





2013 Community Health Needs Assessment-South Pointe Hospital

Founded in 1957, South Pointe Hospital is an acute care community teaching hospital with 173 staffed beds, offering advanced medical and surgical care, sophisticated technology, research and education. The hospital has specialties in cardiology, cancer, diabetes, gastroenterology, orthopaedics, pain management, radiology, urology and wound care. The facility has been designated as a Primary Stroke Center by the Joint Commission. South Pointe Hospital has been part of Cleveland Clinic since 1997.

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 supporting 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.

South Pointe Hospital has identified four of these needs in its CHNA: Chronic Disease, Access to Affordable Health Care, Access to Community Services, and Economic and Community Development.

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



February 24th, **2012**



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Introduction -

South Pointe Hospital, a 213-bed community hospital located in Warrensville Heights, OH, in response to its community commitment, contracted with Tripp Umbach to facilitate a comprehensive Community Health Needs Assessment (CHNA). The community health needs assessment was conducted between February and June 2011. South Pointe Hospital is a member of the Cleveland Clinic Health System. During the community health needs assessment process, South Pointe Hospital collaborated with other hospitals comprising the Cleveland Clinic Health System:

- Lakewood Hospital
- Hillcrest Hospital
- ☐ Fairview Hospital
- Euclid Hospital
- Marymount Hospital
- Lutheran Hospital
- Cleveland Clinic Main Campus
- Medina Hospital
- Cleveland Clinic Children's Hospital
- ☐ Cleveland Clinic Children's Hospital for Rehabilitation
- Cleveland Clinic Florida

This report fulfills the requirements of a new federal statute established within the Patient Protection and Affordable Care Act (PPACA) requiring that non-profit hospitals conduct community health needs assessments every three years. The community health needs assessment process undertaken by South Pointe Hospital, with project management and consultation by Tripp Umbach, included extensive input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of public health issues. Tripp Umbach worked closely with senior leadership from South Pointe Hospital, members of the hospital's community advisory council and with a project steering committee consisting of senior leaders from the Cleveland Clinic to accomplish the assessment. This report represents one in a series of 12 community health needs assessment documents being completed by Tripp Umbach for each of the Cleveland Clinic hospitals in Northeast Ohio, as well as one Cleveland Clinic Health System-wide document in Northeast Ohio.

Community Definition

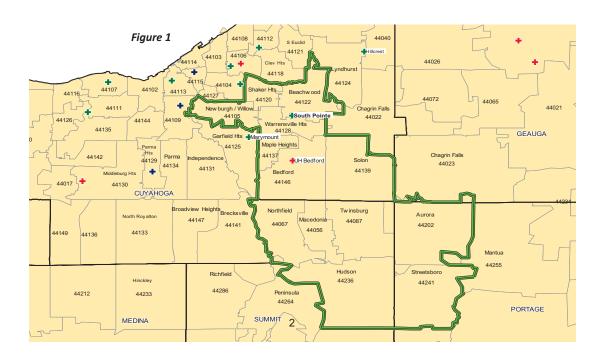
While community can be defined in many ways, for the purposes of this report, the South Pointe Community is comprised of 13 zip code areas covering portions of Cuyahoga, Portage and Summit County in Northeast Ohio containing 80% of the hospital's inpatient volumes (see Figure 1 & Table 1).

South Pointe Hospital Community Zip Codes

Table 1

Zip	Community	County
44105	Union/Miles – Newburgh Heights	Cuyahoga
44120	Shaker Heights	Cuyahoga
44122	Beachwood	Cuyahoga
44128	Warrensville Heights	Cuyahoga
44137	Maple Heights	Cuyahoga
44139	Solon	Cuyahoga
44146	Bedford	Cuyahoga
44202	Aurora	Portage
44241	Streetsboro	Portage
44056	Macedonia	Summit
44067	Northfield	Summit
44087	Twinsburg	Summit
44236	Hudson	Summit

South Pointe Hospital Community Map



Consultant Qualifications

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 books^[1] on the topic of community health and has presented at more than 50 state and national community health conferences.

http://www.haponline.org/downloads/HAP_A Guide for Assessing and Improving Health Status_Ap_ple_Book_1993.pdf and

A Guide for Implementing Community Health Improvement Programs:

http://www.haponline.org/downloads/HAP A Guide for Implementing Community Health Improve ment Programs Apple 2 Book 1997.pdf

^[1] A Guide for Assessing and Improving Health Status Apple Book:

Project Mission-

The mission of the South Pointe Hospital CHNA is to understand and plan for the current and future health needs of residents in its community. The goal of the 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 is meaningful engagement and input from a broad cross-section of community-based organizations, who were partners in the community health needs assessment.

Care Act (PPACA).

Objectives -

The objective of this assessment is to gather traditional health-related indicators, as well as social, demographic, economic and environmental factors. The overall objective of the CHNA is summarized by the following areas:

Obtaining information on population health status, as well as socio-economic and environmental factors,
 Assuring that community members, including underrepresented residents, were included in the needs assessment process,
 Identifying key community health needs within the hospital's community, along with an inventory of available resources within the community that may provide programs and services to meet such needs, and
 Developing a CHNA document as required by the Patient Protection and Affordable

Methodology-

Tripp Umbach facilitated and managed a comprehensive community health needs assessment on behalf of South Pointe Hospital — resulting in the identification and prioritization of community health needs. The assessment process included input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge and expertise of public health issues.

Key data sources in the community health needs assessment included:

- ☐ Community Health Assessment Planning: A series of meetings were facilitated by the consultants and CHNA project team consisting of leadership from the Cleveland Clinic Health System and South Pointe Hospital.
- Secondary Data: The health of a community is largely related to the characteristics of its residents. An individual's age, race, gender, education and ethnicity often directly or indirectly impact health status and access to care. Tripp Umbach completed comprehensive analysis of health status and socio-economic environmental factors related to the health of residents of the South Pointe Hospital community from existing data sources such as state and county public health agencies, the Centers for Disease Control and Prevention, Healthy People 2020 and other additional data sources.
- Interviews with Key Community Stakeholders: Tripp Umbach worked closely with hospital leadership to identify leaders from organizations that have special knowledge and or expertise in public health. Such persons were interviewed as part of the needs assessment planning process. A series of 11 interviews were completed with key stakeholders in the South Pointe Hospital community. Organizations represented are included in Appendix A.
- Focus Groups with Community Residents: Tripp Umbach worked closely with hospital leadership to assure that community members, including underrepresented residents were included in the needs assessment planning process via a series of three focus groups conducted by Tripp Umbach in the South Pointe Hospital community. Focus group audiences were defined by hospital leadership utilizing secondary data to identify health needs and deficits in targeted populations. Focus group audiences included: Residents Familiar with Diabetic Issues, Underinsured or Uninsured Representatives and Senior Residents.

- Identification of top community health needs: Top community health needs were identified by analyzing secondary data, key stakeholder interviews and focus group input. The analysis process identified the health needs revealed in each data source. Tripp Umbach followed a process where the top needs identified in the assessment were supported by secondary data, when available, and strong consensus provided by both key community stakeholders and focus group participants.
- Inventory of Community Resources: Tripp Umbach completed an inventory of community resources available in the South Pointe Hospital community 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 South Pointe Hospital community (40105, 44120, 44122, 44128, 44137, 44139, 44146, 44202, 44241, 44056, 44067, 44087, and 44236) more than 85 community resources were identified with the capacity to meet the three community health needs identified in the South Pointe Hospital CHNA.
- ☐ Final Community Health Needs Assessment Report: A final report was developed that summarizes key findings from the assessment process and an identification of top community health needs. In addition to this report prepared for South Pointe Hospital, a system-wide report is being developed for the Cleveland Clinic Health System.

Key Community Health Needs -

Tripp Umbach's independent review of existing data, in-depth interviews with community stakeholders representing a cross-section of agencies, and detailed input provided by three community focus groups resulted in three key community health needs in the South Pointe Hospital community that are supported by secondary and or primary data. The needs identified include: 1) Adequate awareness among residents about how to access community services, 2) Adequate community infrastructure, and 3) Access to affordable healthcare (not listed in any specific order). Lack of awareness of services is a major driver of low utilization of programs and services. A summary of the top three needs in the South Pointe Hospital community follows:

■ ADEQUATE COMMUNITY AWARENESS AND COHESIVENESS

Underlying factors identified by primary input from community stakeholders and focus groups with residents: Need for awareness among residents about how to access community services.

- ✓ The absence of collaboration at all levels in the South Pointe Hospital community has caused a lack of outreach efforts and awareness about available programs and services as well as ineffective dissemination of information. Community stakeholders feel there is a lack of awareness among residents about how to access community services. Often when residents are unaware of available services, the result is a lack of participation in those services, an underserved population and unmet needs.
- ✓ Community stakeholders identified "residents and businesses functioning cohesively" as significant to the definition of a healthy community.
- ✓ Community focus group participants felt many residents are unaware of available resources, events, programs and services in the community due to a lack of advertisement and outreach. Participants felt residents' access to prevention and outreach programs is limited due to a lack of funding, a lack of insurance, insurance restrictions, and a lack of programming offered by hospitals and community-based organizations (i.e., community health fairs).
- Community focus group participants also felt the dissemination of information is ineffective in their communities due to a high volume of disorganized, duplicated and irrelevant information being received, as well as a lack of information sharing among residents in the community. Additionally, they felt that some

residents do not have access to the information outlets that are used throughout the community, such as cable channels and the internet.

■ ADEQUATE INFRASTRUCTURE

Underlying factors identified by secondary data and primary input from community stakeholders and focus groups with residents: Need for adequate community infrastructure.

- The communities South Pointe Hospital serves have experienced funding cuts locally due to state budget decreases. Community stakeholders and focus group participants are concerned with the stability of the infrastructure in their communities due to the decrease in resources. The impact of recent funding cuts include closing of community-based organizations, elimination of services and reduction in the number of clients that can be served, ultimately causing an overall reduction in community services that are available to meet the needs of residents resulting in unmet needs.
- ✓ The South Pointe Hospital community is a contrast of "higher need" and "lower need" areas. The northern zip code areas of the community generally have a greater number of socio-economic barriers impacting community health compared to the southern zip code areas. The northern zip code areas of the community generally record higher CNI scores compared to the south.¹
 - The unemployment rate is highest within the Union/Miles Newburgh Heights area (44105) over 16%.
 - In contrast, Twinsburg (44087) and Solon (44139) have unemployment rates below 4%. Solon (44139) has an uninsured rate of 4.2%.
- ✓ Union/Miles Newburgh Heights (44105), Shaker Heights (44120), and Bedford (44146) are specific higher need communities.
 - Union/Miles Newburgh Heights (44105) has the highest rate of uninsured citizens (25.1%) and citizens with no high school diploma (26.1%).
 - More than 50% of single family households in Union/Miles Newburgh Heights record annual incomes below poverty levels.

¹ CNI quantifies five socio-economic barriers to community health utilizing a 5-point index scale where 5 indicate the greatest need and 1 indicates the lowest need. The five prominent socio-economic barriers to community health quantified in CNI include: Income, Culture/Language, Education, Insurance and Housing.

- More than 45% of the occupied homes in Shaker Heights (44120) are renter-occupied.
- Community stakeholders indicated some of their communities have poor infrastructures. Specifically, stakeholders expressed concern about limited housing, the poor conditions of roads and sidewalks, and a lack of parks and recreation centers resulting in displaced citizens, reduced property values and a decrease in community cohesiveness. An increase in citizens age 65 and older has strained resources throughout the areas served by South Pointe Hospital. Older citizens utilize a disproportionate amount of community resources due to the inability to be fully self-sufficient. An aging population in the communities South Pointe Hospital serves requires additional community resources to meet the needs of an at-risk population. Some of these needs include transportation and general homeowner maintenance that is necessary to ensure public safety. More than 25% of the population 65 and older in Union/Miles Newburgh Heights (44105), Shaker Heights (44120), and Bedford (44146) record annual incomes below poverty level.
- Community stakeholders perceive a lack of prevention education and an absence of healthy food options in their communities due to the absence of grocery stores, prevalence of fast food restaurants and lack of health education and outreach efforts. Access to healthy food was identified by community stakeholders as significant to the definition of a healthy community.
- ✓ All three community focus groups identified the need for adequate community services. Specifically, focus group participants perceive a lack of adequate community services due to funding cuts in the areas of transportation and services for underinsured/uninsured individuals causing a decrease in mobility and financial resources. Overall, the absence of convenient transportation limits the mobility of a community, limiting access to healthy food options, decreasing resident productivity and increasing health risks. Limited access to public transportation also decreases participation in community services, events, programs and health services.
- ✓ Community stakeholders and focus group participants agreed that the lack of adequate community infrastructure is causing a decrease in financial resources. Specifically, the impact of a weak economy on the communities South Pointe Hospital serves has caused an increase in unemployment due to a lack of sustainable jobs. Job loss coupled with a higher cost of living has resulted in an

overall decrease in the socio-economic status of many residents; making it difficult to afford higher local, state and federal taxes.

■ ACCESS TO AFFORDABLE HEALTHCARE AND ADEQUATE MEDICAL SERVICE PROVISION

Underlying factors identified by secondary data and primary input from community stakeholders and focus groups with residents: High cost of healthcare and ineffective dissemination of information:

- Community stakeholder interview findings support secondary data that access to primary and preventive healthcare services is an important community health priority. Specifically, stakeholders mentioned the following elements relating to residents' access to healthcare that a healthy community should have:
 - Access to quality healthcare
 - Adequate healthcare
 - Ability to identify thresholds for disease
 - Hospital services
 - Good preventive primary care
 - Accessible primary care facilities
- Community focus group participants identified the lack of adequate community services for underinsured/uninsured individuals. Participants believe there is an absence of affordable uninsured health services (i.e., dental and primary, preventive and emergency medical), and cumbersome eligibility requirements for subsidized services. The lack of access to affordable uninsured health services coupled with the increased use of those services by underinsured/uninsured residents causes increased costs for hospitals.
- Community focus group participants expressed problems in communicating with medical staff and a lack of access to medical doctors. Select participants suggested they do not receive adequate information about their health status during medical appointments. The inability to secure a same-day medical appointment, being referred to the emergency room instead of seeing a doctor, seeing a resident and/or a qualified nurse instead of a doctor and seeing a different doctor each visit has caused participants to feel uninformed about their medical treatment. A select number of focus group participants suggested specialists and surgeons in the medical community offer little to no communication. These factors contribute to participants feeling uninformed.

- ✓ The increased prevalence of specific chronic diseases in the South Pointe Hospital community indicates diseases that could be prevented through increased availability of preventive education and primary care. Hypertension prevalence in the South Pointe Hospital community (333 cases per 1,000 pop.) is much higher than Ohio (286). Diabetes, strokes and weak/failing kidneys are also more prevalent in the South Pointe Hospital community than the service counties and Ohio.
- ✓ The high PQI² scores for low birth-weight and congestive heart failure suggest increased education regarding preventive care has the potential to decrease the prevalence of avoidable hospitalizations and improve overall community health.

² 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 market and Ohio. The PQI index identifies potentially avoidable hospitalizations for the benefit of targeting priorities and overall community health.

Secondary Data

Tripp Umbach worked collaboratively with the Cleveland Clinic to develop a secondary data process focused on three phases: collection, analysis and evaluation. Tripp Umbach obtained information on the health status and socio-economic and environmental factors related to health and needs of residents of multi-community service areas comprising each of the Cleveland Clinic Hospitals. Example data sources included the Behavioral Risk Factor Surveillance System (BRFSS), Healthy People 2020 and other existing state and regional data sources. The process developed accurate comparisons to the state baseline of health measures utilizing the most current validated data. In addition to disease prevalence and health behavior data, specific attention was focused on the development of two key community health index factors; Community Need Index (CNI) and Prevention Quality Indicators Index (PQI).

Community Need Index (CNI)

In 2005 Catholic Healthcare West, in partnership with Thomson Reuters, pioneered the nation's first standardized Community Need Index (CNI)³. 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 existing assessment methods in 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, Insurance, Education, Culture/Language and Housing. CNI quantifies the five socio-economic barriers to community health utilizing a 5-point index scale where a score of 5 indicates the greatest need and 1, the lowest need.

The CNI zip code summary provides the community hospital with valuable background information to begin addressing the community needs. Union/Miles — Newburgh Heights (44105) records the highest CNI score (greatest need) within the South Pointe community. A closer look at the Union/Miles — Newburgh Heights (44105) area reveals the highest unemployment and uninsured rates, highest percentage of individuals without a high school diploma and highest rates of families living in poverty within the South Pointe Hospital community. The CNI provides greater ability to diagnose community need as it explores areas with significant barriers to healthcare access. The overall unemployment rate for the South Pointe Hospital community is 8.1%; below the national unemployment rate currently fluctuating around 9%. The unemployment rate for Union/Miles — Newburgh Heights (44105) is 16.7%, more than double the South Pointe Hospital community, state and national levels.

