City of Cleveland.	Operates as a hunger center which provides emergency food for families and single persons who reside in the defined area and demonstrate need.				*		
HUNTINGTON'S DISEASE SOCIETY OF AMERICA - NORTHEAST OHIO CHAPTER	Cuyahoga and Summit	10176 Luman Ln., Twinsburg, OH 44087 ~(330) 998-6600 ~www.lkwjpl.org/hdsa/	More Information	Targeted to persons with Huntington's disease and those at risk, as well as their families, friends and healthcare team.	Provides Disease/Disability Information for Huntington's Disease, Health Related Support Groups for Huntington's Disease.		*	*			
INNER CITY LIVING	Cuyahoga	4213 E 131st., Cleveland, OH 44105 ~(216) 288-4997 ~www.innercityliving.net	More Information	Cuyahoga residents, ages 14+.	Provides personal care, homemaker services and non-emergency transportation services for people with disabilities.				*		
JOB AND FAMILY SERVICES OF GEAUGA COUNTY	Geauga	12480 Ravenwood Dr. Wellington H. Chapman Bldg., Chardon, OH 44024 ~(440) 285-9141 ~www.geaugajfs.org	More Information	Geauga County residents.	Government agency that promotes self-sufficiency and family stability by providing emergency financial assistance, employment services, child and adult protective services, child support services, Medicaid, food stamps, child development programming, and a wide variety of social services.	*	*	*	*		
JOB AND FAMILY SERVICES OF LAKE COUNTY	Lake	177 Main Street, Painesville, OH 44077 ~(440) 350-4000 ~www.lakecountyohio.gov	More Information	Lake County residents.	Government agency that promotes self-sufficiency and family stability by providing emergency financial assistance, employment services, child and adult protective services, child support services, Medicaid, food stamps, child development programming, and a wide variety of social services.	*	*	*	*		
JOB AND FAMILY SERVICES OF LORAIN COUNTY	Lorain	42485 North Ridge Road, Elyria, OH 44035 ~(440) 323-5726 ~www.lcdjfs.com	More Information	Lorain County residents.	Government agency that promotes self-sufficiency and family stability by providing emergency financial assistance, employment services, child and adult protective services, child support services, Medicaid, food stamps, child development programming, and a wide variety of social services.	*	*	*	*		
JOB AND FAMILY SERVICES OF MEDINA COUNTY	Medina	232 Northland Dr., Medina City, OH 44256 ~(330) 722-9300 ~ www.mcjfs.us	More Information	Medina County residents.	Provides three divisions of services to people of Medina County. Provides protective and supportive services to families with children and elderly through Children Services and Social Services divisions. Provides food assistance, cash assistance, medical assistance and emergency assistance through the Eligibility Division. Offers support in transportation, child care and child care provider certification through the Fiscal Division.	*	*	*	*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
JOB AND FAMILY SERVICES OF PORTAGE COUNTY	Portage	449 South Meridian St. 2nd Floor, Portage County Administration Bldg. Ravenna, Ohio 44266 Phone: 330-297-3750 ~www.co.portage.oh.us/jfs	More Information	Portage County residents.	Government agency that promotes self-sufficiency and family stability by providing emergency financial assistance, employment services, child and adult protective services, child support services, Medicaid, food stamps, child development programming, and a wide variety of social services.	*	*	*	*		
JOB AND FAMILY SERVICES OF SUMMIT COUNTY	Summit	Sojourner Truth Building, 37 N High St., Akron, OH 44308 ~(330) 643-8200 ~www.summitdjs.org	More Information	Summit County residents.	Government agency that promotes self-sufficiency and family stability by providing emergency financial assistance, employment services, child and adult protective services, child support services, Medicaid, food stamps, child development programming, and a wide variety of social services.	*	*	*	*		
THE JOHNS HOPKINS HOSPITAL	No restrictions	1800 Orleans St. Baltimore, Maryland 21287 ~ (410) 955-5000 ~www.hopkinsmedicine.org	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
THE JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE	No restrictions	733 North Broadway, Baltimore, MD, 21205 ~(410) 955-3182 ~www.hopkinsmedicine.org/som/	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*
JUVENILE DIABETES RESEARCH FOUNDATION NORTHEAST OHIO CHAPTER	No restrictions	6100 Rockside Woods Blvd. Ste. 445, Independence, OH 44131 ~(216) 524-6000 ~www.jdrfneo.org	More Information	No restrictions.	Offers information and support groups, and support for type I diabetes research.			*			
KEY CAREER PLACE - UNIFIED TECHNOLOGIES CENTER	Cuyahoga	2415 Woodland Ave., Cleveland, OH 44115 ~(866) 933-5180 ~www.keycareerplace.info	More Information	No restrictions.	Provides assistance with putting together effective job resumes, classes in resume-writing, interview practice, access to computers to update resumes, posting on an online computer job bank, help with career assessment, as well as services to employers looking for qualified applicants.				*		
KIDNEY FOUNDATION OF MEDINA COUNTY	Medina	232 Northland Dr., Medina City, OH 44256 ~(330) 350-6430 ~www.mckf.org	More Information	Medina County residents.	Provides assistance and education to persons with kidney disease and their families. Offers a nonprescription diabetic supply bank. Helps arrange transportation for persons attending dialysis centers by scheduling taxi services or local transit services.			*			
LESBIAN, GAY, BISEXUAL, TRANSGENDER COMMUNITY CENTER OF GREATER CLEVELAND	Cuyahoga	6600 Detroit Ave. Cleveland, OH 44102 ~(216) 651-5428 ~www.lgbtcleveland.org	More Information	Lesbian/gay/bisexual/transgender community.	LGBT Referral Services for Physician Referrals, Specialized Information and Referral for Gay/Lesbian/Bisexual/Transgender Issues and Therapy Referrals	*	*				
LOUIS STOKES CLEVELAND VA MEDICAL CENTER - WADE PARK CAMPUS	Cuyahoga	10701 East Blvd., Cleveland, OH 44106 ~(216) 791-3800 ~www.va.gov	More Information	Adults 18 and older who served in active military, naval or air service and was discharged or released under conditions other than dishonorable.	Provides primary and preventive health care, dental care and mental health and social services.	*	*	*	*		
LUTHERAN METROPOLITAN MINISTRY	Cuyahoga	1468 W 25th St., Cleveland, OH 44113 ~(216) 696-2715 ~www.lutheranmetro.org	More Information	No restrictions for most services.	Plans, develops and coordinates social services to empower people to meet cultural, physical, social, emotional and spiritual needs. Focuses on the needs of adults dealing with the criminal justice system, disabilities, long-term care, homelessness and at-risk youth. Provides services to caregivers. Affiliated programs include: 2100 Lakeside Shelter, Adult Guardianship Services, Community Re-Entry, Support to At-Risk Teens (START), and Maximum Accessible Housing of Ohio.	*	*		*		
MANNA HOUSE RECOVERY AND RESOURCE CENTER	No restrictions	8019 Cedar Ave., Cleveland, OH 44103 ~(216) 432-2598 ~www.mannahouse-recovery.net	More Information	Adult recovering substance abusers.	Provides services for adult substance abusers, primarily those in recovery, and for ex-offenders. Includes a drop-in center, pastoral counseling and licensed substance abuse counseling, referral for services as necessary, sober housing and independent living. Also acts as a host site for various 12-step groups and operates a food pantry.	*	*	*	*		
MASSACHUSETTS GENERAL HOSPITAL	No restrictions	55 Fruit Street, Boston, MA 02114 ~(617) 726-2000 ~ www.massgeneral.org/	More Information	No restrictions	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
MAYO CLINIC	No restrictions	200 First Street SW, Rochester, MN 55905 ~(507) 284-2511 ~www.mayoclinic.com	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*			*	
MEDINA COUNTY CAREER CENTER	No restrictions	1101 W. Liberty St., Medina Twp., OH 44256 ~(330) 725-8461 ~www.mccc-jvsd.org	More Information	Targets Medina County residents.	Provides career technical education for high school juniors and seniors. Offers the Adult and Continuing Education Division that provides education and training courses. Additionally provides Adult Basic Literacy Education (ABLE) and GED programs at several local sites including the Medina County Career Center. Provides monthly GED testing site. Offers counseling in financial aid, job seeking skills, job placement and career assessments. Additionally offers various computer and software classes and seminars. Medina Business Institute Division offers specialized programs for business and industries who would like supplemental training for employees.				*		