[&]quot;Community Need Index." Catholic Healthcare West Home. Web. 16 May 2011. http://www.chwhealth.org/Who_We_Are/Community_Health/STGSS044508>.

			Income	Insurance	Education	Cultural	Housing	CNI
Zip	Community Name	County	Rank	Rank	Rank	Rank	Rank	Score
44105	Union/Miles –							
44103	Newburgh Heights	Cuyahoga	5	5	4	5	5	4.8
44120	Shaker Heights	Cuyahoga	4	4	2	5	5	4.0
	Warrensville							
44128	Heights	Cuyahoga	3	4	3	5	5	4.0
44146	Bedford	Cuyahoga	3	3	2	5	5	3.6
44122	Beachwood	Cuyahoga	2	2	1	5	4	2.8
44137	Maple Heights	Cuyahoga	2	3	2	5	2	2.8
44241	Streetsboro	Portage	1	2	1	2	4	2.0
44087	Twinsburg	Summit	1	2	1	2	3	1.8
44139	Solon	Cuyahoga	1	1	1	3	1	1.4
44202	Aurora	Portage	1	1	1	2	2	1.4
44236	Hudson	Summit	2	1	1	2	1	1.4
44056	Macedonia	Summit	1	1	1	2	1	1.2
44067	Northfield	Summit	1	2	1	1	1	1.2
South Pointe Hospital Community								
Summary			3	3	2	5	4	3.4

Table 2 Source: Data from Thomson Reuters – Index prepared for Tripp Umbach

The South Pointe Hospital community is a contrast of "higher need" and "lower need" areas. The northern zip code areas of the community generally have a greater number of socioeconomic barriers impacting community health compared to the southern zip code areas. The unemployment rate is highest within the Union/Miles – Newburgh Heights area (44105), over 16%. In contrast, Twinsburg (44087) and Solon (44139) have unemployment rates below 4%. Solon (44139) has an uninsured rate of 4.2%.

Union/Miles – Newburgh Heights (44105), Shaker Heights (44120), Warrensville Heights (44128) and Bedford (44146) are specific higher need communities.

- ✓ Union/Miles Newburgh Heights (44105) has the highest rates of uninsured citizens (25.1%) and citizens with no high school diploma (26.1%).
- ✓ More than 50% of single-family households in Union/Miles Newburgh Heights record annual incomes below poverty level.
- ✓ More than 45% of the homes in Shaker Heights (44120) are renter-occupied.

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 market and Ohio. The PQI index identifies potentially avoidable hospitalizations for the benefit of targeting priorities and overall community health.

The quality indicator rates are derived from inpatient discharges by zip code using ICD diagnosis and procedure codes. There are 14 quality indicators. Lower index scores represent fewer admissions for each of the PQIs.

- ✓ PQI scores in the South Pointe Hospital community are at or above Ohio for most factors. Table 3 illustrates the only areas in which the South Pointe Hospital community has higher rates.
- ✓ The Low Birth-Weight PQI is four times higher in the South Pointe Hospital community than Ohio. Additional PQI scores higher in the South Pointe Hospital community compared to Ohio include congestive heart failure; adult asthma and urinary tract infection (see Table 3).

Prevention Quality Indicators (PQI)	South Pointe Service Area	Ohio	Difference
Low Birth-Weight	5.36	1.21	+4.15
Congestive Heart Failure	6.94	4.66	+2.28
Adult Asthma Admission	3.63	1.99	+1.64
Urinary Tract Infection	3.81	2.66	+1.15

Table 3 Source: Ohio Hospital Association Data – Calculations by Tripp Umbach

Disease Prevalence, Health Behaviors & Penetrating Trauma

Data for disease prevalence and health behaviors 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 healthcare access primarily related to chronic disease and injury. BRFSS data were provided by Thomson Reuters.

- ✓ Hypertension prevalence in the South Pointe Hospital community (333 cases per 1,000 pop.) is much higher than any of the service counties (highest at 316) or Ohio (286).
- ✓ Diabetes, strokes and weak/failing kidneys are more prevalent in the South Pointe Hospital community than the service counties and Ohio.
- ✓ The South Pointe Hospital community shows lower rates of obesity, smoking, and depression as compared to service counties and Ohio. The smoking rate for the South Pointe Hospital communities (241 per 1,000 pop.) is substantially lower than all local counties and Ohio (269).
 - ➤ However, the South Pointe Hospital community shows higher rates of high blood pressure (289 per 1,000 pop.) compared to Ohio (274).

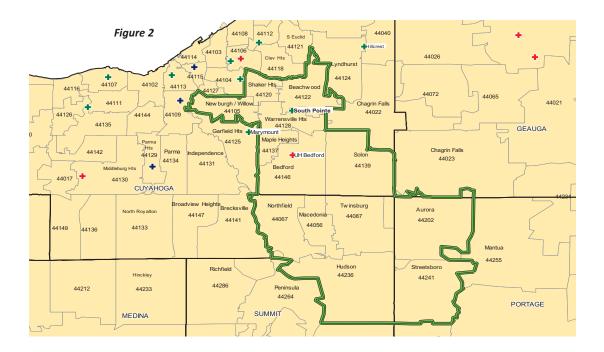
Tripp Umbach collected statistical data from the Ohio Trauma Registry, also known as OTR, a Division of Emergency Medical Services within the Ohio Department of Public Safety. The data refers to all trauma cases resulting in severe injury occurring in Ohio during 2010. OTR trauma data provides the ability 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. 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.

✓ The South Pointe Hospital community has a penetrating trauma rate of 9.7%. The penetrating trauma rate for people residing in the South Pointe Hospital community is higher than the three service counties (Cuyahoga County was the highest of the three service counties at 8.7% and Ohio (6.7%).

Additional data and greater detail related to the secondary data analysis of the South Pointe Hospital Community is available in Appendix B.

Demographic Profile

South Pointe Hospital Community Geographic Definition



<u>Demographic Profile – Key Findings:</u>

- ✓ Hospital community is defined as a zip code geographic area based on 80% of the hospital's inpatient volumes. The South Pointe Community is comprised of 13 zip code areas covering portions of Cuyahoga, Portage and Summit Counties in Northeast Ohio.
- ✓ Gender, Age, Percentages of Families living in poverty and Insurance spread within the South Pointe Hospital community are consistent with service counties and Ohio.
- ✓ The South Pointe Hospital community has a slightly higher percentage of African American citizens and citizens with a Bachelor's degree and above as compared to the service counties and Ohio.
- ✓ Average and median household income levels are slightly higher for citizens in the South Pointe Hospital community as compared to the service counties and Ohio.
- ✓ The South Pointe Hospital community unemployment rate (8.1%) is slightly higher than the overall Ohio rate (7%) and less than the national rate (approximately 9%).

Key Stakeholder Interviews -

Tripp Umbach worked collaboratively with the South Pointe Hospital executive leadership project team to develop a comprehensive list of community stakeholders. Stakeholders were selected based on their involvement within the community and their participation in overall community health. The following qualitative data were gathered during individual interviews with 11 stakeholders of the South Pointe area. Each interview was conducted by a Tripp Umbach consultant and lasted approximately 60 minutes. All respondents were asked the same set of questions developed by Tripp Umbach and reviewed by the South Pointe Hospital executive leadership project team (see Appendix C).

The 11 stakeholders identified the following problems and/or barriers as preventing the residents of the South Pointe area from achieving their vision of a healthy community. A high level summary of community health issues identified by community stakeholders include:

■ LACK OF RESIDENT PARTICIPATION

✓ Stakeholders suggested residents generally avoid participation in activities promoting community and public school system improvement. It is difficult for families with young children to maintain and promote healthy lifestyles for their children. Lack of active resident participation may also be a result of limited awareness, time, commitment and resources.

Stakeholders felt there is a high prevalence of single-parent households in their communities. Often single parents who do not have support from their own families or the community become isolated and lack the time, energy and resources to be a role model for healthy behaviors and/or be heavily involved in meeting their child(ren)'s needs. A lack of involvement and role modeling from parents and community members in the lives of children often results in unhealthy behavior (e.g., exercise and eating habits), delinquency, unidentified needs, miscommunication and an overall negative impact on child physical and mental health, crime and educational performance and attainment.

Stakeholders also felt there was a lack of awareness among residents about how to access community services. Often when residents are unaware of available services the result is a lack of participation in those services, an underserved population and unmet needs.

■ FINANCIAL RESOURCES ARE SCARCE

✓ Ohio is one of 46 states and the District of Columbia that have had to cut their state budget since 2008. Similar to many communities in Ohio, the communities South

Pointe Hospital serves have felt the decrease in state budget through funding cuts locally which has required communities to raise taxes. A tax increase has allowed communities to continue providing services, but has also increased the cost of living for residents.

Additionally, the impact of a weak American economy on the communities South Pointe Hospital serves has caused an increase in unemployment due to a lack of sustainable jobs. Job loss coupled with a higher cost of living has resulted in an overall decrease in the socio-economic status of many residents; making it difficult to afford higher local, state and federal taxes. Often when residents find it is unaffordable to live in an area, they must move to a more affordable community. An out-migration of residents ultimately causes a reduction in population and a further reduction in local revenue, resources and available services.

■ MEETING THE NEEDS OF AN AGING POPULATION

An increase in citizens age 65 and older due to an aging Baby Boom generation coupled with an increase in life expectancy has strained resources throughout America including the areas served by South Pointe Hospital. Older citizens utilize a disproportionate amount of community resources due to the inability to be self-sufficient. An aging population in the communities South Pointe Hospital serves requires additional community resources to meet the needs of an at-risk population. Some of these needs include transportation and general homeowner maintenance (i.e., mowing and snow removal) that is necessary to ensure public safety. If these needs cannot be met, the result is often higher risk of accident-related injuries, an increase in the presence of common pests (i.e., insects and rodents) and a decrease in the aesthetic value of neighborhoods.

■ LACK OF ACCESS TO AND EDUCATION ABOUT HEALTHY OPTIONS

✓ Due to the role environment and behavior play in the cause and exasperation of chronic diseases (i.e., cancer, diabetes and heart disease) prevention education can be an effective method in their treatment and prevention. Stakeholders perceive a lack of prevention education and an absence of healthy options in their communities due to the absence of healthy grocery stores, prevalence of fast food restaurants and lack of health education and outreach efforts. Often when prevention services are lacking in a community residents are at greater risk of injury and poor physical and mental health due to a lack of awareness about effective preventive methods. Additionally, communities that have little or no access to healthy food options often have residents with poorer health than those with access to healthy food options.

The lack of access to and education about healthy options causes residents to have poorer health and require the use of health services more often.

POOR INFRASTRUCTURE

✓ Stakeholders indicated some of their communities have poor infrastructures. Specifically, stakeholders expressed concerns about limited housing, the poor condition of roads and sidewalks, and a lack of parks and recreation centers resulting in displaced citizens, reduced property values, a decrease in community cohesiveness and an increased risk of injury, damage to personal property, and poor physical and mental health.

Since the real estate bubble burst in 2006 home ownership has decreased, real estate prices have plummeted, development has halted and the cost of rent and rate of foreclosure has increased across the nation. Most communities, including those served by South Pointe Hospital, have been negatively impacted by the current real estate climate. The real estate crisis has caused displaced citizens, an increase in homelessness, multiple generation households and renters, as well as a decrease in home ownership negatively impacting property values and community cohesiveness. For these reasons, stakeholders identified limited housing as a concern in their communities.

Stakeholders also felt the condition of the sidewalks and roads in some of their communities was poor and not adequate to meet the needs of the current population. Often when sidewalks and roads are poorly maintained, they pose a risk of vehicle damage and physical injury to residents. When investment in infrastructure does not keep pace with population growth, the result is heavier traffic and a consequential increase in commuter delays. Poor sidewalk and road conditions can result in an increase in residents' dissatisfaction, vehicle maintenance costs and the need for medical services including emergency services.

Additionally, stakeholders felt there was a lack of available parks and recreation centers for residents to use. The absence of available parks and recreation centers may cause a reduction in residents' participation in outdoor activities and physical exercise, both of which have been proven to improve physical and mental functioning. The absence of physical exercise and limited sun exposure has been proven to have a negative impact on physical and mental health resulting in an increase in the need for medical and mental health services.

■ RESIDENTS DO NOT FEEL SAFE

✓ Stakeholders indicated they suspect a number of residents do not feel safe in their communities due to an inflated perception of present crime rates. Stakeholders felt the crime rate is much lower than residents perceive it to be. However, if residents feel a community is unsafe, they are more likely to move to a community they perceive to offer more safety, causing an out-migration of residents that have access to resources (i.e., residents with large amounts of disposable income and/or good enough credit to secure home loans). A perceived lack of safety could ultimately cause a reduction in population and a further reduction in local revenue, resources and available services.

■ POOR EDUCATIONAL OUTCOMES WITHIN THE PUBLIC SCHOOL SYSTEM

✓ Stakeholders felt the public school system has been challenged over recent years resulting in poor educational outcomes for children of their community. A lack of quality education results in poor academic performance and attainment, ultimately impacting future employment opportunities and earnings. Additionally, residents with school-aged children may choose to move to another community in search of higher quality educational institutions. Insufficient educational options in a community could mean a long-term decline in the local economy due to poor educational attainment, lower earning potential and an out-migration of residents.

Barriers to a healthy community were addressed during the interview, as respondents were encouraged to describe a healthy community. There were six themes identified upon review of the stakeholders' collective definitions of a healthy community. These were: Access to Healthy Food, Access to Healthcare, Recreational Opportunities, Physically and Mentally Healthy Residents, A Strong Economy and Educational Opportunities.

- ACCESS TO HEALTHY FOOD was identified by six stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to access to healthy food that a healthy community should have:
 - ✓ Quality healthy food that is readily available to its residents
 - ✓ Access to fresh foods
 - ✓ Grocery stores
 - ✓ Gardening throughout the community

- ACCESS TO HEALTHCARE was identified by five stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to access to healthcare that a healthy community should have:
 - ✓ Access to quality healthcare
 - ✓ Adequate healthcare
 - ✓ Ability to identify thresholds for disease
 - ✓ Hospital services
 - ✓ Good preventive primary care
 - ✓ Accessible primary care facilities
 - ✓ Available and flexible office appointments
 - ✓ Continuing care
 - ✓ Confidence in the community hospital
- RECREATIONAL OPPORTUNITIES were identified by five stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to recreational opportunities that a healthy community should have:
 - ✓ Recreational facilities
 - ✓ Recreational activities for the residents
 - ✓ Access to parks and areas to walk, run and exercise
 - Encourage the community to be active and engage in healthy lifestyles
- PHYSICALLY AND MENTALLY HEALTHY RESIDENTS were identified by four stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to physically and mentally healthy residents that a healthy community should have:
 - ✓ A positive outlook on both physical health and mental health
 - ✓ Access to exercise programs
 - ✓ The ability to feed both body and mind
 - ✓ Ability to be strong physically
- A STRONG ECONOMY was identified by three stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to a strong economy that a healthy community should have:
 - Access to job opportunities
 - Residents and businesses functioning cohesively
 - Enough residents for businesses and vice versa
 - ✓ Support that allows a resident to be productive
 - ✓ Strong business
 - Opportunities for the community

- EDUCATIONAL OPPORTUNITIES were identified by three stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to educational opportunities that a healthy community should have:
 - ✓ Competitive schools on a regional and national level
 - ✓ A strong commitment to neighborhood schools
 - ✓ Ability to be strong educationally

Additional data and greater detail related to the South Pointe Hospital Community Key Stakeholder Interviews is available in Appendix C.

Focus Groups with Community Residents –

Tripp Umbach facilitated three focus groups with residents in the South Pointe Hospital community service area. Top community concerns include; absence of collaboration, inadequate community services, and difficulties experienced when seeking medical services. More than 40 residents from the South Pointe Hospital community participated in the focus groups each providing direct input related to top community health needs of themselves, their families and communities. The goal of the focus group process is that each participant feels comfortable and speaks openly so that they contribute to the discussion. It was explained to participants that there are no wrong answers, just different experiences and points of view. This process ensures that each participant shares their experiences from their point of view, even if it is different from what others have said.

Specifically, 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 served by the medical facilities within the service area of South Pointe Hospital. Focus group input is subject to the limitations of the identified target populations (i.e., vocabulary, perspective, knowledge, etc.) and therefore is not factual and inherently subjective in nature. What follows is a collective summary of the substantial issues and concerns that were discussed by at least two of the three focus group audiences.