MEDINA CREATIVE ACCESSIBILITY	Medina	2110 Hathaway Dr., Brunswick City, OH 44212 ~(330) 220-2112 ~www.medinacreativehousing.com	More Information	Adults in Medina County with developmental disabilities.	Provides life skills training and vocational training for adults with developmental disabilities. Additionally will provide this training on-site to special needs classrooms within in the county. Also offer services for providers.		*		*		
MEDINAWORKS	Medina	3721 Pearl Rd., Medina City, OH 44256 ~(330) 723-9675 ~www.medinacountyworks.com	More Information	Medina County residents.	Provides various programs and services for job seekers and employers in Medina County area.				*		
MEDXPRESS	Cuyahoga	11512 Superior Ave. Cleveland, OH 44106 ~(216) 795-1700 Voice	More Information	Cuyahoga County residents.	Provides medical transportation for individuals.				*		
MENTAL HEALTH AND RECOVERY BOARD OF GEAUGA COUNTY	Geauga	13244 Ravenna Road, Chardon, OH 44024 ~(440) 285-2282 ~www.geauga.org	More Information	Geauga County residents.	Provides services to residents with mental illness and alcohol or drug addiction. Provides education to prevent mental health problems and substance abuse.	*	*	*	*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
MENTAL HEALTH AND RECOVERY BOARD OF PORTAGE COUNTY	Portage	155 East Main Street, Kent, Ohio 44240 ~(330) 673-1756 ~www.mental-health-recovery.org	More Information	Portage County residents.	Provides services to residents with mental illness and alcohol or drug addiction. Provides education to prevent mental health problems and substance abuse.	*	*	*	*		
MENTAL HEALTH SERVICES	Cuyahoga	1744 Payne Ave., Cleveland, OH 44114 ~(216) 623-6555 Voice ~www.mhs-inc.org	More Information	Cuyahoga County residents. Some programs restricted to residents already receiving county assistance.	Provides community support services to homeless persons who have a severe mental disability. Offers psychiatric assessment and treatment. Provides 24-hour crisis stabilization for adults and children in psychiatric crisis. Provides mental health information and referral and suicide prevention services to all Cuyahoga County residents. Provides contracted services for the "Children Who Witness Violence Program."	*	*		*		
METRO REGIONAL TRANSIT AUTHORITY	Summit	416 Kenmore Boulevard, Akron, OH 44301-1099 ~www.akronmetro.org	More Information	Summit County Residents, ages 62+.	Provides Disability Related Transportation, General Paratransit/Community Ride Programs, Senior Ride Programs, Local Bus Transit Services.				*		
METROHEALTH MEDICAL CENTER	Cuyahoga	2500 MetroHealth Drive, Cleveland, OH 44109 ~(216) 778-7800 ~ www.metrohealth.org/	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
METROHEALTH MEDICAL CENTER - ASIA TOWN HEALTH CENTER	Cuyahoga	2999 Payne Ave. St 216, Cleveland, OH 44114 ~(216) 861-4646 ~www.metrohealth.org	More Information	Targets the Asian community.	Provides primary and preventive care.	*	*	*	*		
METROHEALTH MEDICAL CENTER - BROADWAY HEALTH CENTER	Cuyahoga	6835 Broadway Ave., Cleveland, OH 44105 ~(216) 957-1700 ~www.metrohealth.org	More Information	No restrictions.	Provides primary and preventive care.	*	*	*	*		
METROHEALTH MEDICAL CENTER - BROOKLYN HEALTH CENTER	Cuyahoga	5208 Memphis Ave., Cleveland, OH 44144 ~(216) 398-0100 ~www.metrohealth.org	More Information	No restrictions.	Provides primary and preventive care.	*	*	*	*		
METROHEALTH MEDICAL CENTER - BUCKEYE HEALTH CENTER	Cuyahoga	2816 E 116th St., Cleveland, OH 44120 ~(216) 957-4000 ~www.metrohealth.org	More Information	No restrictions.	Provides primary and preventive care.	*	*	*	*		
METROHEALTH MEDICAL CENTER - J. GLEN SMITH HEALTH CENTER	Cuyahoga	11100 Saint Clair Ave., Cleveland, OH 44108 ~(216) 249-3600 ~www.metrohealth.org	More Information	No restrictions.	Provides primary and preventive care.	*	*	*	*		
METROHEALTH MEDICAL CENTER - LEE-HARVARD HEALTH CENTER	Cuyahoga	4071 Lee Road, Cleveland, OH 44128 ~(216) 957-1200 ~www.metrohealth.org	More Information	No restrictions.	Provides primary and preventive care.	*	*	*	*		
METROHEALTH MEDICAL CENTER - LGBT PRIDE CLINIC	Cuyahoga	4242 Lorain Ave., Cleveland, OH 44113 ~(216) 651-3499 ~www.metrohealth.org	More Information	Targets the lesbian, gay, bisexual and transgender community.	Provides primary and preventive care.	*	*	*	*		
METROHEALTH MEDICAL CENTER - STRONGSVILLE HEALTH CENTER	Cuyahoga	16000 Pearl Road, Strongsville, OH 44136 ~(440) 238-2124 ~www.metrohealth.org	More Information	No restrictions.	Provides primary and preventive care.	*	*	*	*		
METROHEALTH MEDICAL CENTER - THOMAS F. MCCAFFERTY HEALTH CENTER	Cuyahoga	4242 Lorain Ave., Cleveland, OH 44113 ~(216) 957-4848 ~www.metrohealth.org	More Information	No restrictions.	Provides primary and preventive care.	*	*	*	*		
METROHEALTH MEDICAL CENTER - WEST PARK HEALTH CENTER	Cuyahoga	3838 West 150th St., Cleveland, OH 44111 ~(216) 957-5000 ~www.metrohealth.org	More Information	No restrictions.	Provides primary and preventive care.	*	*	*	*		
METROPOLITAN HOUSING AUTHORITY MEDINA COUNTY	Medina	850 Walter Road, Medina, Ohio 44256 ~(330) 725-7531 ~www.mmha.org	More Information	Medina County residents.	Provides quality, affordable housing that is decent and safe, to eligible families in this community.				*		
METROPOLITAN HOUSING AUTHORITY OF CUYAHOGA COUNTY - MAIN SITE	Cuyahoga	8120 Kinsman Rd., Cleveland, OH 44104 ~(216) 348-5000 ~www.cmha.net	More Information	Cuyahoga County residents.	Provides safe, decent, affordable housing. CMHA owns and manages family estates, senior and adult high-rise developments, and scattered site locations throughout the County. Maintains an accredited police department to ensure safety.				*		
METROPOLITAN HOUSING AUTHORITY OF GEAUGA COUNTY	Geauga	385 Center St., Chardon, OH 44024 ~(440) 286-7413 ~geaugamha.org	More Information	Geauga County residents.	Provides quality, affordable housing that is decent and safe, to eligible families in this community.				*		
METROPOLITAN HOUSING AUTHORITY OF LAKE COUNTY	Lake	189 First Street, Painesville, Ohio 44077 ~(440) 354-3347 ~www.lakehousing.org	More Information	Lake County residents.	Provides quality, affordable housing that is decent and safe, to eligible families in this community.				*		
METROPOLITAN HOUSING AUTHORITY OF LORAIN COUNTY	Lorain	1600 Kansas Ave., Lorain Ohio 44052 ~(440) 288-1600 ~www.lmha.org	More Information	Lorain County residents.	Provides quality, affordable housing that is decent and safe, to eligible families in this community.				*		
METROPOLITAN HOUSING AUTHORITY OF PORTAGE COUNTY	Portage	2832 State Route 59, Ravenna, Ohio 44266 ~(330) 297-1489 ~www.portagehousing.org	More Information	Portage County residents.	Provides quality, affordable housing that is decent and safe, to eligible families in this community.				*		
METROPOLITAN HOUSING AUTHORITY OF SUMMIT COUNTY	Summit	100 West Cedar Street, Akron, OH 44307 ~(330) 762-9631 ~www.akronhousing.org	More Information	Summit County residents.	Provides quality, affordable housing that is decent and safe, to eligible families in this community.				*		
NATIONAL CAUCUS AND CENTER ON BLACK AGED-CLEVELAND OFFICE	Cuyahoga	12200 Fairhill Rd., Cleveland, OH 44120 ~(216) 721-9197 ~users.eros.com/ncba	More Information	Individuals need to be 55 years or older and meet federal poverty guidelines. Services are targeted to African Americans. In addition, individuals must be residents of Cuyahoga County.	Local chapter of national private non-profit organization dedicated to improving the quality of life for minorities and low income elderly through employment and training. Referral and/or assistance also given, as needed, regarding matters pertaining to housing, health promotion and advocacy.				*		
NATIONAL INSTITUTES OF HEALTH	No restrictions	9000 Rockville Pike, Bethesda, MD 20892 ~(301) 496-4000 ~www.nih.gov	More Information	No restrictions.	Federal agency that is part of the U.S. Department of Health and Human Services and composed of 27 Institutes and Centers. Responsible for biomedical and health-related research to improve health and save lives. Provides medical research funding.					*	
NATIONAL KIDNEY FOUNDATION SERVING OHIO DIVISION OFFICE	All Counties	2800 Corporate Exchange Dr., Ste. 260, Columbus, OH 43231 ~(614) 882-6184 ~www.nkfofOhio.org	More Information	Targets individuals with or at risk of or affected by kidney disease.	Provides services to help prevent kidney and urinary tract diseases, improve the health and well-being of individuals and families affected by kidney disease and increase the availability of all organs for transplantation.			*			

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
NATIONAL MULTIPLE SCLEROSIS SOCIETY - OHIO BUCKEYE CHAPTER	Cuyahoga	6155 Rockside Rd. Ste. 202, Independence, OH 44131 ~(800) 344-4867 ~www.msiohio buckeye.org	More Information	People with MS and their families.	Provides funding for research that will lead to the cause, treatment and cure of Multiple Sclerosis (MS). Offers numerous programs that improve the quality of life for people with MS and their families.			*			
NATIONAL STUTTERING ASSOCIATION - CLEVELAND CHAPTER - EAST SIDE	No restrictions	(Confidential address) ~(216) 381-6237 ~www.westutter.org	More Information	Individuals who stutter, their families, children, and professionals who work with this population.	Provides information, research, workshops, materials (books, tapes, etc.), support groups. Main local chapter activity is support group.			*			
NEW SARDIS PRIMITIVE BAPTIST CHURCH	Cuyahoga	3474 E 147th St., Cleveland, OH 44120 ~(216) 921-1912	More Information	Must be in need. Clients can receive assistance as often as needed.	Provides worship services and a food pantry.				*		
NORTH COAST HEALTH MINISTRY - MAIN SITE	Cuyahoga, Lorain	16110 Detroit Ave. Lakewood, OH 44107 ~(216) 228-7878 ~nchealthministry.org	More Information	No restriction. Low-income, Under/Uninsured.	Medical services to low-income, uninsured individuals. Offers primary care, including regular check-ups/preventive care, chronic disease management, women's health and pediatrics; social work services and referrals for social services; and free/discounted prescriptions. Assist with paperwork for patient assistance programs.	*	*		*		
NORTHEAST OHIO AREAWIDE COORDINATING AGENCY	Cuyahoga	1299 Superior Ave., Cleveland, OH 44114 ~(800) 825-7433 Toll Free ~www.ohiorideshare.com	More Information	Adults, ages 18+, in Cuyahoga County.	Offers a ride matching service to assist commuters with forming car or van pools to work. Provides a list of other drivers/riders in the vicinity. Clients make the arrangements for car pools with others on the list. For those persons in the program, will provide reimbursement of 80% of the cost of getting home (cab, rental car, etc.) in cases of an emergency or a missed ride home, up to a maximum of \$60.				*		
NORTHEAST OHIO COALITION FOR THE HOMELESS	Cuyahoga	3631 Perkins Ave. 3A-3 Cleveland, OH 44114 ~(216) 432-0540 ~www.neoch.org	More Information	Homeless.	Functions as a body of homeless and formerly homeless persons, public, private and nonprofit organizations, and individuals whose goal is to organize and empower homeless and at-risk persons through public education, advocacy, and the promotion of nurturing environments. Annually produces a comprehensive list of shelters, meal sites, public health facilities, legal services, and other service providers in Cuyahoga County which assist the homeless in emergency situations.			*	*		
NORTHEAST OHIO HYDROCEPHALUS SUPPORT GROUP at CLEVELAND CLINIC INDEPENDENCE FAMILY HEALTH CENTER	No restrictions	5001 Rockside Rd. Crown Centre II, Independence, OH 44131 ~(216) 444-9923 ~shimeohio.org	More Information	Anyone affected by the condition of hydrocephalus, including patients, parents, spouses, etc.	Provides Disease/Disability Information for Hydrocephalus, Health Related Support Groups for Hydrocephalus.			*			
NORTHEAST OHIO NEIGHBORHOOD HEALTH SERVICES (NEON) - COLLINWOOD HEALTH CENTER	Cuyahoga	15322 St. Clair Ave., Cleveland, OH 44110 ~(216) 851-1500 ~www.neonhealth.org	More Information	No restrictions.	Provides primary and preventive care. Behavioral health services offered to primary care clients.	*	*				
NORTHEAST OHIO NEIGHBORHOOD HEALTH SERVICES (NEON) - EAST CLEVELAND HEALTH CENTER	Cuyahoga	15201 Euclid Ave., East Cleveland, OH 44112 ~(216) 541-5600 ~www.neonhealth.org	More Information	No restrictions.	Provides primary care. Behavioral health services offered to primary care clients.	*	*				
NORTHEAST OHIO NEIGHBORHOOD HEALTH SERVICES (NEON) - HOUGH HEALTH CENTER	Cuyahoga	8300 Hough Ave., Cleveland, OH 44103 ~(216) 231-7700 ~www.neonhealth.org	More Information	No restrictions.	Provides primary care. Behavioral health services offered to primary care clients. WIC site.	*	*				
NORTHEAST OHIO NEIGHBORHOOD HEALTH SERVICES (NEON) - NORWOOD HEALTH CENTER	Cuyahoga	1468 E 55th St., Cleveland, OH 44103 ~(216) 881-2000 ~www.neonhealth.org	More Information	No restrictions.	Provides primary and preventive care. Behavioral health services offered to primary care clients.	*	*				
NORTHEAST OHIO NEIGHBORHOOD HEALTH SERVICES (NEON) - SOUTHEAST HEALTH CENTER	Cuyahoga	13301 Miles Ave., Cleveland, OH 44105 ~(216) 751-3100 ~www.neonhealth.org	More Information	No restrictions.	Provides primary and preventive care. Behavioral health services offered to primary care clients.	*	*				
NORTHEAST OHIO NEIGHBORHOOD HEALTH SERVICES (NEON) - SUPERIOR HEALTH CENTER	Cuyahoga	12100 Superior Ave., Cleveland, OH 44106 ~(216) 851-2600 ~www.neonhealth.org	More Information	No restrictions.	Provides primary and preventive care. Behavioral health services offered to primary care clients.	*	*				
NORTHEASTERN OHIO MEDICAL UNIVERSITY	No restrictions	4209 State Route 44, Post Office Box 95, Rootstown, OH 44272-0095 ~(800) 686-2511 or (330) 325-6600 ~www.neomed.edu/	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*
NORTHERN OHIO HEMOPHILIA FOUNDATION	Cuyahoga and Summit	4807 Rockside Rd. Ste. 380, Independence, OH 44131 ~(800) 554-4366 ~www.nohf.org	More Information	Residents with bleeding disorders.	Provides enhancement to the quality of life for people with genetic bleeding disorders and their families through advocacy, education, research and other constituency services. Services include: information/referral, counseling to deal with the diagnosis, medical alert bracelets, educational workshops and seminars, social activities, camp and educational scholarships, and a quarterly newsletter.		*	*			
NORTHERN SUMMIT COUNTY COMMUNITY MULTI-SERVICE CENTER	Summit	10333 Northfield Road, Unit 74E, Northfield, OH 44067 ~(330) 467-2218	More Information	Northern Summit County residents/Some programs for Seniors only.	Provides transportation, information and referral, food vouchers, older adult social clubs, specialized information for Seniors.				*		
OFFICE FOR OLDER ADULTS OF MEDINA COUNTY	Medina	246 Northland Dr. Ste. G-20, Medina City, OH 44256 ~(330) 723-9514 ~www.co.medina.oh.us/oa/office.htm	More Information	Medina County residents, ages 60+.	Provides in-home and community based services, including home-delivered and congregate meals, and a variety of cultural, recreational and educational programs. Functions as an Aging and Disability Resources Center (ADRC), offering information and assistance, options counseling and benefits screening for older adults and adults with disabilities.			*	*		
OHIO DEPARTMENT OF AGING	All Counties	50 W Broad St. 9th Fl., Columbus, OH 43215 ~(614) 466-5500 ~www.aging.ohio.gov	More Information	Senior residents of Ohio.	Provides administrative oversight for provisions of the Older Americans Act and for the 12 local Area Agencies on Aging within the State of Ohio. Also offers some direct supportive services to Ohio seniors including the Golden Buckeye Card, the Long-Term Care Ombudsman program, and the Long-Term Care Consumer's Guide. Provides funding for various local home and community based services through Area Agencies and designated service providers.	*	*	*			
OHIO DEPARTMENT OF DEVELOPMENT	All Counties	77 S High St., Columbus, OH 43215 ~(800) 848-1300 ~www.development.ohio.gov	More Information	Residents of Ohio.	Administers short and long-term economic development programs to create, retain and expand job opportunities for Ohioans. Works to attract national and international companies to locate their operations in Ohio. Supports entrepreneurial and minority business growth and promotes travel and tourism in the State of Ohio. Administers the Home Energy Assistance Program (HEAP).				*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
OHIO DEPARTMENT OF HEALTH	All Counties	246 N. High St., Columbus, Ohio 43215 ~(614) 466-3543 ~www.odh.ohio.gov	More Information	Residents of Ohio.	Administers programs that provide primary and continuing health services for all residents of Ohio. Works for the prevention of communicable and chronic diseases. Maintains vital statistics and licenses health care facilities. Regulates sanitation, food, and private water systems. Provides bioterrorism information as it relates to health issues. Provides physician recruitment programs.	*	*	*	*		
OHIO DEPARTMENT OF INSURANCE	All Counties	50 W Town St. Ste. 300, Columbus, OH 43215 ~(614) 644-2658 ~www.insurance.ohio.gov	More Information	Residents of Ohio.	Seeks to be responsive to and safeguard consumer interests while promoting a stable and competitive marketplace among insurance providers. Committed to the proper regulation and licensing of insurance agents and agencies. Offers consumers information about insurance and handles insurance complaints.	*	*				
OHIO DEPARTMENT OF JOB AND FAMILY SERVICES	All Counties	30 E Broad St. 32nd Flr., Columbus, OH 43215 ~(877) 852-0010 ~jfs.ohio.gov	More Information	Residents of Ohio.	Develops and oversees programs and services designated to help Ohioans be healthy and safe while gaining and maintaining employment and independence. Programs include adoption, child care, child support, Disability Assistance, Food Stamps, foster care, labor exchange, Medicaid, Ohio Works First, Prevention, Retention and Contingency (PRC), protective services, Unemployment Compensation, veterans' services, women's services and workforce development. Formed by the merger of the Dept. of Human Services and the Bureau of Employment Services. Details on some programs are covered in County-level Job and Family Service agencies in this database.	*	*		*		
OHIO DEPARTMENT OF MENTAL HEALTH	All Counties	30 E Broad St. 8th Flr., Columbus, OH 43215 ~(614) 466-2595 ~www.mh.state.oh.us	More Information	Residents of Ohio.	Manages Ohio's state-funded mental health services and facilities. Also administers the Residential State Supplement (RSS) program.		*				
OHIO DEPARTMENT OF NATURAL RESOURCES	All Counties	2045 Morse Rd. Bldg. D, Columbus, OH 43229 ~(614) 265-6565 ~www.ohiodnr.com	More Information	Residents of Ohio.	Provides protection, preservation and management of the natural resources of Ohio including state parks, forests, wildlife areas and nature preserves. Regulates fishing and hunting in Ohio.			*			
OHIO STATE MEDICAL ASSOCIATION	All Counties	3401 Mill Run Drive, Hilliard, OH 43026 ~(800) 766-6762 or (614) 527-6762 ~http://www.osma.org/	More Information	Residents of Ohio.	Statewide association representing 20,000 Ohio physicians, residents, medical students, and practice managers. Dedicated to improving the practice of medicine. Affiliate of the American Medical Association.			*		*	*
THE OHIO STATE UNIVERSITY COLLEGE OF MEDICINE	No restrictions	254 Meiling Hall, 370 West Ninth Avenue, Columbus, OH, 43210-1238 ~(614) 292-2220 ~medicine.osu.edu	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*
OHIO UNIVERSITY HERITAGE COLLEGE OF OSTEOPATHIC MEDICINE	No restrictions	102 Grosvenor Hall, Athens, OH 45701 ~(800) 345-1560 ~www.oucom.ohiou.edu/		No restrictions.	Accredited medical education program for Doctor of Osteopathic Medicine degree.					*	*