The three focus group audiences were:

- Residents That are Familiar with Diabetic Issues
 - Conducted at the Southeast YMCA (Bedford, OH)
- ✓ Underinsured or Uninsured Residents
 - Conducted at the Harvard Community Center (Warrensville Heights, OH)
- ✓ Senior Residents
 - Conducted at the Bedford Heights Community Center (Bedford, OH)

Key high-level themes from focus groups include:

■ ABSENCE OF COLLABORATION AT ALL LEVELS

The absence of collaboration at all levels in the community has caused a lack of outreach efforts and awareness about available programs and services, as well as ineffective dissemination of information leading residents to be confused, misinformed, unaware and underserved.

✓ Lack of awareness: Group participants felt many residents are unaware of available resources, events, programs and services in the community due to a lack of advertisement and outreach. Residents' lack of

awareness has caused a lack of participation and confusion resulting in an underserved population with unmet needs.

- Limited access to prevention and outreach programs: Participants felt residents' access to prevention and outreach programs is limited due to a lack of funding, a lack of insurance, insurance restrictions, and a lack of programming offered by hospitals and community-based organizations (i.e., community health fairs). The limited access to prevention and outreach programs causes residents to be misinformed and unaware about healthy behaviors that could reduce their risk for variety of health issues such as chronic disease, accident-related injury and poor mental health resulting in a poor health status and the need to access health services more frequently.
- Ineffective dissemination of information: Participants indicated that the dissemination of information is ineffective in their communities due to a high volume of disorganized, duplicated and irrelevant information being received, as well as a lack of information sharing among groups in the community. Additionally, some residents do not have access to the information outlets that are used throughout the community such as cable channels and the internet. The lack of access to information causes residents to be unaware, misinformed and confused resulting in the absence of participation in and disuse of available resources, events, programs and services.

■ INADEQUATE COMMUNITY SERVICES

Focus group participants perceive a lack of adequate community services due to funding cuts in the areas of transportation and services for underinsured/uninsured individuals causing a decrease in mobility, financial resources, physical health and mental health.

✓ Transportation: Transportation is not always readily accessible or convenient due to the elimination of the circular bus services, cumbersome requirements of CRT and PERA services, reduction in RTA bus routes and additional travel time required. Overall, the absence of readily accessible convenient transportation causes a lack of healthy food options, limited mobility, an increase in health risks and a decrease in productivity, financial resources and participation in available events, programs and services including health services.

✓ Services for the underinsured/uninsured: Health services are often inaccessible to uninsured/underinsured residents due to a lack of financial resources, the absence of affordable uninsured health services (i.e., dental and primary, preventive and emergency medical), and cumbersome eligibility requirements for subsidized services. Uninsured and underinsured populations tend to be unhealthier overall than insured populations requiring more frequent use of health services. The lack of access to affordable uninsured health services coupled with the increased use of those services by uninsured/underinsured residents causes increased costs for hospitals.

■ DIFFICULTIES EXPERIENCED WHEN SEEKING MEDICAL SERVICES

Focus group participants expressed problems in communicating with medical staff and a lack of access to medical doctors which results in confusion, complications, lengthier healing periods, unnecessary emergency room visits and avoidance of local healthcare providers.

- ✓ **Difficulties communicating with medical staff:** A select number of focus group participants suggested specialists and surgeons in the medical community offer little to no communication. These factors contribute to participants feeling uninformed.
- ✓ Limited access to medical doctors: Participants felt they did not have adequate access to medical doctors due to the inability to secure a sameday medical appointment, being referred to the emergency room instead of seeing a doctor, seeing a resident and/or qualified nurse instead of a doctor, and seeing a different doctor each visit.

Additional data and greater detail related to the South Pointe Hospital Community Focus Groups is available in Appendixes D - F.

Conclusions

The majority of community needs identified through the South Pointe Hospital community health needs assessment process are not related to the provision of traditional medical services provided by community hospitals. However, the top needs identified in this assessment do "translate" into a wide variety of health-related issues that may ultimately require hospital and or community services. For example, the absence of collaboration among community organizations, healthcare providers and support groups in the South Pointe Hospital community has caused a lack of outreach efforts and awareness regarding available programs and services. The inadequate collaboration leads to ineffective dissemination of information. Community stakeholders feel there is a lack of awareness among residents about how to access community services. Often when residents are unaware of available services the result is a lack of participation in those services, an underserved population and unmet needs. The availability of health-related educational programs and communications is a significant component to the definition of a healthy South Pointe Hospital community.

The South Pointe Hospital community is a contrast of "higher need" and "lower need" areas. The northern zip code areas of the community generally have a greater number of socioeconomic barriers impacting community health compared to the southern zip code areas. For example, the unemployment rate within the northern zip code area of Union/Miles – Newburgh Heights (44105) is over 16% while the southern zip code areas of Twinsburg (44087) and Solon (44139) have unemployment rates below 4%.

Community focus group participants perceive a lack of adequate medical service provision due to inadequate communication from medical staff and a lack of access to medical doctors. The increased prevalence of specific chronic diseases in the South Pointe Hospital community indicates community health trends of disease that could be prevented through increased availability of preventive education and primary care. Hypertension prevalence in the South Pointe Hospital community is much higher than any of the service counties or Ohio. Diabetes, strokes and weak/failing kidneys are also more prevalent in the South Pointe Hospital community than the service counties and Ohio. Although existing programs attempt to serve the community health needs of its citizens, the need to coordinate existing efforts among community resources will ultimately lead to more effective utilization of current healthcare services.

Additional data and greater detail related to an inventory of available resources within the community that may provide programs and services to meet such needs is available in Appendix G.

South Pointe Hospital, working closely with community partners, understands that the community health needs assessment document is only a first step in an ongoing process. To this end, the next phase of the community health needs assessment may include the following next steps:

- ☐ Internal Communication: Widely communicate the results of the community health needs assessment document to South Pointe Hospital and Cleveland Clinic Health System staff, providers, leadership and boards.
- External Communication: Widely communicate the results of the community health needs assessment document to community residents through multiple outlets such as: local media, neighborhood associations, community-based organizations, faith-based organizations, schools, libraries and employers.

APPENDIX A:

South Pointe Hospital Community Key Stakeholder Organizations

Key Stakeholder Organizations

Representatives	from	the	following	community	based	organizat	tions	provided
detailed input du	ıring tl	ne co	mmunity h	nealth needs	assessr	nent proc	ess:	

City of Bedford Heights (Local Government)
City of Warrensville Heights (Local Government)
State of Ohio House of Representatives (State Government)
Bedford City School District (Public School)
Warrensville Heights City School District (Public School)
South Pointe Hospital (Health Care Provider)
Park East Care & Rehabilitation (Health Care Provider)

☐ Cleveland Branch NAACP (Community Organization)

APPENDIX B:

South Pointe Hospital Community Secondary Data Profile

South Pointe Service Area Community Health Needs Profile



- 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 socioeconomic/environmental factors related to health and needs of residents of multi-community service areas comprising each of the Cleveland Clinic Hospitals.
- 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 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 in identifying and addressing the disproportionate unmet healthrelated 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 communities access to care.

Overview of Key Data Sources

Prevention Quality Indicators Index (PQI)

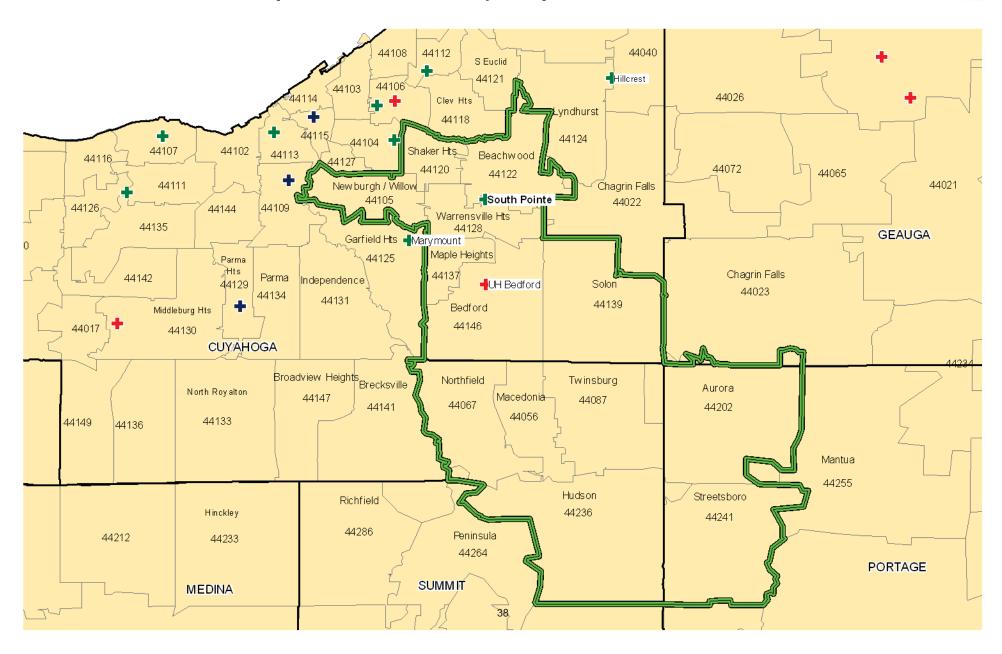
- The Prevention Quality Indicators index (PQI) was developed by the Agency for Healthcare Research and Quality (AHRQ). The AHRQ model was applied to quantify the PQI within the Cleveland Clinic market and Ohio.
 PQI is similarly referred to as Ambulatory Care Sensitive Hospitalizations.
- The quality 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.



Community Demographic Profile

- Hospital community is defined as a zip code geographic area based on 80% of the hospital's inpatient volumes. The South Pointe Community is comprised of 13 zip code areas covering portions of Cuyahoga, Portage and Summit Counties in Northeast Ohio.
- Gender, Age, Percentages of Families living in poverty and Insurance spread within the South Pointe Hospital community are consistent with service counties and Ohio.
- ☐ The South Pointe Hospital community has a slightly higher percentage of African American citizens and citizens with a Bachelor's degree and above as compared to the service counties and Ohio.
- Average and median household income levels are slightly higher for citizens in the South Pointe Hospital community as compared to the service counties and Ohio.
- The South Pointe Hospital community unemployment rate (8.1%) is slightly higher than the overall Ohio rate (7.0%) and less than the national rate (approximately 9%).

South Pointe Hospital - Community Map



Key Points – Community Needs in the South Pointe Hospital Community

A larger community such as the South Pointe Hospital community presents a unique challenge to hospital leadership. The South Pointe Hospital community is a contrast of "high need" and "low-need" areas. Union/Miles — Newburgh Heights (44105) records the highest CNI score (greatest need) of 4.8 and North Field (44067) and Macedonia (44056) record the lowest at 1.2; all within the same hospital community.
Specific high need communities are Union/Miles — Newburgh Heights (44105), Shaker Heights (44120), and Bedford (44146).
 The South Pointe Hospital community unemployment rate (8.1%) is slightly higher than the overall Ohio rate (7.0%) and less than the national rate (approximately 9%). The unemployment rate is highest within the Union/Miles – Newburgh Heights area (44105) - over 16%. More than 25% of the Union/Miles – Newburgh Heights (44105) population has not received a high school diploma.
Union/Miles – Newburgh Heights (44105) and Shaker Heights (44120) have the highest percentages of citizens living in poverty within the South Pointe community, totaling over 60% of the 65 and older population.
Union/Miles – Newburgh Heights (44105) also has the highest rates of uninsured citizens, citizens with no high school diploma and citizens living in poverty within the South Pointe Hospital community.

Key Points – Community Needs in the South Pointe Hospital Community

- □ **Hypertension prevalence** in the South Pointe Hospital community (333 cases per 1000 pop.) is much higher than any of the service counties (highest at 316) or Ohio (286).
- □ Diabetes, Strokes and Weak/Failing Kidneys are more prevalent in the South Pointe Hospital community than the service counties and Ohio.
- ☐ The South Pointe Hospital community shows lower rates of obesity, smoking, and depression as compared to service counties and Ohio. Of note, the smoking rate for the South Pointe Hospital communities is substantially lower than all local counties and Ohio.
- However, the South Pointe Hospital community shows higher rates of high blood pressure and citizens with chemical dependency compared to service counties and Ohio.

Key Points – Community Needs in the South Pointe Hospital Community

- PQI scores in the South Pointe Hospital community <u>are at or above</u> Ohio PQIs for the majority of factors.
- ☐ The South Pointe Hospital community is substantially higher within the following PQIs:
 - Low Birth Weight (+4.15)
 - □Congestive Heart Failure (+2.28)
 - □Adult Asthma (+1.64)
 - ☐ Urinary Tract Infection(+1.15)
- South Pointe Hospital has a penetrating trauma rate of 9.7%, somewhere in the middle across local hospital communities; with Cleveland Clinic Main campus at 21.5% and Medina at 2.4%. The rate for South Pointe Hospital is higher than all service counties and Ohio.

Data Appendix

Demographics

Community Need Index (CNI)

Disease Prevalence

Prevention Quality Indicators Index (PQI)

Penetrating Trauma Data

Health Behavior Profile

Overview

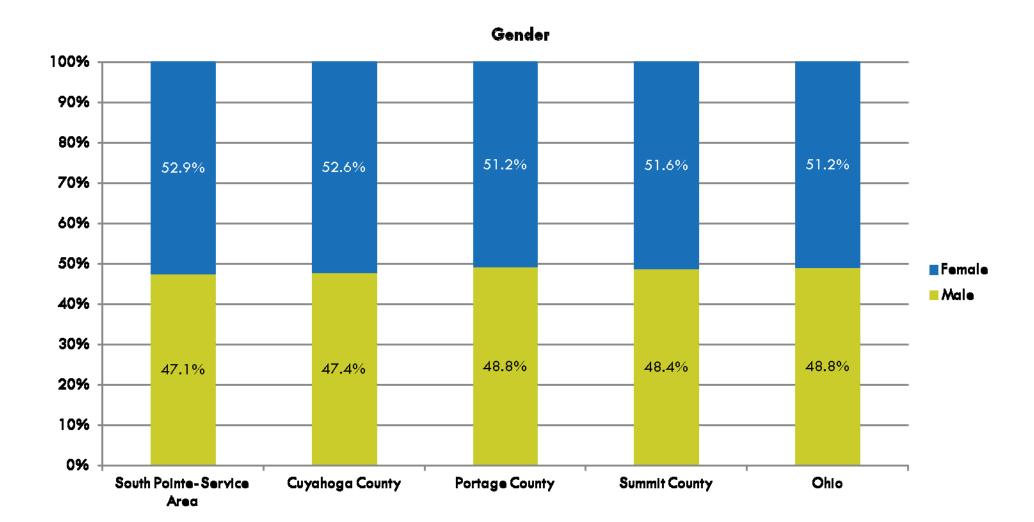
2010 demographic profile data provided by Thomson Reuters was based on projection data, compiled in calendar year 2011.
Adjustments to population data based on 2010 US Census data made available to the public at the zip code level in 2012 does not result in any changes to the identified community needs within the Community Health Needs Assessment Report.