OLIVET INSTITUTIONAL BAPTIST CHURCH	Cuyahoga	8712 Quincy Ave., Cleveland, OH 44106 ~(216) 721-3585 ~www.oibc.org	More Information	Targets immediate neighborhood.	Provides numerous social service and health-related programs as well as opportunities for Christian worship and education.			*	*		
PARTNERSHIP FOR A SAFER CLEVELAND	Cuyahoga	2239 E 14th St., Cleveland, OH 44115 ~(216) 523-1128 ~www.safercleveland.org	More Information	Serves teachers, administrators, community groups, law enforcement, and parents in Cuyahoga County. Service is targeted to the first-ring suburbs.	Promotes best practices and effective violence prevention programs through collaborations with public and private partners.				*		
PASSAGES	Cuyahoga	3631 Perkins Ave. Ste. 4E, Cleveland, OH 44114 ~(216) 881-6776 ~www.passages-oh.org	More Information	Residents of Cuyahoga County. Targets offenders and their families.	Offers an adult diversion program, transportation for families visiting their relatives at a correctional facility, employment assistance for ex-offenders, and an overnight camp for fathers and their children.				*		
PEACE IN THE HOOD	Cuyahoga	13512 Kinsman Rd., Cleveland, OH 44120 ~(216) 283-5434 ~www.pithcleveland.org	More Information	No restrictions.	Provides gang and violence prevention programs for youth that stress personal responsibility, empowerment, and self-sufficiency. Services include an after-school program with arts, youth business activities, and Rites of Passage programming as well as homework help. Also offers mentoring for youth, training in violence prevention for the community and other activities that promote neighborhood harmony.				*		
PLANET MEDICAL TRANSPORTATION	All Counties	P.O. Box 18215 Cleveland Heights, OH 44118 ~(216) 381-5858	More Information	No restrictions.	Provides medical transportation and translation services (fee for services).				*		
PLANNED PARENTHOOD OF NORTHEAST OHIO - CLEVELAND HEALTH CENTER	Cuyahoga	7997 Euclid Ave., Cleveland, OH 44103 ~(216) 851-1880 ~www.ppneo.org	More Information	No restrictions for most services. Vaccinations against human papillomavirus (HPV) are given to females, aged 9 and older.	Provides primary and preventive care. Offers birth control education and services. Provides all available methods of contraception, including emergency. Offers screening for a variety of conditions. Provides vaccinations against human papilloma virus (HPV), the virus that causes cervical cancer.	*	*	*	*		
POEM MATERNAL MENTAL HEALTH ALLIANCE - CLEVELAND	Cuyahoga and Summit	(Confidential address) ~(216) 373-0302 ~www.poemonline.org	More Information	Targets new and expectant mothers who are (or feel that they may be) experiencing mental health problems due to pregnancy or childbirth.	Provides Therapy Referrals for Perinatal/Postpartum Depression, Physician Referrals for Perinatal/Postpartum Depression, Disease/Disability Information for Mental Illness/Emotional Disabilities and Perinatal/Postpartum Depression, Mental Health Related Support Groups for Perinatal/Postpartum Depression.	*	*	*			
POLICY MATTERS OHIO	Cuyahoga	3631 Perkins Ave. Suite 4C-East, Cleveland, OH 44114 ~(216) 361-9801 ~www.policymattersohio.org	More Information	Cuyahoga County residents.	Provides research on economic and work-related policy issues that affect low and middle-income Ohioans. Produces reports, offers speakers, and contacts media with report findings. Oversees the Cleveland SAVES program, which helps individuals save and make personal financial goals for their funds.				*		
PROVIDE A RIDE	Summit and Cuyahoga	4299 Cranwood Parkway, Cleveland, OH 44128 ~(216) 475-1001 (Mindy Morris) ~www.providearide.com	More Information	No restrictions.	Provides Disability Related Transportation, General Paratransit/Community Ride Programs, Medical Appointments Transportation, Senior Ride Programs.				*		
RECOVERY RESOURCES	Cuyahoga	3950 Chester Avenue Cleveland, Ohio 44114 ~(216) 431-4131 ~www.recres.org	More Information	No restrictions.	Provides treatment services for people experiencing alcohol, drug and mental health difficulties. Offers diagnostic assessment for mental health and chemical dependency, psychiatry, individual and group counseling, and substance abuse treatment, prevention and education services.	*	*	*	*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
RISING ABOVE INITIATIVE	Cuyahoga	3631 Perkins Ave. Ste. 3C, Cleveland, OH 44114 ~(216) 881-5866 ~www.risingabove-oh.org	More Information	Serves fathers ages 18 and over.	Provides a program where fathers are offered career counseling, job readiness training, life skills and personal development. Job placement may also be available upon successful completion of the program.				*		
RONALD REAGAN UCLA MEDICAL CENTER	No restrictions	757 Westwood Plaza, Los Angeles, CA 90095 ~(310) 825-9111 ~ www.uclahealth.org	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
SALVATION ARMY - THE	Cuyahoga	2507 E 22nd St., Cleveland, OH 44115 ~(216) 861-8185 ~www.salvationarmyclleveland.org	More Information	Cuyahoga County residents.	Provides a variety of social services to address the needs of all segments of the community. Services include assistance for basic needs, substance abuse treatment, counseling programs, homeless shelters, thrift stores as well as social, recreational, and educational services for individuals and families.		*	*	*		
SALVATION ARMY - THE - HARBOR LIGHT COMPLEX	Cuyahoga	1710 Prospect Ave. Cleveland, OH 44115 ~(216) 781-2121 ~www.salvationarmyclleveland.org	More Information	Adults 18+ residents of Cuyahoga County.	Offers transitional housing, substance abuse treatment, and a work release program. Also the site of the Salvation Army's Social Service Division. Housing offered at this location is for single men only. Will detox from alcohol, crack/cocaine, heroin (low-dose IV users--less than 5 bags per day; must be in withdrawal with at least twelve hours since last use), marijuana, pain pills (if the usage does not exceed the equivalent of five bags of heroin per day). Does NOT detox those individuals addicted to hallucinogens, benzodiazepines, wet, and ecstasy. Priority for admission is given to low-dose IV heroin users whose usage does not exceed five bags per day.		*	*	*		
SALVATION ARMY - THE HOUGH CORPS COMMUNITY CENTER	Cuyahoga	6000 Hough Ave., Cleveland, OH 44103 ~(216) 432-0500 ~www.salvationarmyclleveland.org	More Information	Residents of 44103, 44104, 44114.	Provides a variety of social services and activities to serves the needs of the community.				*		
SALVATION ARMY - THE MILES PARK CORPS COMMUNITY CENTER	Cuyahoga	4139 E 93rd St., Cleveland, OH 44105 ~(216) 341-1640 ~www.salvationarmyclleveland.org	More Information	Residents of 44105, 44120, 44122, 44125, 44127, 44128, 44137, 44139.	Provides a variety of social services and activities for the community.				*		
SALVATION ARMY - THE SUPERIOR CORPS COMMUNITY CENTER	Cuyahoga	9000 Superior Ave., Cleveland, OH 44106 ~(216) 229-6065 ~www.salvationarmyclleveland.org	More Information	Residents of 44106, 44108, 44112, 44115.	Provides a variety of social services and activities to serves the needs of the community.				*		
SALVATION ARMY - THE TEMPLE CORPS COMMUNITY CENTER	Cuyahoga	17625 Grovedown Ave., Cleveland, OH 44119 ~(216) 692-1388 ~www.salvationarmyclleveland.org	More Information	Residents of 44110, 44117, 44118, 44119, 44121, 44123, 44124, 44132, 44143.	Provides a variety of social services and activities for the community.				*		
SENIOR OUTREACH SERVICES	Cuyahoga	2390 E 79th St., Cleveland, OH 44104 ~(216) 231-0003 ~www.sosleveland.org	More Information	Seniors.	The agency provides health, social and functional level assessments, respite for caregivers, companionship for isolated elders, telephone reassurance calls, home delivered meals, homemaker and personal care services to community residents and programming that includes serving a hot lunch, socialization and recreation activities, nutrition assessments, routine health screenings, as well as health promotion and wellness activities.	*	*	*	*		
SHC / THE ARC	Medina	4283 Paradise Rd., Seville, OH 44273 ~(330) 722-1900 ~www.shc-medina.org	More Information	Medina County residents with mental and physical disabilities.	Provides advocacy, community support, education, recreation, transportation subsidy and residential services. Provides materials, equipment loan, catalogs and toy lending library through the Resource Center. Serves as Medina County Chapter of The Arc.			*	*		
SHERIFF'S OFFICE OF GAUGA COUNTY	Geauga	12450 Merritt Rd., Chardon, OH 44024 ~(440) 279-2009 ~www.sheriff.geauga.oh.us	More Information	Geauga County residents.	Provides law enforcement and safety services for Geauga County.				*		
SOUTHWEST GENERAL HEALTH CENTER	All Counties	18697 Bagley Road, Middleburg Heights, OH 44130 ~(440) 816-8000 ~www.swgeneral.com	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
ST. JOHN MEDICAL CENTER	All Counties	29000 Center Ridge Rd., Westlake, OH 44145 ~(440) 835-8000 ~www.sjms.net	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
ST. VINCENT CHARITY MEDICAL CENTER	Cuyahoga	2351 East 22nd Street Cleveland, OH 44115 216.861.6200 www.stvincentcharity.com	More Information	No restrictions.	Provides primary, preventive, surgical, specialty and emergency care.	*	*				
ST. VINCENT CHARITY MEDICAL CENTER - CHURCH SQUARE FAMILY HEALTH CENTER	Cuyahoga	7963 Euclid Ave., Cleveland, OH 44103 ~(216) 431-1500	More Information	No restrictions.	Provides internal medicine, pediatrics primary care, and basic women's healthcare services.	*	*				
STANFORD UNIVERSITY SCHOOL OF MEDICINE	No restrictions	291 Campus Drive, Stanford, CA 94305-5101 ~(650) 725-3900 ~med.stanford.edu/	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*
STARTING POINT FOR CHILD CARE AND EARLY EDUCATION	Cuyahoga	4600 Euclid Ave. Ste. 500, Cleveland, OH 44103 ~(216) 575-0061 ~www.starting-point.org	More Information	Cuyahoga County residents.	Offers a wide array of services designed to link families to child care services and out-of-school time activities, increase the supply of child care providers, improve the quality of child care, stimulate early education alternatives, and address child care and early education issues within the community.			*			
THE ARC OF GREATER CLEVELAND	No restrictions	2421 Community College Ave., Cleveland, OH 44115 ~(216) 622-0755 ~thearcofgreatercleveland.org	More Information	Serve all persons with an intellectual and/or other developmental disabilities. No specific service area, but generally serves Cuyahoga and Geauga counties.	Offers information, referral, advocacy, assistance with lifecare planning, and short-term case management services to persons with intellectual and/or other developmental disabilities, such as learning disabilities, autism, Asperger's Syndrome, and Down's Syndrome. Assists clients in securing Social Security benefits, Medicaid, and residential services. Provides educational advocates to work with parents and their child's teachers, special education staff, and school administrators in planning individual education plans.	*	*	*	*		
THE HEALTHCARE CENTER AT SAINT LUKE'S POINTE	Cuyahoga	11201 Shaker Blvd., Cleveland, OH 44104 ~(216) 721-6900 ~http://www.stvincentcharity.com	More Information	Adults, ages 18 and older.	Provides primary care clinic for adults every weekday afternoon, and specialty clinics in the morning. Specialty clinics are available in Cardiology, Infectious Disease, Renal, and Gastroenterology.	*	*				

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
TOWARDS EMPLOYMENT	Cuyahoga	1255 Euclid Ave. Ste. 300, Cleveland, OH 44115 ~(216) 696-5790 ~www.towardsemployment.org	More Information	Adult residents of Cuyahoga County with low income, including those with a criminal history.	Provides job readiness training, placement, and retention services. Works with employers to develop job placement opportunities. Also provides help with removing barriers that might interfere with individuals' finding and keeping jobs.				*		
TOWARDS EMPLOYMENT AT NORTH STAR NEIGHBORHOOD RE-ENTRY RESOURCE CENTER	Cuyahoga	1834 E 55th St., Cleveland, OH 44103 ~(216) 881-5440	More Information	Aged 18+ who are residents of Cuyahoga County and who have been released from incarceration.	Provides an opportunity for ex-offenders to work with employment transition specialists to search for jobs, get referrals to services, and discover any changes they might need to make gain employment.				*		
TRI-COUNTY TRANSPORTATION	Cuyahoga and Lake	(Confidential address) ~(216) 254-7369	More Information	Cuyahoga and Lake County residents receiving Medicaid.	Provides door-to-door non-emergency transportation to medical appointments. Uses a wheelchair-accessible van.				*		
UNITED STATES DEPARTMENT OF JUSTICE FEDERAL BUREAU OF INVESTIGATION - CLEVELAND OFFICE	Cuyahoga	1501 Lakeside Ave., Cleveland, OH 44114 ~(216) 522-1400	More Information	Cuyahoga County residents.	Provides reporting and investigation of violations of United States federal statutes in a number of areas, including anti-terrorism (domestic/international) activities. Also investigates mortgage fraud (falsifying documents--includes false property appraisals, false statements regarding income and other personal facts, etc. when applying for a home loan), kidnapping, bank robberies, Internet crime, organized crime, hate crimes, and public corruption. Mortgage fraud investigation is part of a task force with the county prosecutor and other law enforcement officials. Internet crime is any illegal activity involving one or more components of the Internet (chat rooms, web sites, and/or email).				*		
UNITED STATES DEPARTMENT OF VETERANS AFFAIRS VET CENTER - EAST	Cuyahoga	2022 Lee Rd., Cleveland Hts., OH 44118 ~(216) 932-8471 ~www.va.gov	More Information	Serves conflict zone veterans and their families living on the East side of Cuyahoga County.	Offers veterans assistance with obtaining benefits and determining eligibility for benefits.	*		*			
UNITED WAY OF GREATER CLEVELAND	Cuyahoga	1331 Euclid Ave., Cleveland, OH 44115-1819 ~(216) 436-2100 ~www.unitedwaycleveland.org	More Information	No restrictions.	Operates as a private sector agency that builds partnerships, conducts research into community needs, engages in fund raising, and budgets, plans, and allocates funds to various health and human service providers. Develops partnerships with agencies, businesses, government, foundations and others to improve services to the community and increase awareness of these services. Operates the Volunteer Center which connects volunteers to area organizations. Provides information about and referrals to health and human services.				*		
UNITED WAY OF MEDINA COUNTY	Medina	2573 Medina Rd., Medina City, OH 44256 ~(330) 725-3926 ~www.unitedwaymedina.org	More Information	Medina County residents.	Operates as a private sector agency that builds partnerships, conducts research into community needs, engages in fund raising, and budgets, plans, and allocates funds to various health and human service providers. Develops partnerships with agencies, businesses, government, foundations and others to improve services to the community and increase awareness of these services. Operates the Volunteer Center which connects volunteers to area organizations. Provides information about and referrals to health and human services in Medina County.				*		
UNITED WAY SENIOR INFO LINE	Summit	703 South Main Street, Suite 211, Akron, Ohio 44311 ~(888) 212-5041 ~www.infoinc.org	More Information	No restrictions.	Provides information and referral, including uninsured, low-income residents to access free and low-cost prescription medications, an emergency response monitoring service.				*		
UNIVERSITY HEIGHTS COMMUNITY GARDENING	Cuyahoga	Taylor Road Learning Garden, 2300 Warrensville Center Road, University Heights, Ohio 44118	More Information	No restrictions.	Residents can participate in gardening activities and harvest fresh produce year round.				*		
UNIVERSITY HOSPITALS - AHUJA MEDICAL CENTER	All Counties	3999 Richmond Road, Beachwood, OH 44122 ~(216) 593-5500 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - AURORA HEALTH CENTER	All Counties	55 N. Chillicothe Road, Aurora, OH 44202 ~(330) 954-7200 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - BAINBRIDGE HEALTH CENTER	All Counties	8185 East Washington Street, Chagrin Falls, OH 44023 ~(440) 543-3371 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - BEDFORD MEDICAL CENTER	All Counties	44 Blaine Avenue, Bedford, OH 44146 ~(440) 735-3900 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - CHAGRIN HIGHLANDS HEALTH CENTER	All Counties	3909 Orange Place, Orange Village, OH 44122 ~(216) 896-1700 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary, preventive and urgent care.	*	*				
UNIVERSITY HOSPITALS - CHESTERLAND HEALTH CENTER	All Counties	8055 Mayfield Road, Chesterland, OH 44026 ~(440) 423-5045 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - CONCORD HEALTH CENTER	All Counties	7500 Auburn Road, Concord Twp., OH 44077 ~(440) 358-0400 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary, preventive and urgent care.	*	*				
UNIVERSITY HOSPITALS - EUCLID HEALTH CENTER	All Counties	18599 Lakeshore Blvd., Euclid, OH 44119 ~(216) 383-8500 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - HUDSON HEALTH CENTER	All Counties	5778 Darrow Rd., Hudson, OH 44236 ~(330) 650-5050 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - LANDERBROOK HEALTH CENTER	All Counties	5850 Landerbrook Drive, Mayfield Heights, OH 44124 ~(440) 646-2626 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - MADISON HEALTH CENTER	All Counties	701 North Lake Street, Madison, OH 44057 ~(440) 428-7511 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - MANTUA HEALTH CENTER	All Counties	10803 Main Street, Mantua, OH 44255 ~(330) 274-2030 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - MAYFIELD VILLAGE HEALTH CENTER	All Counties	730 Som Center Road, Mayfield Heights, OH 44143 ~(866) 844-2273 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				