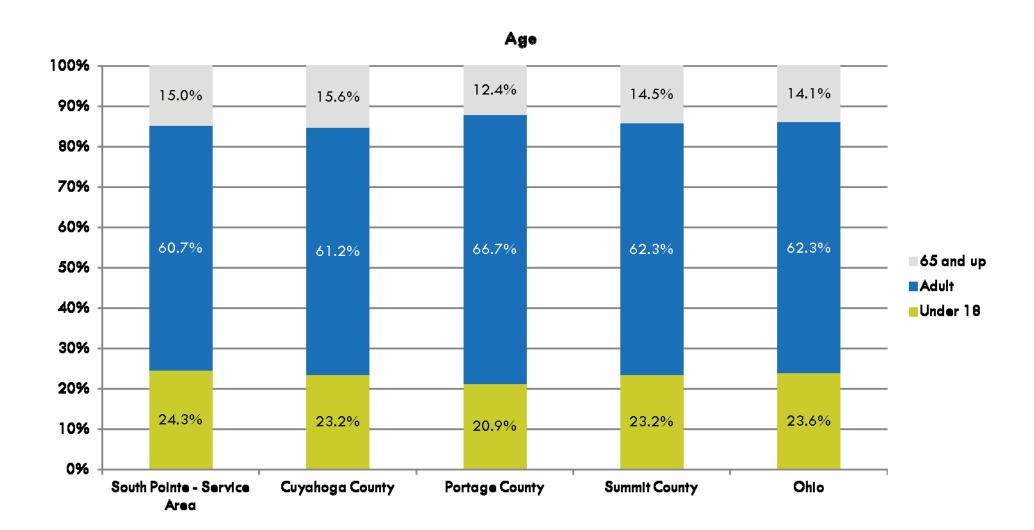
Demographic Profile

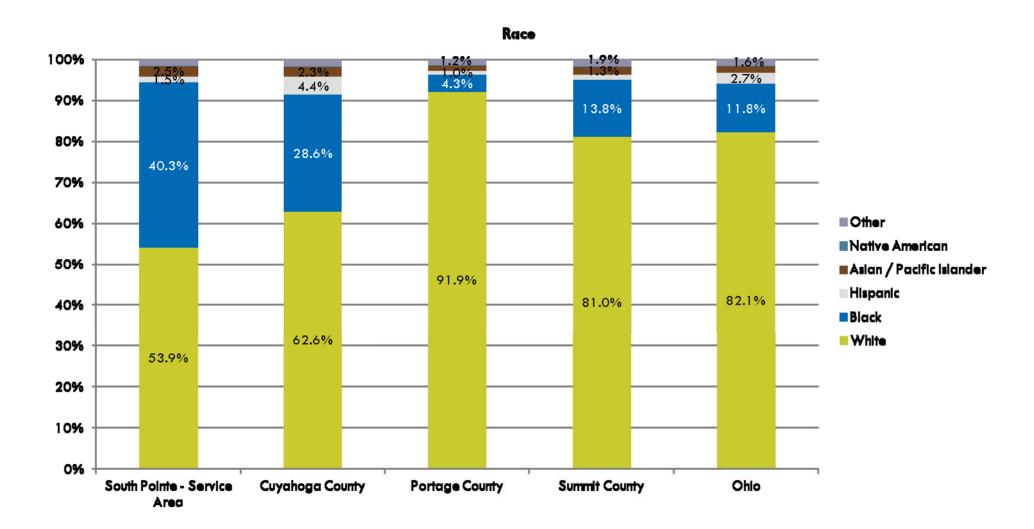
- **Hospital community** is defined as a zip code geographic area based on 80% of the hospital's inpatient volumes. The South Pointe Community is comprised of 13 zip code areas covering portions of Cuyahoga, Portage and Summit Counties in Northeast Ohio.
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- ☐ The South Pointe Hospital community has a slightly higher percentage of African American citizens and citizens with a Bachelor's degree and above as compared to the service counties and Ohio.
- Average and median household income levels are slightly higher for citizens in the South Pointe Hospital community as compared to the service counties and Ohio.
- The South Pointe Hospital community unemployment rate (8.1%) is slightly higher than the overall Ohio rate (7.0%) and less than the national rate (approximately 9%).

Population

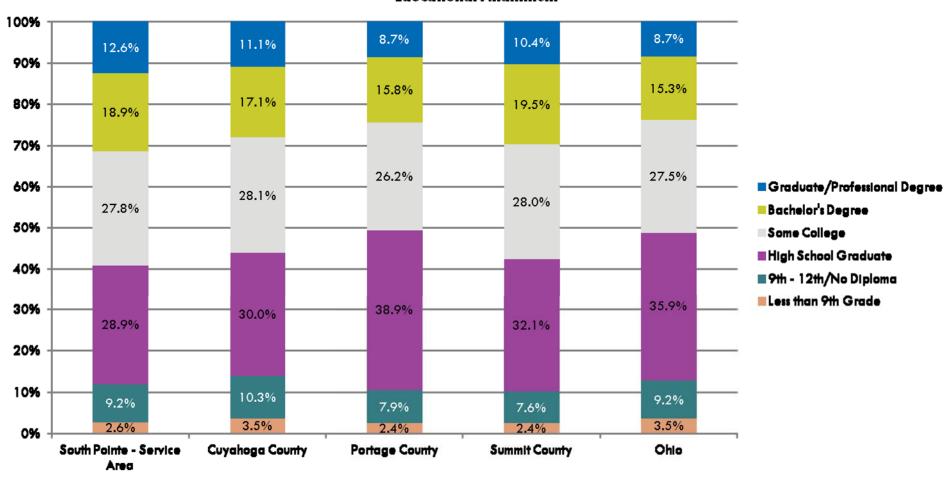
Total Population	South Pointe Service Area	Cuyahoga County	Portage County	Summit County	Ohio
2000	350,261	1,400,071	158,191	546,134	11,353,136
2010	583,781	1,270,520	162,960	544,269	11,496,028
2015	573,859	1,199,339	163,973	538,352	11,471,127
Projected 5 year change (2010 – 2015)	-9,922	<i>-7</i> 1,181	1,013	-5,91 <i>7</i>	-24,901



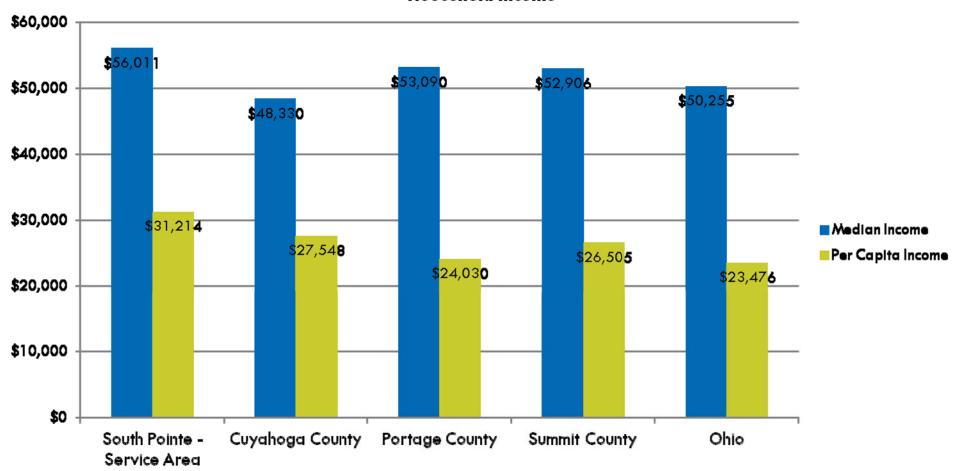




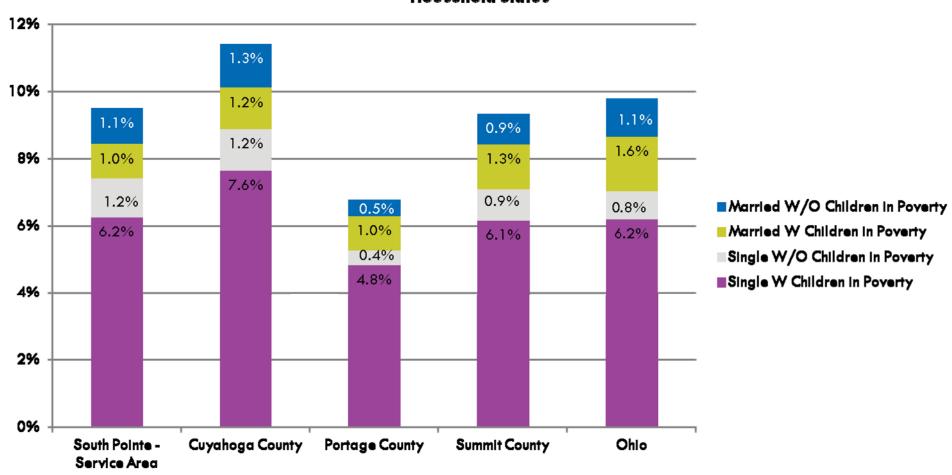
Iducational Attainment

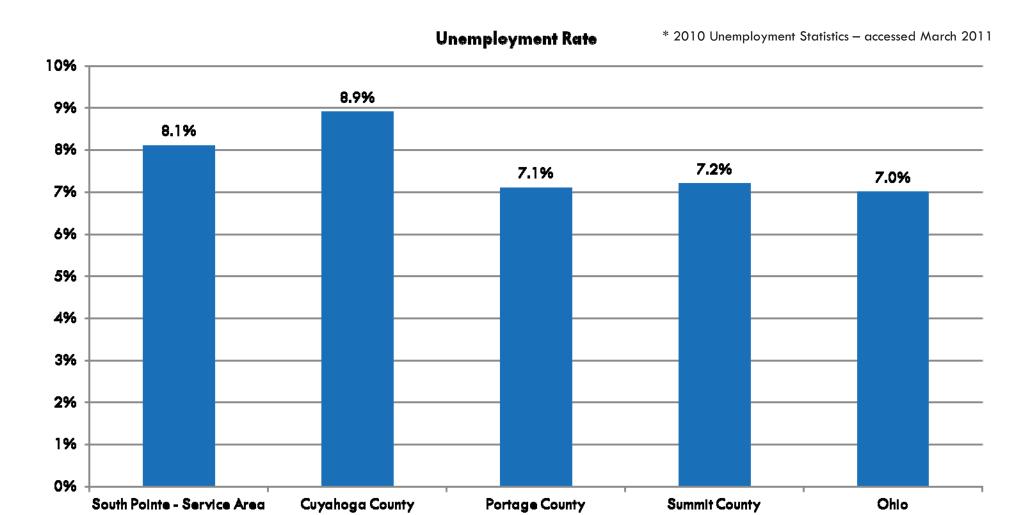


Household Income

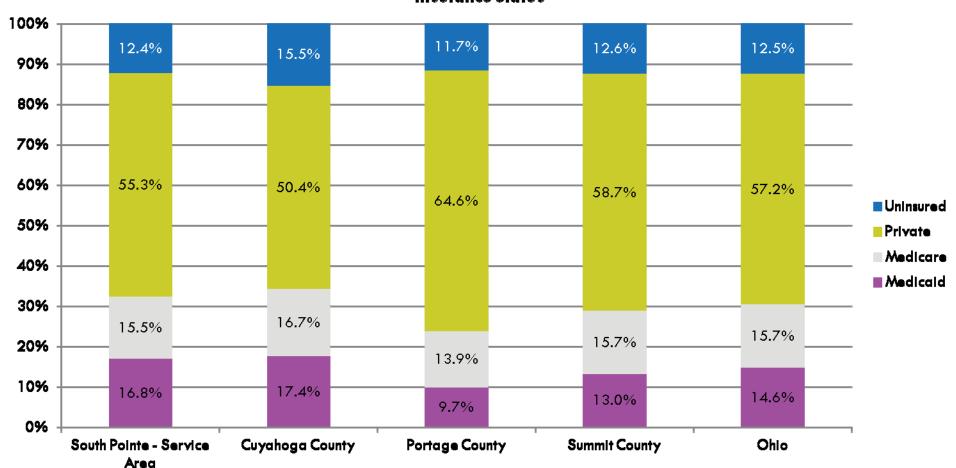


Household Status

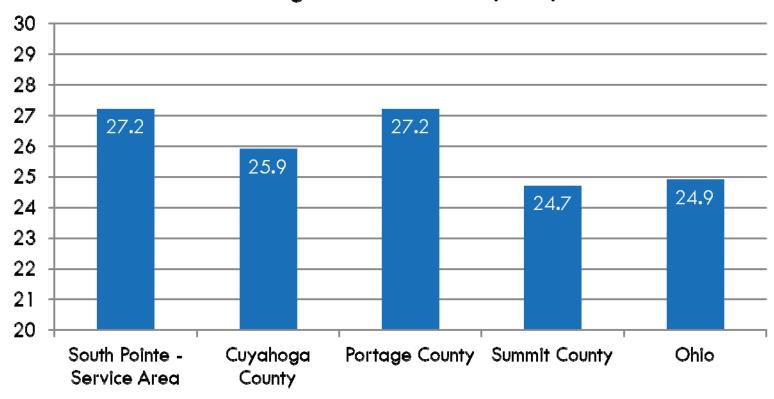




Insurance Status



Average Work Commute (mins)





Community Need Index (CNI)

- □ The South Pointe Hospital community is a contrast of "high need" and "low-need" areas. The northern zip code areas of the community generally record higher CNI scores compared to the south.
 □ The unemployment rate is highest within the Union/Miles Newburgh Heights area (44105) over 16%.
 □ In contrast, Twinsburg (44087) and Solon (44139) have unemployment rates below 4%. Solon (44139) has an uninsured rate of 4.2%.
 □ Specific high need communities are Union/Miles Newburgh Heights (44105), Shaker Heights (44120), and Bedford (44146).
 □ More than 25% of the Union/Miles Newburgh Heights (44105) population has not received a high school diploma.
 - has not received a high school diploma.

 More than 25% of the population in Union/Miles Newburgh Heights (44105), Shaker Heights (44120), and Bedford (44146) are elderly and living at
 - Union/Miles Newburgh Heights (44105) also has the highest rates of uninsured citizens, citizens with no high school diploma and citizens living in poverty within the South Pointe community.
- ☐ The number of families and adults 65 and older living in poverty is a barrier to community health.
 - Union/Miles Newburgh Heights (44105) and Shaker Heights (44120) have the highest percentages of citizens living in poverty within the South Pointe Hospital community, totaling over 60% of the 65 and older population.

poverty levels.

Community Need Index (CNI)

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

- 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.

	cemage or me	popolation		00.00.7	.,	0.00	5. 5	.					- 						
Zip	City	County	Tot Pop		Rental %	Unemp %	Uninsu %	Minor %		No HS Dip	65+ Pov	M w/ Chil Pov	Sin w/ Chil Pov	Inc Rank	Insur Rank			Hous Rank	CNI Score
	Union/Miles –																		
44105	Newburgh Heights	Cuyahoga	47,442	18,092	36.5%	16.7%	25.1%	70.6%	6.2%	26.1%	34.1%	11.3%	50.3%	5	5	4	5	5	4.8
44120	Shaker Heights	Cuyahoga	42,254	18,181	45.2%	13.1%	21.6%	81.8%	7.3%	14.8%	26.1%	8.7%	40.7%	4	4	2	5	5	4
44122	Beachwood	Cuyahoga	31,527	12,923	28.2%	5.8%	9.2%	40.1%	10.1%	7.5%	14.4%	2.5%	20.2%	2	2	1	5	4	2.8
	Warrensville																		
44128	Heights	Cuyahoga	29,622	12,375	34.3%	12.3%	16.3%	97.0%	3.4%	17.6%	21.0%	6.0%	24.8%	3	4	3	5	5	4
44137	Maple Heights	Cuyahoga	23,342	9,469	15.5%	7.6%	12.3%	58.9%	6.6%	13.2%	24.2%	3.6%	16.7%	2	3	2	5	2	2.8
44139	Solon	Cuyahoga	22,641	7,944	12.5%	2.4%	4.2%	16.9%	10.6%	3.7%	8.6%	1.7%	11.0%	1	1	1	3	1	1.4
44146	Bedford	Cuyahoga	28,913	13,096	35.0%	6.4%	13.7%	51.9%	4.8%	13.0%	25.0%	2.7%	22.3%	3	3	2	5	5	3.6
44202	Aurora	Portage	18,427	7,209	18.8%	4.2%	5.5%	6.9%	4.0%	5.0%	11.2%	1.9%	11.8%	1	1	1	2	2	1.4
44241	Streetsboro	Portage	15,262	6,297	29.5%	4.7%	8.0%	8.7%	4.1%	9.7%	15.6%	4.4%	14.5%	1	2	1	2	4	2
44056	Macedonia	Summit	10,486	3,824	4.8%	5.5%	4.2%	12.4%	6.7%	4.9%	8.1%	0.1%	11.8%	1	1	1	2	1	1.2
44067	Northfield	Summit	18,483	7,684	13.7%	4.8%	6.3%	6.3%	5.1%	6.7%	11.4%	0.9%	9.5%	1	2	1	1	1	1.2
44087	Twinsburg	Summit	19,175	7,536	23.7%	4.1%	7.3%	21.4%	6.2%	5.0%	19.5%	0.7%	12.9%	1	2	1	2	3	1.8
44236	Hudson	Summit	25,450	8 , 517	11.1%	4.2%	3.2%	8.3%	6.4%	2.1%	6.2%	2.4%	20.7%	2	1	1	2	1	1.4
	South Pointe Hospit	tal																	
11.	Community Summo		333,024	133,147	28.3%	8.1%	12.8%	46.1%	6.4%		19.9%	3.6%	31.5%	3	. 3	2	5	4	3.4

Using this data, we assign a score to each barrier condition. A score of 1.0 indicates a zip code with the lowest socio-economic barriers (low need), while a score of 5.0 represents a zip code 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 communities access to care.

At the same time, a CNI score of 1.0 does not indicate the community requires no attention at all, which is why a larger community such as the South Pointe Hospital community presents a unique challenge to hospital leadership.