APPENDIX G

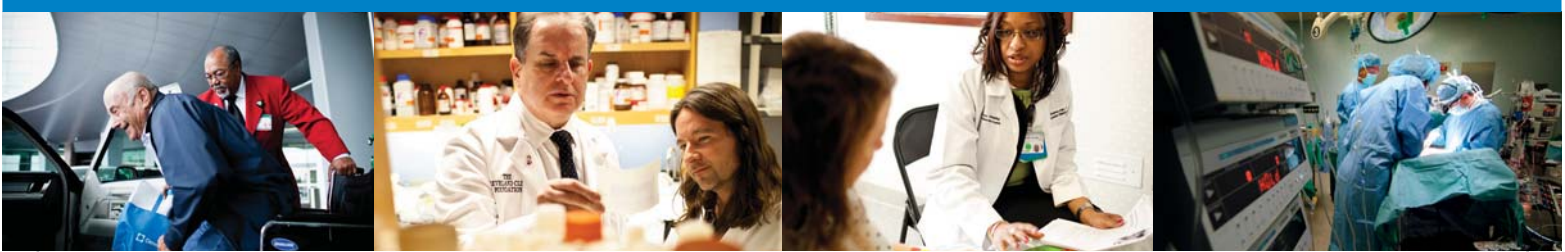
Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
UNIVERSITY HOSPITALS - MEDINA HEALTH CENTER	All Counties	4001 Carrick Drive, Medina, OH 44256 ~(330) 721-8577 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary, preventive and urgent care.	*	*				
UNIVERSITY HOSPITALS - MENTOR HEALTH CENTER	All Counties	9000 Mentor Avenue, Mentor, OH 44060 ~(440) 255-0800 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary, preventive and urgent care.	*	*				
UNIVERSITY HOSPITALS - OTIS MOSS JR. HEALTH CENTER	All Counties	8819 Quincy Ave., Cleveland, OH 44106 ~(216) 721-2177 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - RICHMOND MEDICAL CENTER	All Counties	27100 Chardon Road, Richmond Heights, OH 44143 ~(440) 585-6500 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - SEIDMAN CANCER CENTER	All Counties	11100 Euclid Avenue, Cleveland, OH 44106 ~(216) 844-3951 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - SHARON HEALTH CENTER	All Counties	5133 Ridge Road, Wadsworth, OH 44281 ~(866) 844-2273	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - SUBURBAN HEALTH CENTER	All Counties	1611 South Green Road, South Euclid, OH 44121 ~(216) 382-9492 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS - TWINSBURG HEALTH CENTER	All Counties	8819 Commons Blvd., Twinsburg, OH 44087 ~(330) 486-9600 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary, preventive and urgent care.	*	*				
UNIVERSITY HOSPITALS - UH FASTCARE AT CHARDON GIANT EAGLE	All Counties	351 Center Street, Chardon, OH 44024 ~(440) 279-0041 ~www.uhhospitals.org	More Information	No restrictions.	Provides care relating to common illnesses. Facility is staffed by a Family Nurse Practitioner. Cases beyond scope of facility are referred to a primary care physician, urgent care center or emergency room.	*	*				
UNIVERSITY HOSPITALS - UH FASTCARE AT LEGACY VILLAGE GIANT EAGLE	All Counties	25105 Cedar Rd., Lyndhurst, OH 44124 ~(216) 382-5695 ~www.uhhospitals.org	More Information	No restrictions.	Provides care relating to common illnesses. Facility is staffed by a Family Nurse Practitioner. Cases beyond scope of facility are referred to a primary care physician, urgent care center or emergency room.	*	*				
UNIVERSITY HOSPITALS - UH FASTCARE AT WILLOUGHBY COMMONS GIANT EAGLE	All Counties	36475 Euclid Avenue, Willoughby, OH 44094 ~(440) 269-7459 ~www.uhhospitals.org	More Information	No restrictions.	Provides care relating to common illnesses. Facility is staffed by a Family Nurse Practitioner. Cases beyond scope of facility are referred to a primary care physician, urgent care center or emergency room.	*	*				
UNIVERSITY HOSPITALS - WESTLAKE HEALTH CENTER	All Counties	960 Clauge Road, Westlake, OH 44145 ~(440) 250-2100 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary, preventive and urgent care.	*	*				
UNIVERSITY HOSPITALS - ZEEBA SURGERY CENTER	All Counties	29017 Cedar Road, Lyndhurst, OH 44124 ~(440) 460-8000 ~www.uhhospitals.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY HOSPITALS CASE MEDICAL CENTER - MACDONALD WOMEN'S HOSPITAL	Cuyahoga	11100 Euclid Ave., Cleveland, OH 44106 ~(216) 844-8447 ~www.uhhospitals.org	More Information	Women.	A general medical and surgical hospital for women. A member of University Hospitals of Case Medical Center and affiliated with University Hospitals.	*	*				
UNIVERSITY HOSPITALS CASE MEDICAL CENTER - MAIN SITE	Cuyahoga	11100 Euclid Ave., Cleveland, OH 44106 ~(216) 844-8447 ~www.uhhospitals.org	More Information	No restrictions.	A 947-bed, general medical and surgical hospital for adults and youth.	*	*				
UNIVERSITY HOSPITALS CASE MEDICAL CENTER - PRIMARY CARE CLINIC AT ELIZA BRYANT VILLAGE	Cuyahoga	7201 Wade Park Ave., Cleveland, OH 44103 ~(216) 844-5482 ~www.uhhospitals.org	More Information	Serves frail, homebound adults age 18 and older with severe mobility issues or who live in an area where public transportation has been discontinued or reduced drastically. Will also serve those who have significant memory loss issues.	Provides primary, preventative and urgent health care services to homebound adults who cannot otherwise access regular medical care. Program involves physicians, nurse practitioners, and clinical social workers. Patient must not have family or caregiver who can reasonably provide transportation to and from the clinic (caregiver's ability to transport patient will be taken into account).	*	*				
UNIVERSITY HOSPITALS CASE MEDICAL CENTER - RAINBOW BABIES AND CHILDREN'S HOSPITAL	Cuyahoga	11100 Euclid Ave., Cleveland, OH 44106 ~(216) 844-8447 ~www.uhhospitals.org	More Information	Youth birth to age 16 if a new patients and up to age 21 if they have already been seen by a University Hospital pediatrician.	Provides primary, preventive and urgent care for children.	*	*				
UNIVERSITY HOSPITALS CASE MEDICAL CENTER - W. O. WALKER BUILDING	Cuyahoga	10524 Euclid Ave. Ste. 3200 Cleveland, OH 44106 ~(216) 844-2400 ~www.uhhospitals.org	More Information	Adults 18 and older. Geriatric services are for older adults age 55 and older.	Provides mental health evaluations, psychiatric therapies and psychiatric counseling services. Provides adult and geriatric inpatient and outpatient mental health services including a day treatment program called the Mood Intensive Outpatient Program (IOP). Provides evaluation, diagnosis and counseling for genetically based illnesses. WIC office.	*	*	*			
UNIVERSITY HOSPITALS GEauga MEDICAL CENTER	Geauga	13207 Ravenna Rd., Chardon, OH 44024 ~(440) 285-6000 ~www.uhgeauga.org	More Information	No restrictions.	Provides primary and preventive care.	*	*				
UNIVERSITY SETTLEMENT	Cuyahoga and Summit	4800 Broadway Ave., Cleveland, OH 44127 ~(216) 641-8948 ~www.universitysettlement.net	More Information	No restrictions. Targets North and South Broadway communities.	Provides a variety of social services. Offers adult day care, child day care, benefits screening and transitional housing for homeless families. Provides a food pantry through the Hunger Network of Greater Cleveland. Member of Neighborhood Centers Association.	*			*		
UNIVERSITY OF CALIFORNIA - SAN FRANCISCO SCHOOL OF MEDICINE	No restrictions	513 Parnassus Ave., San Francisco, CA 94143-0410 ~(415) 476-2342 ~medschool2.ucsf.edu/	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*
UNIVERSITY OF CINCINNATI COLLEGE OF MEDICINE	No restrictions	3230 Eden Ave., Cincinnati, OH 45267 ~(513) 558-7333 ~www.med.uc.edu/	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
UNIVERSITY OF PENNSYLVANIA PERELMAN SCHOOL OF MEDICINE	No restrictions	3600 Market Street, Suite 240, Philadelphia PA 19104-2646 ~(215) 662-4000 ~www.med.upenn.edu/	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*
THE UNIVERSITY OF TOLEDO COLLEGE OF MEDICINE AND LIFE SCIENCES	No restrictions	2801 Bancroft, Toledo, OH 43606-3390 ~ (800) 586-5336 or (419) 383-4229 ~utoledo.edu/med	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*
URBAN LEAGUE OF GREATER CLEVELAND	Cuyahoga	2930 Prospect Ave., Cleveland, OH 44115 ~(216) 622-0999 ext. 221 ~www.ulcleveland.org	More Information	Adults 18 and older. Targeted to African Americans and other minority groups.	Provides job counseling, career planning, and assistance with finding a job (help with job search, identifying positions, referrals etc.). Also teaches job readiness skills such as writing a resume, completing job applications, and interviewing.				*		
VETERANS SERVICE COMMISSION - CUYAHOGA COUNTY	Cuyahoga	1849 Prospect Ave. Rm. 150, Cleveland, OH 44115 ~(216) 698-2632 ~vsc.cuyahogacounty.us/	More Information	Assistance is to families of active military whose residence is in Cuyahoga County (place of deployment is not considered). Military family member must be deployed for other than training purpose.	Provides assistance with food, shelter (rent or mortgage), and utility bills for families of active military personnel. Assistance is in the form of vouchers. Amount of assistance depends on the number of dependents left behind after deployment. Also available to make community presentations about their services.				*		
WEST SIDE ECUMENICAL MINISTRY	Cuyahoga	5209 Detroit Ave. Cleveland, OH 44102 ~(216) 631-1555 ~www.wsem.org	More Information	All ages, low-income.	Helps individuals and their families meet their needs through programs of service and empowerment. Provides services for all ages including specific programs for children. Offers services such as counseling, pantry services, preschool education (Head Start), and education programs. Operates the El Barrio program that provides employment, education, and social services for both Hispanics and non-Hispanics.		*		*		
WESTERN RESERVE AREA AGENCY ON AGING	All Counties	925 Euclid Ave. Ste. 600 Cleveland, OH 44115 ~(800) 626-7277 ~www.psa10a.org	More Information	Seniors.	Plans, coordinates, funds, educates, and advocates for the delivery of a range of services that address and enhance the ability of older persons.	*	*		*		
WILLIAM PATRICK DAY EARLY CHILDHOOD CENTER	Cuyahoga	2421 Community College Ave., William Patrick Day Early Childhood Ctr., Cleveland, OH 44115 ~(216) 736-2933	More Information	Women and children residents of Cuyahoga County.	One site of County Board of MR/DD early childhood programs. Also houses program sites of other agencies including Head Start, Cleveland kindergartens, Help Me Grow, WIC, and several non-daycare summer programs for children.	*	*		*		
WINDERMERE - LIVING HOPE UNITED METHODIST CHURCH	Cuyahoga	14035 Euclid Ave., East Cleveland, OH 44112 ~(216) 451-2500	More Information	Food pantry serves East Cleveland residents only otherwise, no restrictions.	Provides a variety of human services for those in need. Help includes worship services, fitness programs for all ages, hot meal programs (in conjunction with Hunger Network) a food pantry, and holiday assistance for families.			*	*		
WINDSOR LAURELWOOD CENTER FOR BEHAVIORAL MEDICINE	Cuyahoga	35900 Euclid Ave. Willoughby, OH 44094 (440) 953-3000 www.windsorlaurelwood.com	More Information	No restrictions.	Provides mental health and substance abuse treatment.	*	*	*			
WORKMEN'S CIRCLE	Cuyahoga	2490 Lee Blvd. Ste. 300B, Cleveland Hts., OH 44118 ~(216) 381-4515 ~www.workmenscircle.org	More Information	Serves those with income at or below 200% of the Federal Poverty Guidelines and who are residents of Cleveland Heights, University Heights, South Euclid, Richmond Heights, East Cleveland, and Mayfield Heights.	Provides a food pantry for the community. Fosters Jewish identity and participation in Jewish life through Jewish (especially Yiddish) culture and education, friendship, mutual aid and the pursuit of social and economic justice.				*		
WRIGHT STATE UNIVERSITY BOONSHOF SCHOOL OF MEDICINE	No restrictions	3640 Colonel Glenn Highway, Dayton, OH 45435 ~ (937) 775-2934 ~med.wright.edu	More Information	No restrictions.	Accredited academic medical education and research institution.					*	*
YMCA OF GREATER CLEVELAND	Cuyahoga	2200 Prospect Ave. Ste. 900, Cleveland, OH 44115 ~(216) 344-0095 ~www.clevelandyymca.org	More Information	No geographic restrictions for most programs.	Membership-based organization that serves the needs of the community through programs and services that build a healthy spirit, mind and body. Offerings include health/wellness facilities and programs, state-licensed child care, aquatics classes, youth and adult sports, community youth development programs, and transitional housing for homeless men.			*			
YMCA OF GREATER CLEVELAND - COMMUNITY SERVICES BRANCH YMCA	Cuyahoga	2200 Prospect Ave. Ste. 100, Cleveland, OH 44115 ~(216) 263-6805 ~www.clevelandyymca.org	More Information	No restrictions.	Provides leadership development programs for youth and teens. Organizes community events that connects the Cleveland community to the organization. Establishes programs in communities where organization sites are not present through partnerships with churches, schools, and/or community organizations.			*	*		
YMCA OF GREATER CLEVELAND - DOWNTOWN YMCA	Cuyahoga	2200 Prospect Ave. Ste. 100, Cleveland, OH 44115 ~(216) 344-7700 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YMCA OF GREATER CLEVELAND - EUCLID FAMILY BRANCH	Cuyahoga	631 Babbitt Road, Euclid, Ohio 44123 ~(216) 731-7454 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YMCA OF GREATER CLEVELAND - FRENCH CREEK FAMILY BRANCH	Lorain	2010 Recreation Lane, Avon, Ohio 44011 ~(440) 934-9622 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YMCA OF GREATER CLEVELAND - GAUGA FAMILY BRANCH	Geauga	12460 Bass Lake Road, Chardon, Ohio 44024 ~(440) 285-7543 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YMCA OF GREATER CLEVELAND - HILLCREST FAMILY BRANCH	Cuyahoga	5000 Mayfield Rd., Lyndhurst, OH 44124 ~(216) 382-4300 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YMCA OF GREATER CLEVELAND - LAKEWOOD FAMILY BRANCH	Cuyahoga	16915 Detroit Avenue, Lakewood, Ohio 44107 ~(216) 521-8400 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YMCA OF GREATER CLEVELAND - RIDGEWOOD FAMILY BRANCH	Cuyahoga	6840 Ridge Road, Parma, Ohio 44129 ~(440) 842-5200 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YMCA OF GREATER CLEVELAND - SOUTHEAST FAMILY BRANCH	Cuyahoga	460 Northfield Road, Bedford, Ohio 44146 ~(216) 663-7522 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		

APPENDIX G

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	MEDICAL SERVICES	ACCESS TO HEALTH CARE	HEALTHY LIFESTYLES	COMMUNITY SERVICES	RESEARCH	EDUCATION
YMCA OF GREATER CLEVELAND - WEST PARK-FAIRVIEW FAMILY BRANCH	Cuyahoga	15501 Lorain Road, Cleveland, Ohio 44111 ~(216) 941-5410 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YMCA OF GREATER CLEVELAND - WEST SHORE FAMILY BRANCH	Cuyahoga	1575 Columbia Road, Westlake, Ohio 44145 ~(440) 871-6885 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YMCA OF GREATER CLEVELAND - Y EXPRESS BRANCH	Cuyahoga	7928 Day Dr., Parma, OH 44129 ~(440) 887-0430 ~www.clevelandyymca.org	More Information	No restrictions.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YWCA ELYRIA	Lorain	318 West Ave, Elyria , OH 44035-5730 ~(440) 322-6308 ~ywcaelyria.org	More Information	Targets women, children and families.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YWCA GREATER CLEVELAND	Cuyahoga	4019 Prospect Ave, Cleveland , OH 44103-4317 ~(216) 881-6878 ~www.ywcaofcleveland.org/	More Information	Targets women, children and families.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YWCA LORAIN	Lorain	200 W 9th St, Lorain , OH 44052-1981 ~(440) 246-2002 ~ywcalorain.org/home.html	More Information	Targets women, children and families.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		
YWCA MEDINA COUNTY	Medina	4046 Medina Rd, Medina , OH 44256-9643 ~(330) 722-2020 ~www.ywca.org	More Information	Targets women, children and families.	Provides recreational, educational and health-related programs for youth, adults and families.			*	*		



**The Cleveland Clinic Foundation
9500 Euclid Avenue
Cleveland, Ohio 44195**

**2013 Community Health Needs Assessment
Implementation Strategy
As required by Internal Revenue Code § 501(r)(3)**

**Name and EIN of Hospital Organization Operating Hospital Facility:
The Cleveland Clinic Foundation # 34-0714585**

**Date Approved by
Authorized Governing Body:**

September 9, 2013

Authorized Governing Body:

**The Board of Directors
The Cleveland Clinic Foundation**

Contact:

**Cleveland Clinic
chna@ccf.org**

TABLE OF CONTENTS

I.	Introduction and Purpose	3
II.	Community Definition	4
III.	How Implementation Strategy was Developed.....	4
IV.	Goals of the Implementation Strategy	4
V.	Summary of the Community Health Needs Identified	4
VI.	Needs Hospital Will Address.....	5
VII.	Needs Hospital Will Not Address.....	8

THE CLEVELAND CLINIC FOUNDATION **2013 IMPLEMENTATION STRATEGY**

I. Introduction and Purpose

This written plan is intended to satisfy the requirements set forth in Internal Revenue Code Section 501(r)(3) regarding community health needs assessments and implementation strategies. The overall purpose of the implementation strategy process is to align the hospital's limited resources, program services and activities with the findings of the community health needs assessment ("CHNA").

A. Description of Hospital

The Cleveland Clinic Foundation ("Cleveland Clinic") is a non-profit multi-specialty academic medical center integrating outpatient clinical and hospital care with research and education. It is located in midtown Cleveland includes a 1288 staffed bed hospital, an outpatient clinic, medical school, a research institute, and 26 clinical institutes, and support labs and facilities in 46 buildings on 167 acres (the "Main Campus").

Cleveland Clinic patients represent the highest CMS case-mix index in the nation. Comprehensive services include: heart care, digestive disease, nephrology and urology, cancer, neurology, diabetes and endocrinology, ENT, rheumatology, gynecology, orthopedics and pulmonology. Cleveland Clinic has more than 3,000 staff physicians and scientists in 120 medical specialties providing care for more than 5 million patients across the system. Patients come to Cleveland Clinic locally, from all 50 states and more than 132 nations around the world.

Cleveland Clinic is the parent of the Cleveland Clinic health system that includes eight community hospitals, an affiliate hospital, a rehabilitation hospital for children, and more than 75 northern Ohio outpatient locations, including 16 full-service family health centers.

It is in a unique position, along with other national academic medical centers, to assess and address the health needs of both its communities and the public at large, and serve as a health resource for national and international patients.

Cleveland Clinic defines and measures community benefit (including financial assistance) using the Catholic Health Association ("CHA") community benefit model, which recommends reporting financial assistance on a cost basis. Using this model, in 2012 and 2011 Cleveland Clinic and its affiliates provided \$754 and \$693 million, respectively, in benefits to the communities they serve. The community benefit that Cleveland Clinic provides includes patient care provided on a charitable basis, research, education, Medicaid shortfall, subsidized health services and outreach programs. Cleveland Clinic's community benefit reports are available on our website at clevelandclinic.org/communitybenefit.

B. Hospital Mission

The Cleveland Clinic was established in 1921 with the same mission that continues today:

To provide better care for the sick, investigation of their problems and education of those who serve.

II. Community Definition

Cleveland Clinic's community is defined by mission and geography:

A. Patient Care

1. Local: 10 zip codes surrounding Main Campus
2. Regional: 56% of Main Campus patients, based on inpatient discharges, reside in seven Northeast Ohio counties: Cuyahoga, Geauga, Lake, Lorain, Medina, Portage, and Summit
3. State and Nation: Patients from Ohio, the Midwest, and the United States who require the expertise and specialized services of the Cleveland Clinic

B. Research

1. Medical research benefits the public at large

C. Education

1. Medical and community education benefit the public at large

III. How Implementation Strategy was Developed

This Implementation Strategy was developed by a team of members of senior leadership at the Cleveland Clinic representing several departments of the organization, including clinical administration, medical operations, finance, and community relations.

Each year, senior leadership at Cleveland Clinic will review this Implementation Strategy to determine whether changes should be made to better address the health needs of its communities.

IV. Goals of the Implementation Strategy

- A. **Community Focus:** Positively impact the health and wellbeing of the citizens in the communities we serve
- B. **Value:** Continually strive to increase the quality of care provided and the efficiency with which that care is delivered
- C. **Knowledge:** Actively support the efforts of researchers to discover knowledge and educators to train the next generation of health care professionals and build an engaged workforce

V. Summary of the Community Health Needs Identified

Secondary data, in-depth interviews with key stakeholders and input provided by six focus groups were reviewed to identify and analyze the needs raised by each source. The top health needs of the Cleveland Clinic communities are those that were both supported by secondary data, where available, and that were addressed by key stakeholders and focus groups. Some health needs, such as community services, could not be quantified by secondary data, but were identified as a top need based on the strong consensus of the key stakeholders and the focus group participants. Needs are listed in order of category (i.e., patient care, community services, research and education). See the Cleveland Clinic CHNA for more information: clevelandclinic.org/2013MainCHNA)

A. Patient Care

1. Chronic Diseases and Health Conditions
 - a. Heart-related diseases
 - b. Diabetes
 - c. Asthma
 - d. Obesity
2. Wellness
3. Specialty Care and Transfer Services
4. Access to Health Care
5. Access to Community Services
6. Economic and Community Development

B. Research

7. Medical Research

C. Education

8. Physician Shortage
9. Community Education

VI. Needs Hospital Will Address

A. Patient Care

1. Chronic Disease and Health Conditions:

- a. Heart-related diseases

Cleveland Clinic has been ranked America's number one center for cardiac care since 1995 by *U.S. News and World Report*. The Miller Family Heart & Vascular Institute at Cleveland Clinic is the largest in the United States and one of the largest cardiovascular and thoracic specialty groups in the world treating patients with heart, vascular, thoracic and esophageal conditions.