CNI Scores – Primary Market

					Rental	Unemp	Uninsu	Minor	Lim	No HS	65+	M w/	Sin w/	Inc	Insur	Educ	Cult	Hous	CNI
Zip	City	County	Tot Pop	HH	%	%	%	%	Eng	Dip	Pov	Chil Pov	Chil Pov	Rank	Rank	Rank	Rank	Rank	Score
	Union/Miles –																		
44105	Newburgh Heights	Cuyahoga	47,442	18,092	36.5%	16.7%	25.1%	70.6%	6.2%	26.1%	34.1%	11.3%	50.3%	5	5	4	5	5	4.8
44120	Shaker Heights	Cuyahoga	42,254	18,181	45.2%	13.1%	21.6%	81.8%	7.3%	14.8%	26.1%	8.7%	40.7%	4	4	2	5	5	4.0
44128	Warrensville Heights	Cuyahoga	29,622	12,375	34.3%	12.3%	16.3%	97.0%	3.4%	17.6%	21.0%	6.0%	24.8%	3	4	3	5	5	4.0
44146	Bedford	Cuyahoga	28,913	13,096	35.0%	6.4%	13.7%	51.9%	4.8%	13.0%	25.0%	2.7%	22.3%	3	3	2	5	5	3.6
44122	Beachwood	Cuyahoga	31,527	12,923	28.2%	5.8%	9.2%	40.1%	10.1%	7.5%	14.4%	2.5%	20.2%	2	2	1	5	4	2.8
44137	Maple Heights	Cuyahoga	23,342	9,469	15.5%	7.6%	12.3%	58.9%	6.6%	13.2%	24.2%	3.6%	16.7%	2	3	2	5	2	2.8
South Poi	nte Hospital																		
Primary A	Narket Summary		203,100	84,136	34.5%	10.9%	17.5%	68.1%	6.8%	15.9%	25.3%	5.3%	37.1%	4	3	2	5	5	3.8

The South Pointe Hospital executive leadership team requested a secondary "view" of the CNI scores for the South Pointe Hospital community. While the overall hospital community includes 13 zip codes comprising 80% of the inpatient volume at Hillcrest Hospital, the entire community consist of two markets; primary and secondary.

The South Pointe Hospital community **primary** market consists of 6 zip code areas with a CNI score of 2.8 or higher. Union/Miles – Newburgh Heights (44105), Shaker Heights (44120), and Warrensville Heights (44128) have CNI scores of 4.0 or higher. The South Pointe Hospital primary market, consisting of zip codes in Cuyahoga County, have the highest health care access needs.

CNI Scores – Secondary Market

Zip	City	County	Tot Pop	НН	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
44241	Streetsboro	Portage	15,262	6,297	29.5%	4.7%	8.0%	8.7%	4.1%	9.7%	15.6%	4.4%	14.5%	1	2	1	2	4	2.0
44087	Twinsburg	Summit	19,175	7,536	23.7%	4.1%	7.3%	21.4%	6.2%	5.0%	19.5%	0.7%	12.9%	1	2	1	2	3	1.8
44139	Solon	Cuyahoga	22,641	7,944	12.5%	2.4%	4.2%	16.9%	10.6%	3.7%	8.6%	1.7%	11.0%	1	1	1	3	1	1.4
44202	Aurora	Portage	18,427	7,209	18.8%	4.2%	5.5%	6.9%	4.0%	5.0%	11.2%	1.9%	11.8%	1	1	1	2	2	1.4
44236	Hudson	Summit	25,450	8 , 517	11.1%	4.2%	3.2%	8.3%	6.4%	2.1%	6.2%	2.4%	20.7%	2	1	1	2	1	1.4
44056	Macedonia	Summit	10,486	3,824	4.8%	5.5%	4.2%	12.4%	6.7%	4.9%	8.1%	0.1%	11.8%	1	1	1	2	1	1.2
44067	Northfield	Summit	18,483	7,684	13.7%	4.8%	6.3%	6.3%	5.1%	6.7%	11.4%	0.9%	9.5%	1	2	1	1	1	1.2
South Pointe Ho	spital																		
Secondary Mar	ket Summary	129,924	49,011	16.7%	4.2%	5.4%	11.6%	5.9%	5.1%	12.1%	0.8%	13.4%	1	1	1	2	2	1.4	

The South Pointe Hospital community **secondary** market consists of 7 zip code areas with a CNI score of 1.4. The secondary market comprises zip code areas with fewer barriers to health care access.

Community Need Index (CNI)

Zip	City	County	Inc Rank	Insur Rank	Educ Rank	Cult Rank	Hous Rank	CNI Score	
44105	Union/Miles – Newburgh Heights	Cuyahoga	5					4.8)
44120	Shaker Heights	Cuyahoga	4	4	2	5	5	4.0	
44128	Warrensville Heights	Cuyahoga	3	4	3	5	5	4.0	
44146	Bedford	Cuyahoga	3	3	2	5	5	3.6	
44122	Beachwood	Cuyahoga	2	2	1	5	4	2.8	
44137	Maple Heights	Cuyahoga	2	3	2	5	2	2.8	
44241	Streetsboro	Portage	1	2	1	2	4	2.0	
44087	Twinsburg	Summit	1	2	1	2	3	1.8	
44139	Solon	Cuyahoga	1	1	1	3	1	1.4	
44202	Aurora	Portage	1	1	1	2	2	1.4	
44236	Hudson	Summit	2	1	1	2	1	1.4	
44056	Macedonia	Summit	1	1	1	2	1	1.2	
44067	Northfield	Summit	1	2	1	1	1	1.2	
South	Pointe Hospital C	ommunity	3	3	2	5	4	3.4	

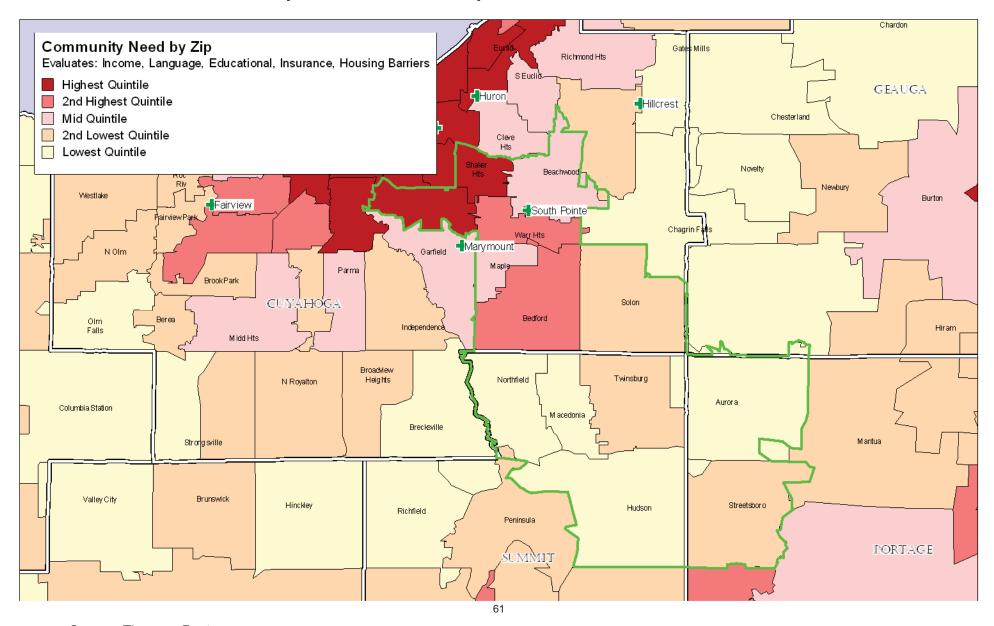
Union/Miles – Newburgh Heights (44105) records the highest CNI score (greatest need)
 within the South Pointe community.

Community Need Index (CNI)

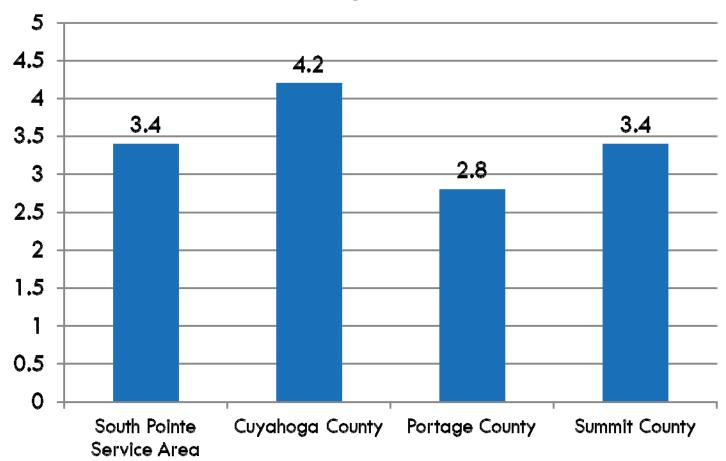
Zip	Tot Pop	НН	Rental %	Unemp %	Uninsu %	Minor %	Lim Eng			M w/ Chil Pov	,						CNI Score
44105	47,442	18,092	36.5%	16.7%	25.1%	70.6%	6.2%	26.1%	34.1%	11.3%	50.3%	5	5	4	5	5 5	4.8

- The CNI zip code summary provides the community hospital with valuable background information to begin addressing the community needs.
- A closer look at the Union/Miles Newburgh Heights (44105) area reveals the highest unemployment and uninsured rates, highest percentage of individuals without a high school diploma and highest rates of families living in poverty within the South Pointe Hospital community.
- The CNI provides greater ability to diagnose community need as it explores areas with significant barriers to health care access. The overall unemployment rate for the South Pointe Hospital community is 8.1%; below the national unemployment rate currently fluctuating around 9%. The unemployment rate for Union/Miles Newburgh Heights (44105) is 16.7%, more than double the South Pointe Hospital community, state and national levels.

South Pointe Hospital - CNI Map

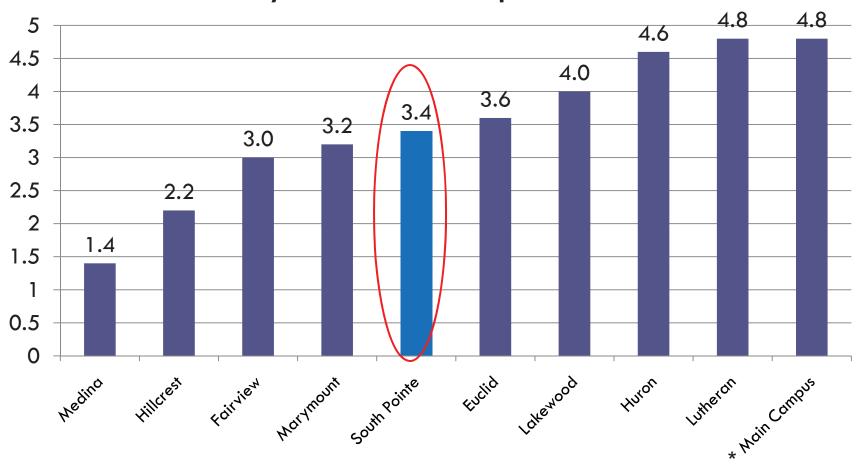


Community Need Index



Examining the overall CNI scores for the South Pointe Hospital community and the service counties, Cuyahoga County has the greatest number of socio-economic barriers to health care access; indicating greater need.

Community Need Index - Hospital Communities



The CNI score for the South Pointe Hospital community is 3.4 out of the highest possible score of 5.0. With 4 hospital communities having lower need and 4 hospital communities having higher need, South Pointe represents the approximate average level of community health need across all hospital communities.

Source: Thomson Reuters

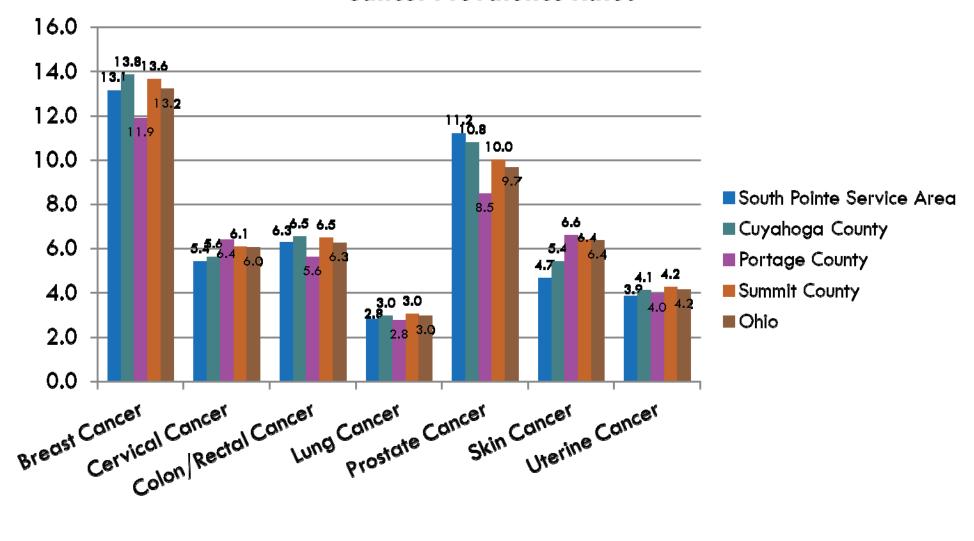
* community includes Children's Hospital and Children's Rehab.



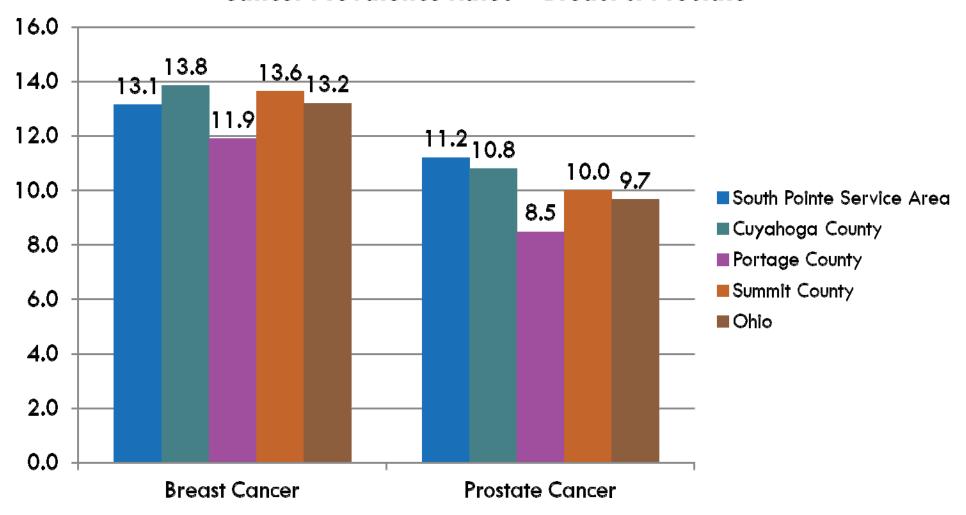
Disease Prevalence Profile

- Breast cancer & prostate cancer are the two most prevalent forms of cancer, therefore, we note the prevalence of the two cancer types among all Cleveland Clinic hospital communities. The South Pointe Hospital community has lower prevalence rates for all cancers (excluding prostate) as compared to the service counties and Ohio.
- **Hypertension prevalence** in the South Pointe Hospital community (333 cases per 1000 pop.) is much higher than any of the service counties (highest at 316) or Ohio (286).
- Diabetes, Strokes and Weak/Failing Kidneys are more prevalent in the South Pointe Hospital community than the service counties and Ohio.

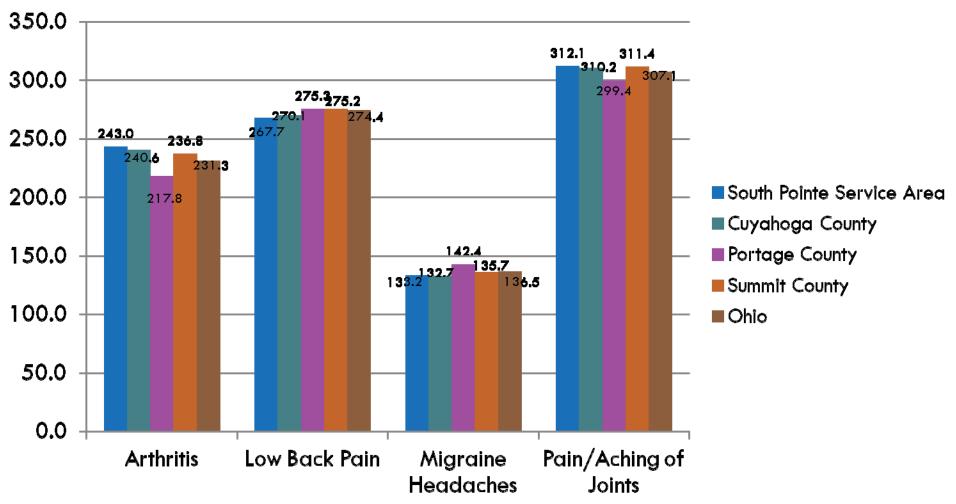
Cancer Prevalence Rates



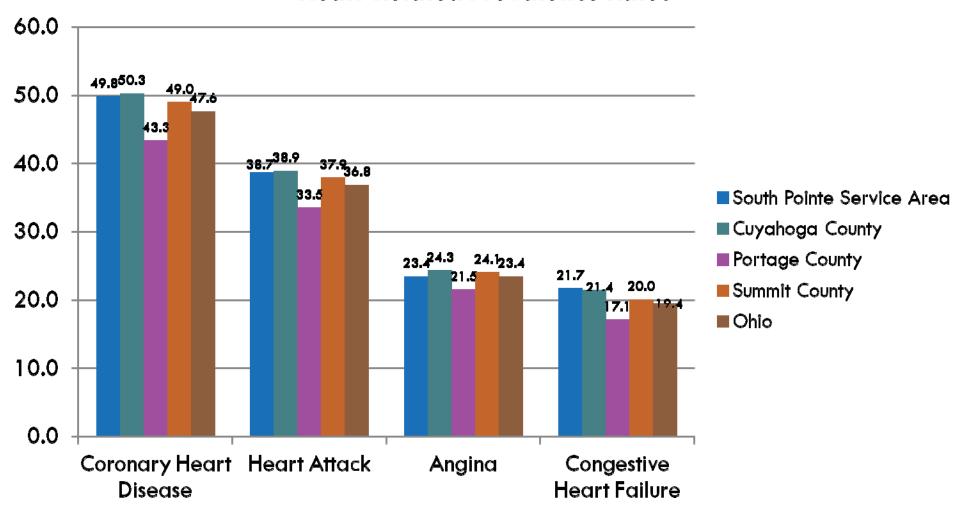
Cancer Prevalence Rates - Breast & Prostate



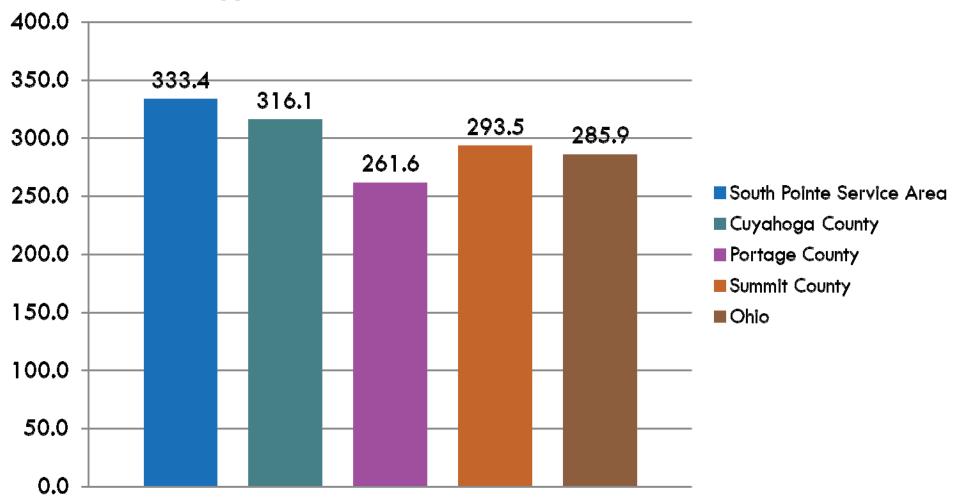
Aches/Pains Prevalence Rates



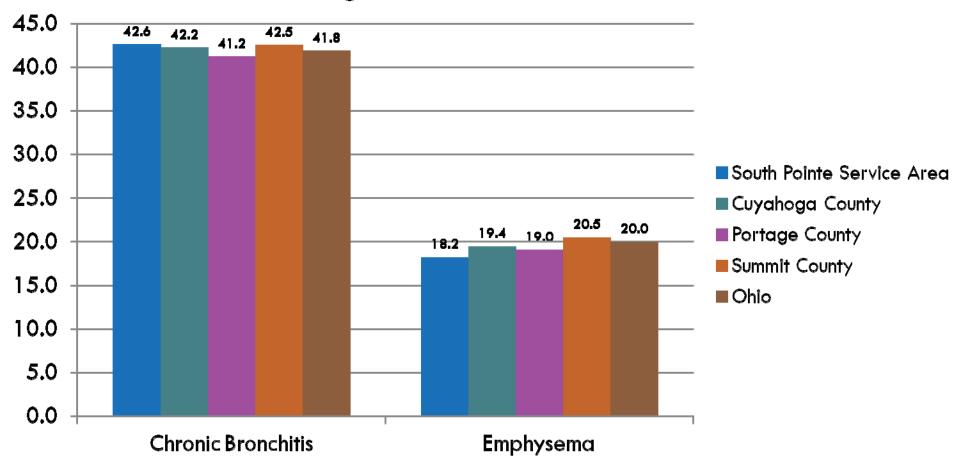
Heart-Related Prevalence Rates



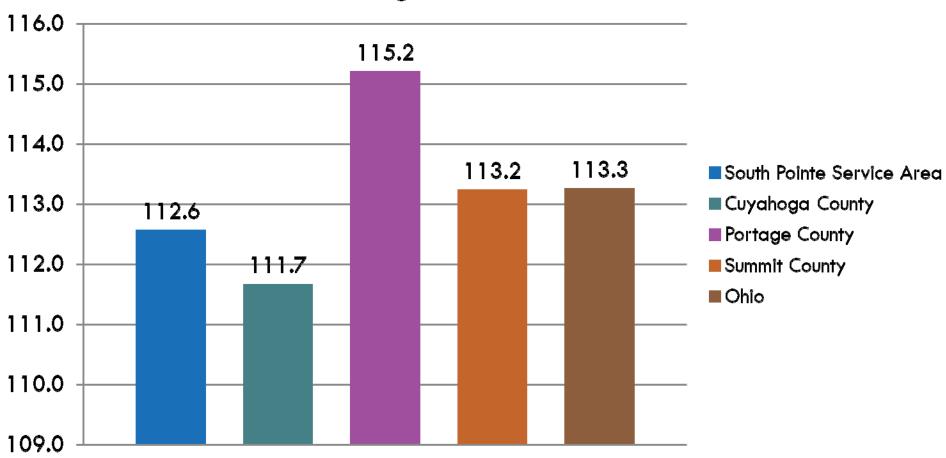
Hypertension – Heart Related Prevalence Rates



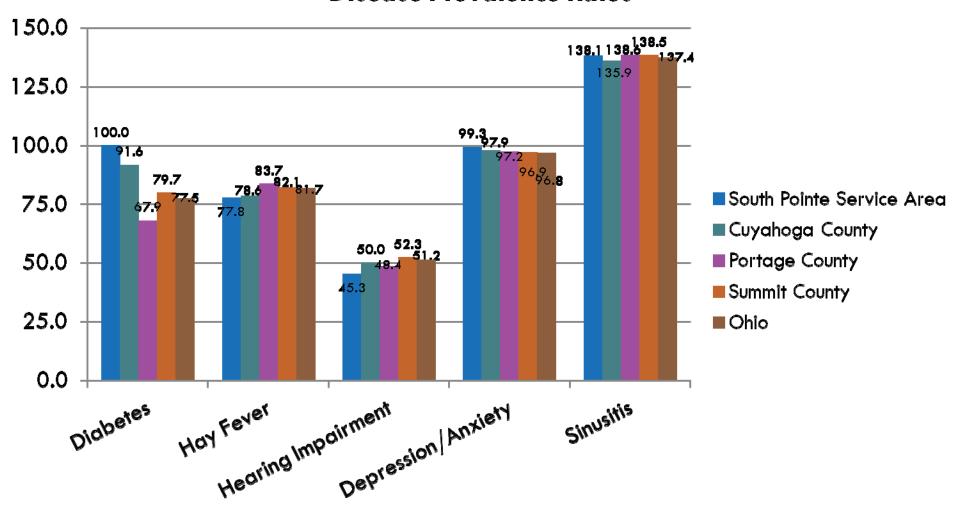
Lung-Related Prevalence Rates



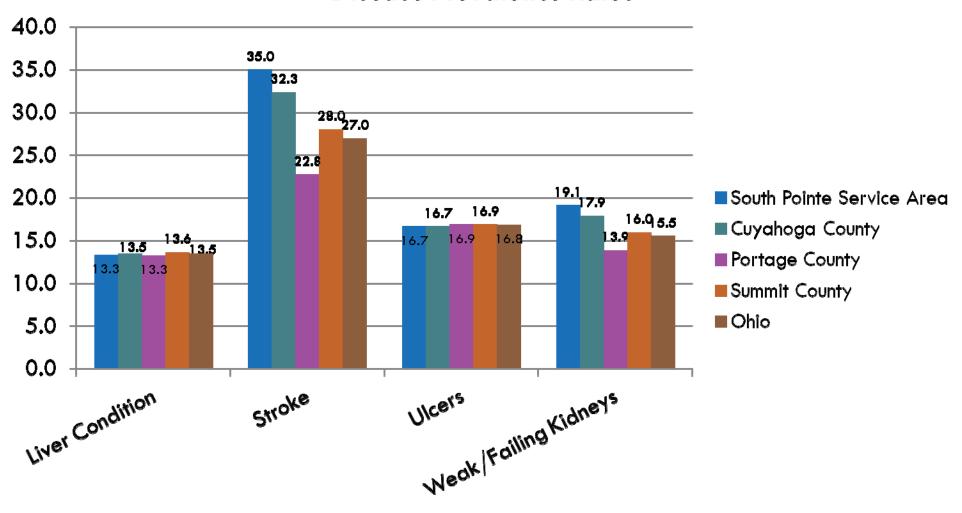
Asthma - Lung Related Prevalence Rates



Disease Prevalence Rates



Disease Prevalence Rates





Prevention Quality Indicators Index (PQI)

PQI scores in the South Pointe Hospital community <u>are at or above</u> Ohio PQIs for the majority of factors. The South Pointe Hospital community is substantially higher within the following PQIs:

Prevention Quality Indicators (PQI)	South Pointe Service Area	Ohio	Difference
Low Birth Weight Rate (PQI 9)	5.36	1.21	+4.15
Congestive Heart Failure Admission Rate (PQI 8)	6.94	4.66	+2.28
Adult Asthma Admission Rate (PQI 15)	3.63	1.99	+1.64
Urinary Tract Infection Admission Rate (PQI 12)	3.81	2.66	+1.15

 PQI scores in the South Pointe Hospital community show lower admission rates than Ohio for Perforated Appendix and Bacterial Pneumonia

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

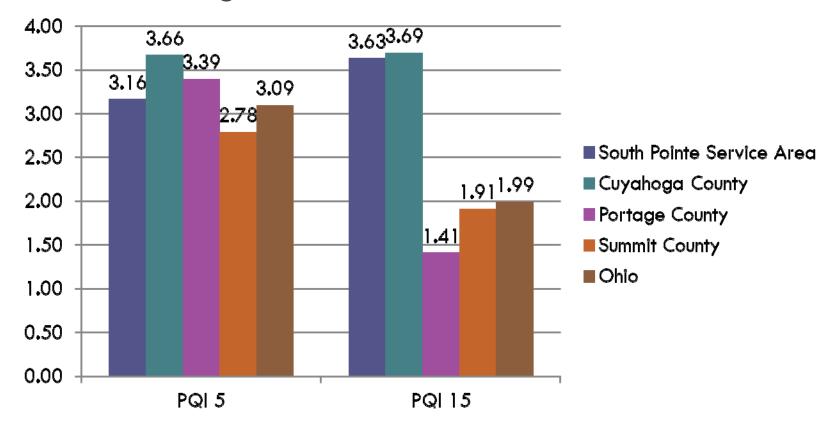
Heart Conditions

- PQI 7 Hypertension Admission Rate
- PQI 8 Congestive Heart Failure Admission Rate
- PQI 13 Angina Without Procedure Admission Rate

Other Conditions

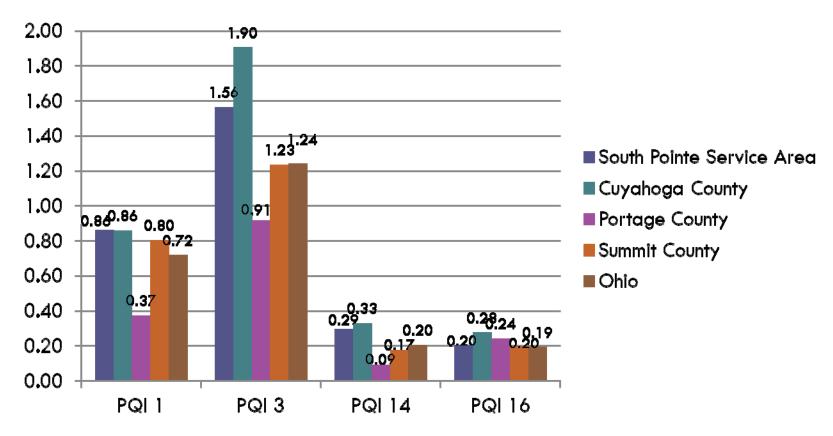
- PQI 2 Perforated Appendix Admission Rate
- PQI 9 Low Birth Weight Rate
- PQI 10 Dehydration Admission Rate
- PQI 11 Bacterial Pneumonia Admission Rate
- PQI 12 Urinary Tract Infection Admission Rate

Chronic Lung Conditions



PQI 5 Chronic Obstructive Pulmonary Disease Admission Rate PQI 15 Adult Asthma Admission Rate

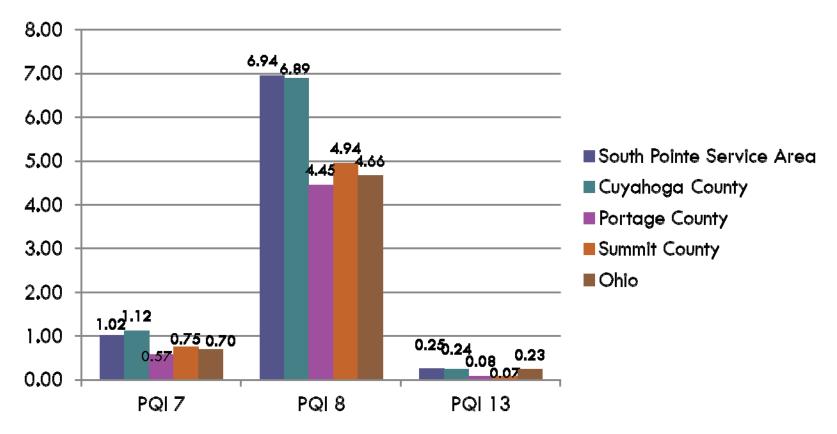
Diabetes



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

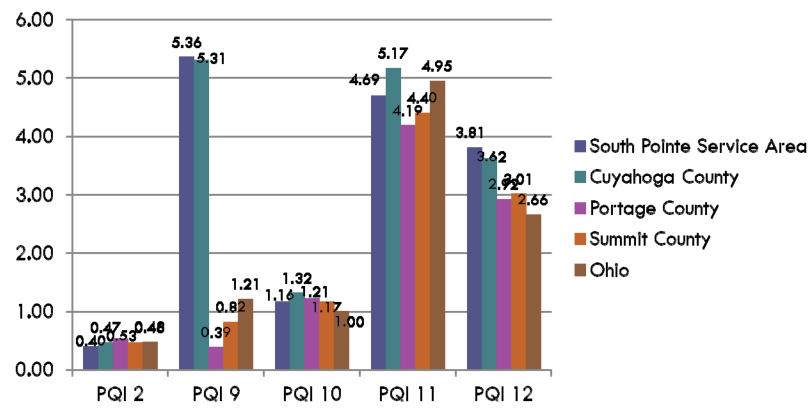


PQI 7 Hypertension Admission Rate

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

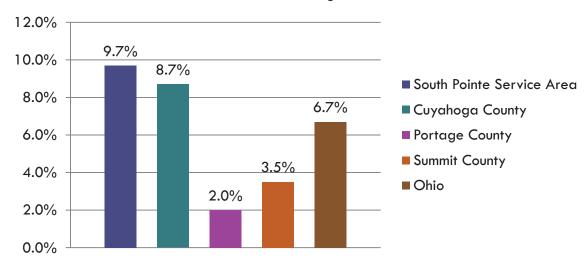
Source: Ohio Hospital Association



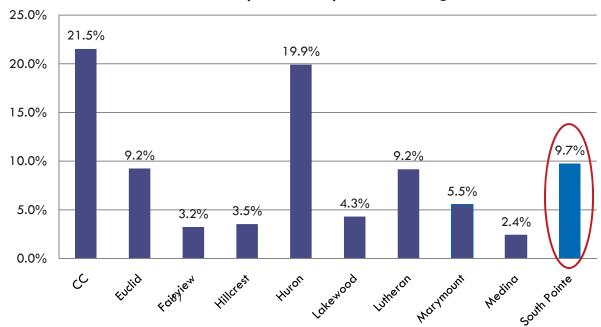
Penetrating Trauma Data

- ☐ 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.
- South Pointe Hospital has a penetrating trauma rate of 9.7%, slightly higher than the average of all Cleveland Clinic hospital communities; with Cleveland Clinic Main campus at 21.5% and Medina at 2.4%. The rate for South Pointe Hospital is higher than all of the service counties and Ohio.