The Heart and Vascular Institute includes over 200 staff physicians, 110 residents, and 1200 full time nurses dedicated to the treatment of cardiovascular medicine, cardiovascular and thoracic surgery and related services. In addition to conditions affecting the heart and chest, Miller Family Heart & Vascular Institute at Cleveland Clinic also treats abdominal aortic aneurysms, carotid artery disease, venous disease, among other diseases and conditions.

The Heart and Vascular Institute's Section of Preventive Cardiology and Rehabilitation offers a multidisciplinary approach to preventing the occurrence or progression of cardiovascular disease: nutritional services, prescriptive exercise programs, stress testing, multiple cardiovascular risk reduction programs, peripheral vascular rehabilitation program in collaboration with Vascular Medicine, comprehensive cardiovascular care for women, and educational programs for patients and healthcare providers.

- b. Diabetes

The Cleveland Clinic Endocrinology & Metabolism Institute's Diabetes Center helps diabetic patients treat and manage diabetes and its long term complications, including eye problems, high blood pressure, and poor blood flow. The Diabetes Center was established in 2010 and education visits have steadily increased. In 2013, *U.S. News and World Report* ranked Cleveland Clinic 2nd in the nation for Diabetes and Endocrinology care for the second year in a row. The Institute's physicians and scientists continue to research new treatments for diabetes and the effects of bariatric surgery on diabetes.

c. Asthma

Cleveland Clinic's Asthma Center offers advanced diagnostic testing and innovative treatments for adults and children with asthma. The Center brings together physicians from various departments to provide patients with state-of-the-art diagnostic and treatment services and new treatments through medication and clinical trials.

d. Obesity

In 2011, Cleveland Clinic Bariatric & Metabolic Institute marked its seventh anniversary and continued to be accredited as a designated Bariatric Surgery Center of Excellence by the American Society for Metabolic & Bariatric Surgery and the American College of Surgeons. This designation is awarded to programs that meet high-quality standards and perform a minimum of 125 procedures annually.

2. Wellness

Cleveland Clinic offers outreach programs and community health talks to educate the community on a variety of topics including exercise, healthcare navigation, stress management, nutrition, and smoking cessation to promote health and wellness, increase access to healthcare resources, and reduce disease burden. Cleveland Clinic offers chronic disease management classes, farmers markets, urban gardens, neighborhood cooking classes and walking programs throughout its community, at its main campus and family health centers. For example, Langston Hughes Wellness and Education Center in Fairfax offers daily wellness classes from Cleveland Clinic health professionals at no charge to community residents. In addition, Cleveland Clinic collaborates with local schools and businesses to implement programs to decrease childhood and adult obesity and communicates with patients and community residents through newsletters, social media and healthcare advocacy groups to provide additional tools for health promotion.

3. Specialty Care and Transfer Services

Cleveland Clinic uses Mobile ICU, helicopter and jet services to support critically ill and injured patients throughout the nation and around the world. The units are staffed according to the needs of the patient. The Critical Care Transport team makes over 4500 transports a year on average and has transported patients from over 40 states and 20 countries.

4. Access to Health Care

Cleveland Clinic is continually seeking to improve patients' health and access to health care. This section describes a few of the ways that the Clinic enhances access to health care:

Cleveland Clinic provides medically necessary services to all patients regardless of race, color, creed, gender, country of national origin or ability to pay. Cleveland Clinic has a financial assistance policy that is among the most generous in the region that covers both hospital services and physician services provided by physicians employed by the Cleveland Clinic. The financial assistance policy can be found here: <http://my.clevelandclinic.org/Documents/Patients/patient-financial-services-assistance.pdf>

Cleveland Clinic is continually working to improve its scheduling and support service model to provide consistent experience, improve metrics, and increase efficiency including providing Internet scheduling, accelerating technology implementation and scheduling training. Cleveland Clinic commenced an ongoing effort to add call support personnel at its Institutes to support the call volume and improve access to care.

Cleveland Clinic continually strives to improve patient's access to care by opening family health centers in its regional community (e.g., Stephanie Tubbs Jones Health Center in East Cleveland, Richard E. Jacobs Family Health Center in Avon and Twinsburg Family Health Center opened in 2011).

Cleveland Clinic has created a "Patient-Centered Medical Home" (PCMH) in Internal Medicine and Family Medicine to enhance chronic disease management and prevention and patients' relationship with and access to their physician. PCMP is a model of care, a value-based healthcare concept, where patients have a direct relationship with a provider who coordinates a cooperative team of healthcare, whether a patient is at the doctor's office, hospitalized or recuperating at home, through ongoing preventative care. The physician lead team offers consistent, coordinated care and communication among caregivers and the patient, and arranges for specialty care whenever needed. Caregivers that may be included: Primary Care or Specialty Physicians, Community Based Providers, Nurse Practitioners, Physician Assistants, Medical Assistants, Registered Nurses, Care Coordinators and Pharmacists. PCMH focuses on encouraging healthy behavior, providing a proactive "care pathway" for illnesses and procedures and increasing quality of health. Cleveland Clinic has rolled out a split-flow model for its main campus Emergency Department shortening the time to physician and overall length of stay and placing patients in areas devoted to their unique needs to improve length of stay, patient satisfaction and outcomes.

B. Research

Research is conducted throughout the Cleveland Clinic and its Main Campus. Physicians and scientists in the Lerner Research Institute ("LRI") engage in laboratory-based, translational and clinical research. LRI approves all clinical trials conducted throughout the Cleveland Clinic and health system and its goal is to understand the underlying causes of human diseases and to develop new treatments and cures. Basic science researchers at LRI collaborate with physicians to facilitate bench-to-bedside science and accelerate discoveries that have a direct impact on patient care. Research programs focus on eight types of diseases: cardiovascular, cancer, neurologic, musculoskeletal, allergic and immunologic, eye, metabolic, and infectious diseases. Genomic medicine and personalized healthcare are newly established areas of expertise that are expected to revolutionize the way we prevent and treat disease. An entire department dedicated to quantitative sciences uses technology to expedite research and improve the health care process.

Approximately 2,000 people work in 13 departments at LRI. In 2012, Cleveland Clinic scientists conducted more than 2,000 clinical trials and generated 83 invention disclosures, 10 new licenses, and 35 patents.

C. Education

1. Physician Shortage

Cleveland Clinic educates physicians, residents and medical students throughout Main Campus. For example, the Education Institute hosts continuing medical education classes, grand rounds, and over 60 accredited residency programs. In addition, Cleveland Clinic established the Cleveland Clinic Lerner College of Medicine of Case Western Reserve University (CCLCM) in partnership with Case Western Reserve University in 2002. CCLCM is a unique 5-year medical school training physicians interested in medical research that sets standards for the training of physician investigators through innovative approaches to the integration of basic science,

research and clinical medicine. CCLCM enrolled its first students in 2004 and accepts 32 students each year. Cleveland Clinic grants full scholarships for all its students.

Cleveland Clinic also educates independent community physicians throughout Northeast Ohio. Cleveland Clinic's Quality Alliance works to integrate the affiliated independent physicians with the Cleveland Clinic employed physicians to improve efficiency, safety, clinical quality, clinical processes and outcomes delivered to patients in Northeast Ohio. The Quality Alliance will continue to refine clinical metrics, measure and report protocols, and recruit additional physicians.

2. Community Education

Through its Global Leadership Academy, Cleveland Clinic offers healthcare leadership development and management training to non-affiliated healthcare executives. Cleveland Clinic Main Campus also offers team building activities to healthcare professionals through its Center for Multidisciplinary Simulation.

Cleveland Clinic's Office of Civic Education Initiatives provides healthcare education and workforce development for students K -12 through internships and primary education programs.

For some of the other community education activities offered by the Cleveland Clinic, see Section VI.A. 2 of this implementation strategy discussing Wellness.

VII. Needs Hospital Will Not Address

Cleveland Clinic identified certain health needs in the Community Health Needs Assessment that, although important and may impact a person's health status, do not relate directly to the delivery of health care and/or are needs for which other governmental or nonprofit agencies have the expertise necessary to address these needs.

See Appendix G Inventory of Available Resources of the CHNA for additional detail on the organizations and programs, including those affiliated with the Cleveland Clinic and the health system that are located within the Cleveland Clinic community and capable of addressing these needs.

Cleveland Clinic cannot directly address the following community needs identified in the Community Health Needs Assessment:

A. Access to Community Services

This need relates to the availability and awareness of community services offered by governmental and non-profit organizations unrelated to the Cleveland Clinic. Therefore, the hospital will not address this need in its implementation strategy.

Although it cannot directly address this need, Cleveland Clinic does and will continue to collaborate with and support other community organizations to help them address this need.

B. Economic and Community Development

The need for Economic and Community Development, including more housing options, readily accessible transportation and grocery stores, and better employment and crime rates, was identified as a need in the CHNA.

Cleveland Clinic cannot focus or otherwise address the need for transportation or other community service unrelated to the delivery of health care. Although Cleveland Clinic is not directly involved with developing community infrastructure and improving the economy because its mission relates to healthcare and medical research and education, it does and will continue to support local chambers of commerce and community development organizations, collaborate with leaders of regional economic improvement and provide in-kind donation of time, skill and /or sponsorships to support efforts in these areas.

In addition, Cleveland Clinic employs over 22,620 physicians and other caregivers at its main campus hospital and family health centers and provides an overall economic benefit to the community.