2010 Trauma: % Penetrating



2010 Trauma by Community: % Penetrating



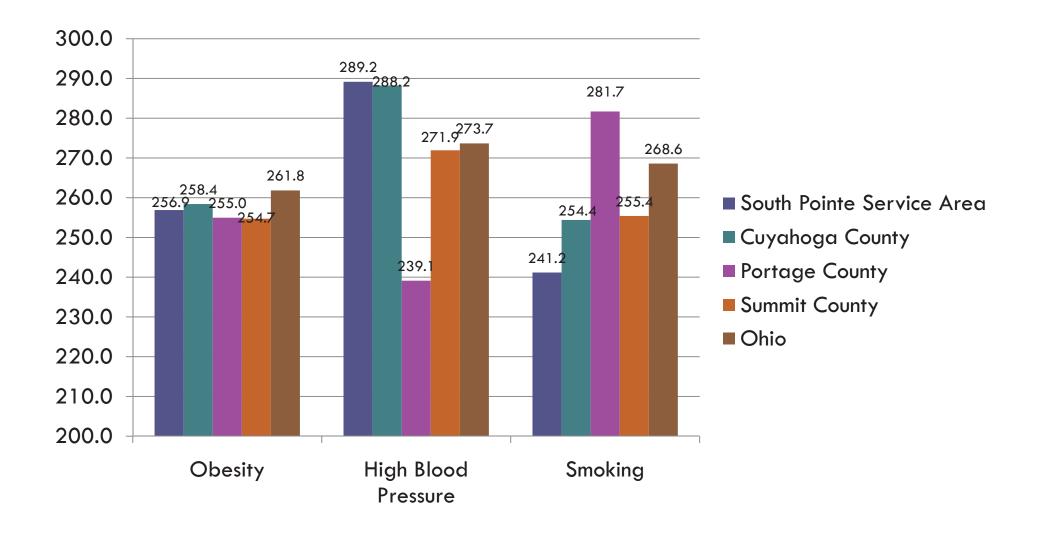
Penetrating trauma data is based on the residence zip code of the trauma patient, not where the trauma was treated or occurred.

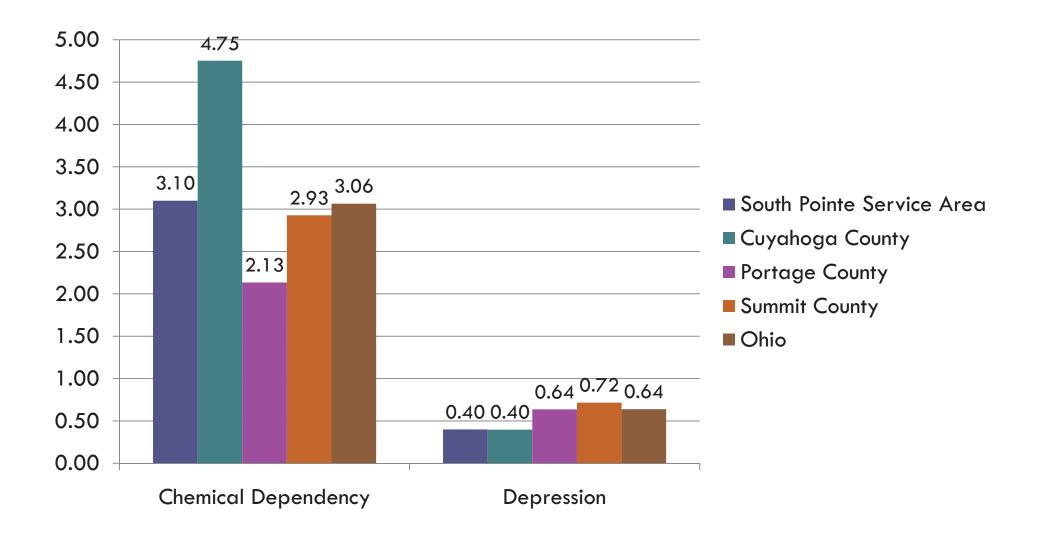
Source: Ohio Trauma Registry



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 geography of each hospital community.
- ☐ The South Pointe Hospital community shows lower rates of obesity, smoking, and depression as compared to service counties and Ohio. Of note, the smoking rate for the South Pointe Hospital communities is substantially lower than all local counties and Ohio.
- However, the South Pointe Hospital community shows higher rates of high blood pressure and citizens with chemical dependency compared to service counties and Ohio.





APPENDIX C:

South Pointe Hospital Interview Summary -- Key Stakeholder Group

COMMUNITY STAKEHOLDER INTERVIEW SUMMARY

Community:

South Pointe Hospital service area

Data Collection:

The following qualitative data were gathered during individual interviews with eleven stakeholders of the South Pointe area as identified by an advisory committee of South Pointe Hospital executive leadership. South Pointe Hospital is a 213-bed acute care, community teaching hospital and also one of nine Cleveland Clinic community hospitals in Northeast Ohio. Each interview was conducted by a Tripp Umbach consultant and lasted approximately sixty minutes. All respondents were asked the same set of questions previously developed by Tripp Umbach approved by the South Pointe Hospital executive leadership project team (See Appendix 1).

Summary of Stakeholder Interviews:

QUESTION #1: Please tell us what community you are speaking on behalf of, such as a region, county, city, town or a neighborhood. Please be specific.

The five places mentioned by stakeholders when asked what community they were speaking on behalf of were: Warrensville Heights, Bedford Heights, Cleveland, The East Side of Cleveland, and Beachwood, Ohio (in order of most mentioned).

QUESTION #2: How long have you lived in this community?

Of the eleven respondents eight currently lived in the community and three worked in the community but did not reside there. Of the eight residents, the shortest length of residency was one year and the longest was at least fifty years. The median length of residency was 33.5 years and the mean length of residency was 25.3 years. Of the three respondents whom were employed but did not reside in the community, the shortest length of employment was eight years and the longest was more than 23 years. The median length of employment was 17 years and the mean length of employment was 16 years.

QUESTION #3: Your position in the community?

Of the eleven respondents there was a diverse representation of positions held in the community. Those positions represented included educational leader, educator, political leader, community leader, non-profit leader, medical department chair, political staff person, and nursing home administrator.

QUESTION #5: How would you describe a healthy community?

There were six themes identified upon review of the stakeholders' collective definitions of a "healthy community". These were: Access to healthy food, Access to health care, Recreational opportunities, Physically and mentally healthy residents, A strong economy and Educational opportunities. Other elements of a health community mentioned by at least one stakeholder were: respect, diversity, collaboration, daycare services, affordable housing, safety and adequate green space.

Access to healthy food was identified by six stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to access to healthy food that a healthy community should have:

- Quality healthy food that is readily available to its residents
- Access to fresh food
- Grocery stores
- Gardening throughout the community

Access to health care was identified by five stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to access to health care that a healthy community should have:

- Access to quality healthcare
- Adequate healthcare
- Ability to identify thresholds for disease
- Hospital services
- Good preventive primary care
- Accessible primary care facilities
- Available and flexible office appointments
- Continuing care
- Confidence in the community hospital

Recreational opportunities were identified by five stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to recreational opportunities that a healthy community should have:

- Recreational facilities
- Recreational activities for the residents
- Access to parks and areas to walk, run and exercise
- People are engaged to do healthy things

Physically and mentally healthy residents were identified by four stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to physically and mentally healthy residents that a healthy community should have:

- A positive outlook on both physical health and mental health
- Access to exercise programs
- The ability to feed both body and mind
- Ability to be strong physically

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

- Access to job opportunities
- Residents and businesses functioning cohesively
- Enough residents for businesses and vice versa
- Support that allows a resident to be productive
- Strong business
- Opportunities for the community

Educational opportunities were identified by three stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to educational opportunities that a healthy community should have:

- Good schools
- A strong commitment to neighborhood schools
- Ability to be strong educationally

QUESTION #5a: *Is this a healthy community?*

Out of eleven responses, two stakeholders felt their community was healthy; six felt their community was not healthy; and three stakeholders felt their community was somewhat healthy but could be healthier.

Some of the reasons stakeholders stated they believed the South Pointe area was healthy were:

- The city has adequate housing
- A new YMCA is being built
- Has a great hospital
- There are a variety of good stores
- Residents do not need to go outside of the community
- Has developed a health initiative

Some of the reasons stakeholders stated they did not believe the South Pointe area was healthy were:

- The community is not focused on being healthy
- Does not meet healthy criteria standards
- A majority of the people are overweight
- It could be healthier
- The community is economically depressed
- A lot of businesses have closed
- There are a lot of foreclosures
- The majority of kids in school are on free and reduced lunch plans

QUESTION #5b: How can you achieve a healthy community?

Out of eleven responses, one stakeholder stated they felt their community had already achieved a healthy status. Upon review of the other ten stakeholders' responses the following methods were identified as being effective in achieving a healthy community.

- Work on economic development (e.g. bring in new business and maintain current business)
- Provide job opportunities
- Provide sustainability for the inner city and lower income residents
- Provide the tools to succeed
- Make healthcare easily accessible (i.e. a primary care clinic should provide a sliding scale fee)
- Improve scheduling done by healthcare facilities and the hospital
- Hospital should provide outreach to residents, support to the community and promote awareness
- Build healthcare centers that reach out to the community
- Provide better training to staff at the facilities
- Increase awareness through networking, collaboration and outreach
- Educate the community on healthy living
- Improve the overall well being of the community
- Enforce housing codes and provide adequate housing
- Provide recreational programs for families including after school activities for youths
- Create green space and health initiatives
- Improve infrastructure
- Provide a safe environment for residents
- Provide accessible healthy food for the residents
- The school system needs to get its act together

QUESTION #6: Please describe your vision of what your community should look like in 5-10 years?

The eleven stakeholders interviewed identified the following factors in their visions of what the South Pointe area should look like in five to ten years:

• It will have a lot of green space

- Essential services will be in walking distance
- The YMCA will provide a number of recreational activities
- The educational system will be improved
- The city will promote both mental and physical health
- All the residents needs will be met by a great hospital and city services regardless of socioeconomic status
- It will be a place where health initiatives are in place and residents are encouraged to live healthy lifestyles through promotion of healthy choices (e.g. walking and eating healthy) and healthy food will be available to residents including students
- Members of the community will take more responsibility for their health and lifestyles
- There will be a strong hospital that provides outreach and services
- The community will be a thriving safe and comfortable place to live where residents have a good quality of life
- There will be growth of sustainable businesses in the community (i.e. technology-based businesses) that will be strong economically providing residents with jobs and the decreasing the unemployment rate
- The community will have adequate housing for seniors, disabled and families
- There will be more connection between all levels of the community
- There will be an increase in foreclosures, families in need and academic challenges

QUESTION #7: In order to achieve your vision of a healthy community, talk about some of the strengths/resources this community has to build upon. List strengths/resources this community could build on and describe how those strengths/resources could be used?

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

- Community services:
 - An active police force
 - Hospitals and long term care facilities
 - Healthcare systems working together to provide progressive medical care
 - The hospital provides educational health forums and seminars
 - City government
 - o Partnership between the city and the hospital
 - Superintendent plans to develop partnership with the city
 - O The school district is committed to the children and their families
 - Colleges offer a multitude of programs
 - Recreation programs
- A safe community:
 - Low crime
- An attractive place to live and do business:
 - o Recent ten million dollar infrastructure investment
 - Affordable and attractive housing stock
 - Centrally located
 - New businesses coming into the community
 - Corporations are strong and giving back to the community

- Financially strong
- Quality residents:
 - Strong cultural connections
 - Different types of nationalities
 - There are solid, good people in the community

QUESTION #8: In your opinion, what do you think are the 2 most pressing problems and/or barriers facing residents in your community that is holding your community back from achieving your vision? Please explain why.

The eleven stakeholders interviewed identified the following problems and/or barriers as holding the residents of the South Pointe area back from achieving their previously defined visions:

- Lack of resident responsibility:
 - Lack of awareness (i.e. residents do not know how to access services)
 - Lack of parental involvement in the school system
 - Lack of community commitment to help families with young children
 - Single parents are stretched to the limit and cannot meet their child's needs
 - Working parents do not set good eating and habits for their children
 - Parents are not exercising and eating healthy
 - Families are not working together in a holistic way
- Lack of access to and education about healthy options:
 - o People are not educated on how to live healthy
 - No healthy grocery store chains
 - Too many fast food restaurants
 - No engagement of people in the community wanting to become healthy
- Meeting the needs of an aging population:
 - Less capable of doing things for themselves (e.g. mowing, snow removal and transportation)
 - Puts a burden on the city
- Financial resources are scarce:
 - Funds are scarce
 - State dollars have cut back
 - Increase in city taxes to maintain services
 - Increased unemployment
 - Decreased socio-economic status
 - Lack of sustainable jobs
- Poor infrastructure:
 - Limited housing
 - Poor roads and sidewalks
 - Lack of parks and a recreation center
 - Traffic and delays due to inability to support population growth
- Safety:
 - o Residents' perception of safety in the community is negative
 - There is crime but not as much as residents perceive

- School system:
 - Poor education

QUESTION #9: Do you believe there are adequate community resources available to address these issues/problems?

Out of eleven responses, seven stakeholders responded that they believe there are adequate resources available in the South Pointe area to address the aforementioned issues/problems. Three stakeholders did not believe adequate resources were available and one stakeholder was not sure.

Several stakeholders that believed there were adequate community resources to resolve the previously identified problems/issues also felt that resources could be improved and/or ensured by: developing an outreach program for the community, increasing collaboration, identifying leadership to move communities in a positive direction, improving delegation and smart strategic use of available resources, preparing for resources to continue to shrink and continuing to increase employment with an influx of new businesses.

The three stakeholders that believed there were not adequate community resources to resolve the previously identified problems/issues cited the need for new partnerships and connections throughout the community, a lack of state funding and a limited police force as the basis for their beliefs.

QUESTION #10: Do you see any emerging community needs in the future that were not mentioned previously?

Several additional concerns were mentioned and previously expressed concerns were expounded upon:

- The hospital needs to communicate better with the community.
- There is a fear that South Pointe Hospital might be leaving the community.
- There is not enough citywide recreation for the community to get involved in.
- More young adults are moving back home which can be solved by providing better jobs for youth.
- The health and wellness of children is not being addressed because children are overweight, have multiple allergies and disabilities.
- Political leaders can become more proactive in the reduction of Trans fats in fast food restaurants.

QUESTION #11: Any additional comments or questions?

Two out of the eleven stakeholders interviewed chose to provide additional comments. Below are the additional comments made by stakeholders:

• The community needs to rethink how they do things. The community needs to work together. The business world and healthcare world do not work together; there is no connection.

•	Warrensville Heights is a wonderful community. The community is a place willing to learn and the residents are feeling empowered to be proactive and take control of their own health. You can live a good, long, healthy life if you take more responsibility.		

APPENDIX 1:

TRIPP UMBACH



KEY COMMUNITY INFORMANT QUESTIONN AIRE

Tit	ime:le:lte:
	Please tell us what community you are speaking on behalf of, such as a region, county, city, town, or a neighborhood. Please be specific.
	How long have you lived in this community? Less than 5 years5 - 15 years15 or more years Your position in the community:EducatorBusiness OwnerBusiness ProfessionalPolitical LeaderMinister/Pastor/Reverend/PriestOrganization memberCommunity LeaderNon-ProfitOther
4.	How long have you held your current position?
5.	How would you describe a healthy community?

5a. Is this a healthy community?
5b. How can you achieve a healthy community?
6. Please describe your vision of what your community should look like in 5 – 10 years?
7. In order to achieve your vision of a healthy community, talk about some of the strengths/resources this community has to build upon. List strengths/resources this community could build on and describe how those strengths/resources could be used.
Community Strength #1
Community Strength #2

8. In your opinion, what do you think are the 2 most pressing problems and/or barriers facing the residents in your community that is holding your community back from achieving your vision? Please explain why.
Community Issue #1
Community Issue #2
Community 15500 #2
Do you believe there are adequate community resources available to address these issues/problems?
10. Do you see any emerging community needs in the future that were not mentioned previously? (Please be as specific as possible)
11. Any additional comments or questions?



APPENDIX D:

South Pointe Hospital Focus Group Summary -- Residents Familiar with Diabetic Issues Group

RESIDENTS THAT ARE FAMILIAR WITH DIABETIC ISSUES FOCUS GROUP INPUT

Community:

South Pointe Hospital service area

INTRODUCTION:

The following qualitative data were gathered during a discussion group conducted with a target population of residents that are familiar with diabetic issues in the South Pointe Hospital service area. The target population was defined by an advisory committee of South Pointe Hospital executive leadership. South Pointe Hospital is a 213-bed acute care, community teaching hospital and also one of nine Cleveland Clinic community hospitals in Northeast Ohio. The discussion group was conducted by Tripp Umbach consultants and was located at the Southeast YMCA. Each participant was provided an incentive of twenty-five dollars for participating. Discussion groups were conducted using a discussion guide previously created by Tripp Umbach and reviewed by the South Pointe Hospital executive leadership project team. The purpose of this discussion group was to identify health issues and concerns affecting residents with diabetes in the South Pointe Hospital service area as well as ways to address those concerns for this specific population.

GROUP RECOMMENDATIONS:

The group provided many recommendations to address health issues and concerns for residents with diabetes that live in the South Pointe Hospital service area. Below is a brief summary of the recommendations:

- **Provide a bi-monthly community forum at the YMCA:** The YMCA should host a community forum every two months in which a broad range of community issues are discussed including information about available programs and services as well as programs and services that are needed. The forums should involve residents of all ages. Providing a community forum at regular intervals would increase collaboration and information sharing and unite residents. Currently there is little collaboration taking place in the community and residents do not discuss community issues on a regular basis.
- Increase dissemination of information: Information should be disseminated more extensively
 using a variety of methods such as media outlets, community newsletters, event flyers, resource
 booklets and canvassing the neighborhood. Increasing information dissemination would
 decrease confusion and increase residents' awareness about and participation in events,
 programs and services. Currently many residents are unaware of events, programs and services
 available in the community.
- Residents should inform themselves: Residents should enroll in available associations, clubs, and programs that disseminate information. Enrolling in programs that provide information would provide a link to the community and increase residents' awareness of and participation in events programs and services.

- Provide community specific pamphlets about available programs and services: Cleveland Clinic should provide pamphlets that are community specific in a similar format to the Healthwise Handbook. Providing a community specific resource pamphlet would inform residents of programs and services Cleveland Clinic offers in their communities. Informing residents of programs and services available to them could decrease confusion and increase their participation in those programs and services. Currently residents are not sure where to seek medical services or what is available to them.
- Increase community collaboration: Communities need to increase collaboration on all levels
 including with South Pointe Hospital. South Pointe Hospital could involve residents from each of
 the communities they serve in the planning and implementation of their annual fair. Increasing
 collaboration with residents would bring residents together in a meaningful way, develop a
 connection between communities and the hospital and increase the relevance of the fair to
 communities served.
- Residents take responsibility for their own care: Residents should take responsibility for their
 own care by writing down their health questions before they leave the house for a medical
 appointment and making sure they get answered by the doctor during their visit. By taking
 responsibility for their own care residents are better able to communicate their needs to their
 doctor and ensure those needs are met.
- Increase the number of community health fairs: South Pointe has a terrific turnout to all of their health fairs. They should build on that connection with the community and hold additional fairs and events that focus on health prevention and education. Increasing the number of health fairs would increase residents' awareness about preventive education and increase healthy behavior in the community.
- Residents could request prescription medications from drug companies: Lower income diabetic residents that cannot afford their prescriptions on an ongoing basis should contact the drug companies. Often drug companies will subsidize the cost of prescriptions or provide them for free if patients cannot afford them. Seeking financial help for prescription medications can ensure diabetic residents remain healthy and take their medication regularly.
- Provide a regional directory of diabetic resources: Hospitals, clinics and pharmacies should
 collaborate with the Diabetic Association of Greater Cleveland to publish a directory of
 resources available in the region for diabetic patients. There are many resources for lower cost
 and/or free prescriptions and testing equipment including strips. A regional resource directory
 would guide diabetic residents in their search for the materials they need to remain healthy and
 safe.
- Provide diabetic prevention education: South Pointe Hospital should work with each community to offer classes and training on diabetes prevention and wellness to diabetic residents. Potential topics could include healthy cooking, grocery shopping, nutrition, testing and responding to high/low blood sugar readings (e.g. Giant Eagle offers a diabetic class taught by a nutritionist). Providing additional prevention education may reduce the prevalence of diabetes and increase the wellness of diabetic residents.

PROBLEM IDENTIFICATION:

During the discussion group process, residents that are familiar with diabetic issues discussed four health issues and concerns in their community. These were:

- 1. Lack of collaboration and information dissemination
- 2. Limited access to primary and preventive health care
- 3. Inadequate community services
- 4. Limited access to transportation

LACK OF COLLABORATION AND INFORMATION DISSEMINATION

Residents that are familiar with diabetic issues indicated that there is a lack of collaboration and information dissemination among organizations in the community causing service duplication, a lack of awareness and confusion among residents.

Contributing Factors:

- All groups in the community are not sharing information or collaborating with one another limiting residents' access to information, causing service duplication and a lack of participation in community events programs and services.
- Programs and services are duplicated in the community (i.e. Silver Sneakers program is offered at the YMCA and community center).
- Many residents are not aware of events, programs and services available in their communities.
- Information about available events, programs and services is not well publicized causing a lack of awareness and confusion (e.g. United Way's #211 referral service, clinic locations, health fairs, etc.).
- Some facilities do not offer the same services that other facilities offer making it difficult to determine where to go for specific services (i.e. Some METRO facilities do not have services that other facilities offer).

Mitigating Resources:

Residents that are familiar with diabetic issues identified the following resources in their community that they felt could help increase collaboration and access to information:

- United Way #211 referral service is helpful if you have issues
- Maple Heights publishes and disseminates a newsletter
- Kaiser Health Insurance provides a directory of doctors and facilities
- Shaker Heights provides a welcome package to new residents with coupons, phone numbers and maps of the community
- Shaker Lights, a magazine, provides information about community events
- Cleveland Clinic publishes a booklet that offers community residents information regarding programs

Group Suggestions/Recommendations:

Residents that are familiar with diabetic issues offered the following as possible solutions to increase collaboration and access to information in their community:

- Provide a bi-monthly community forum at the YMCA: The YMCA should host a community
 forum every two months in which a broad range of community issues are discussed including
 information about available programs and services as well as programs and services that are
 needed. The forums should involve residents of all ages. Providing a community forum at regular
 intervals would increase collaboration and information sharing and unite residents.
- Increase dissemination of information: Information should be disseminated more extensively using a variety of methods such as media outlets, community newsletters, event flyers, resource booklets and canvassing the neighborhood. Increasing information dissemination would decrease confusion and increase residents' awareness about and participation in events, programs and services.
- **Residents should inform themselves:** Residents should enroll in available associations, clubs, and programs that disseminate information. Enrolling in programs that provide information would provide a link to the community and increase residents' awareness of and participation in events programs and services.
- Provide community specific pamphlets about available programs and services: Cleveland Clinic should provide pamphlets that are community specific in a similar format to the Healthwise Handbook. Providing a community specific resource pamphlet would inform residents of programs and services Cleveland Clinic offers in their communities. Informing residents of programs and services available to them could decrease confusion and increase their participation in those programs and services.
- Increase community collaboration: Communities need to increase collaboration on all levels including with South Pointe Hospital. South Pointe Hospital could involve residents from each of the communities they serve in the planning and implementation of their annual fair. Increasing collaboration with residents would bring residents together in a meaningful way, develop a connection between communities and the hospital and increase the relevance of the fair to communities served.

LIMITED ACCESS TO PRIMARY AND PREVENTIVE HEALTH CARE:

Residents that are familiar with diabetic issues indicated that there is limited access to primary and preventive health care as the result of insurance restrictions, a lack of services, poor service provision and/or residents being uninsured or underinsured.

Contributing Factors:

• Insurance restrictions limit access to primary and preventive care for residents with diabetes due to limited coverage of pre-existing conditions.

- There are not many health care resources for uninsured/underinsured residents of Bedford Heights.
- Silver sneakers, a fitness program for seniors, is covered by some health insurance plans and not by others causing residents to pay out of pocket sometimes as much as \$103.00 dollars every three months to participate.
- Uninsured residents find it difficult to get medical care and at times the process can be cumbersome (i.e. paperwork required to be rated at METRO).
- Some residents do not take responsibility for their own wellbeing.
- Diabetic residents indicated it is difficult to secure affordable prescriptions and testing equipment on an ongoing basis.
- New patients seeking medical services at METRO Hospital are asked if they mind seeing a resident. Many participants did not like the idea of being seen by a resident instead of a medical doctor.
- Walk in medical services are not readily available and many participants indicated it is difficult to get to a scheduled appointment on time due to transportation issues.
- There is not enough outreach about preventive care such as health fairs, trainings, seminars, nutritional classes, etc.
- Participants felt that Cleveland Clinic classes were generic, expensive and provided limited practical information.
- Residents indicated it is difficult to practice prevention as a result of healthy food being unaffordable and an increase in the prevalence of unhealthy eateries in the community.

Mitigating Resources:

Residents that are familiar with diabetic issues identified the following resources in their community that they felt could improve access to primary and preventive health care:

- Financial subsidy for classes including Silver Sneakers is available at the YMCA
- Most participants do not have problems getting a medical appointment
- Lee Harbor House takes walk-in appointments
- NEON is available but is difficult to get to
- There are multiple excellent health resources available
- A diabetic nurse is available to check on patients monthly
- A nurse hotline is available to provide information and answer questions
- Kaiser provides phone appointment with a doctor
- METRO allows patients to choose to see a resident or medical doctor
- Residents tend to be more thorough than attending physicians and provide follow-up with patients
- South Pointe has high attendance rates at their health fairs
- Diabetes Association of Greater Cleveland provides prevention services (i.e. classes about cooking, grocery shopping with diabetes, how to do correct readings and responding to low/high blood sugar)
- Giant Eagle will provide free prescriptions
- METRO social services will help patients secure free diabetic equipment

Group Suggestions/Recommendations:

Residents that are familiar with diabetic issues offered the following as possible solutions to improve access to primary and preventive health care in their community:

- Residents take responsibility for their own care: Residents should take responsibility for their
 own care by writing down their health questions before they leave the house for a medical
 appointment and making sure they get answered by the doctor during their visit. By taking
 responsibility for their own care residents are better able to communicate their needs to their
 doctor and ensure those needs are met.
- Increase the number of community health fairs: South Pointe has a terrific turnout to all of their
 health fairs. They should build on that connection with the community and hold additional fairs
 and events that focus on health prevention and education. Increasing the number of health fairs
 would increase residents' awareness about preventive education and increase healthy behavior
 in the community.
- Residents could request prescription medications from drug companies: Lower income diabetic
 residents that cannot afford their prescriptions on an ongoing basis should contact the drug
 companies. Often drug companies will subsidize the cost of prescriptions or provide them for
 free if patients cannot afford them. Seeking financial help for prescription medications can
 ensure diabetic residents remain healthy and take their medication regularly.
- Provide a regional directory of diabetic resources: Hospitals, clinics and pharmacies should
 collaborate with the Diabetic Association of Greater Cleveland to publish a directory of
 resources available in the region for diabetic patients. There are many resources for lower cost
 and/or free prescriptions and testing equipment including strips. A regional resource directory
 would guide diabetic residents in their search for the materials they need to remain healthy and
 safe.
- Provide diabetic prevention education: South Pointe Hospital should work with each community to offer classes and training on diabetes prevention and wellness to diabetic residents. Potential topics could include healthy cooking, grocery shopping, nutrition, testing and responding to high/low blood sugar readings (e.g. Giant Eagle offers a diabetic class taught by a nutritionist). Providing additional prevention education may reduce the prevalence of diabetes and increase the wellness of diabetic residents.

INADEQUATE COMMUNITY SERVICES:

Residents that are familiar with diabetic issues indicated that community services are inadequate due to funding cuts, a lack of facilities, poor service provision, and the absence of outreach efforts.

Contributing Factors:

• State funding to many communities and community based organizations is being cut causing a dearth of resources for activities such as outreach and prevention.

- Some communities do not have adequate community services (i.e. Maple Heights lacks a community center).
- Some participants indicated that staff can be unfriendly at facilities where they seek medical treatment.
- Participants felt there were not adequate community services available for adolescents.
- Participants expressed an interest in seeing more community festivals and fairs.

Mitigating Resources:

Residents that are familiar with diabetic issues identified the following resource in their community that they felt improved the lack of community services:

• The Bedford Chamber of Commerce is a strong resource

Group Suggestions/Recommendations:

Residents that are familiar with diabetic issues did not offer suggestions or recommendations to improve the lack of community services.

LIMITED ACCESS TO TRANSPORTATION:

Residents that are familiar with diabetic issues indicated that there is limited access to transportation due to the removal of the circular and a reduction in available bus routes.

Contributing Factors:

- PERA provides transportation to elderly and disabled residents as long as they schedule two
 weeks in advance.
- RTA bus routes have been reduced making it difficult to use public transportation.
- The circular bus service was eliminated making public transportation less convenient.
- There are no shuttle services available for medical appointments in some communities (i.e. Beachwood).

Mitigating Resources:

Residents that are familiar with diabetic issues identified the following resources in their community that they felt could improve access to transportation:

- METRO provides discount parking through their Senior Advantage Program
- Some residents have access to private transportation
- METRO provides transportation for medical appointments to residents in many communities.
- PERA provides transportation to senior and disabled residents

Group Suggestions/Recommendations:

Residents that are familiar with diabetic issues did not offer suggestions or recommendations to improve access to transportation.

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	FO	CU	ıs	GR	OI	ΙP
C.	гΟ	CU	J	σ	\mathbf{c}	JF

- 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.)

- 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 E:

South Pointe Hospital Focus Group Summary -- Underinsured or Uninsured Residents Group

UNDERINSURED OR UNINSURED RESIDENTS FOCUS GROUP INPUT

Community:

South Pointe Hospital service area

INTRODUCTION:

The following qualitative data were gathered during a discussion group conducted with a target population of residents that are underinsured or uninsured in the South Pointe Hospital service area. The target population was defined by an advisory committee of South Pointe Hospital executive leadership. South Pointe Hospital is a 213-bed acute care, community teaching hospital and also one of nine Cleveland Clinic community hospitals in Northeast Ohio. The discussion group was conducted by Tripp Umbach consultants and was located at the Harvard Community Center. Each participant was provided an incentive of twenty-five dollars for participating. Discussion groups were conducted using a discussion guide previously developed by Tripp Umbach and reviewed by the South Pointe Hospital executive leadership project team. The purpose of this discussion group was to identify health issues and concerns affecting residents that are underinsured or uninsured in the South Pointe Hospital service area as well as ways to address those concerns for this specific population.

GROUP RECOMMENDATIONS:

The group provided many recommendations to address health issues and concerns for residents that are underinsured or uninsured that live in the South Pointe Hospital service area. Below is a brief summary of the recommendations:

- Provide a service that helps underinsured/uninsured residents secure medication: South Pointe
 Hospital should provide a service that ensures underinsured/uninsured residents are able to
 secure medications they are prescribed. There are many programs that help people get their
 medication when they cannot afford it but residents are not aware of these programs and often
 have difficulty completing the required paperwork. Providing a service to help residents secure
 medication would increase the likelihood that they will take the medications they are
 prescribed.
- Provide incentives for healthy behaviors: South Pointe Hospital should collaborate with local
 businesses to provide residents incentives for practicing healthy behaviors such as weight loss
 and physical fitness (e.g. the weight loss challenge at J.F.K. recreational center). Incentivizing
 such behaviors would increase the likelihood that residents would practice healthy behaviors
 resulting in a healthier community in which residents require health services less frequently.
 Currently there are few incentives for residents to practice healthy behaviors.

- Provide mobile dental services: Mobile dental services would provide routine dental care and
 prevention education to underinsured/uninsured residents to ensure the dental needs of
 residents are met. A mobile dental service would improve the health of residents and reduce
 dental emergencies among underinsured/uninsured residents. Currently
 underinsured/uninsured residents do not have adequate access to dental care.
- Increase the effectiveness of information dissemination in the community: The city should spend more money ensuring residents have access to information by identifying the most effective method for disseminating information in the specific community and then implementing that method (e.g. word of mouth, flyers, community calendar and mail inserts). Increasing residents' access to information would increase awareness and participation in events, programs and services. Currently residents are not receiving relevant up to date information.
- Provide a central information portal: The city should provide a central access point where available events programs and services can be located allowing residents to access this information when they need and/or want to. Providing a central access point for information about community events, programs and services would empower residents to seek out necessary information and increase their awareness and participation in available events programs and services. Currently information is not centralized and residents often are unaware of resources, events, program and services available in the community.
- Provide community health fairs and outreach services: South Pointe Hospital should provide community health fairs and ongoing outreach services to increase residents' awareness about prevention, programs and services available at the hospital and in the community. Increasing residents' awareness about programs and services the hospital offers would increase their participation in those programs and services. Increasing residents' awareness about prevention would increase the likelihood residents would practice prevention and improve the health of the community. Currently residents feel there are not adequate prevention services available in their community.
- Residents inform one another: Residents need to collaborate with one another and begin
 sharing information amongst them to ensure each has access to the most up to date relevant
 information about events, programs and services available in the community. Residents sharing
 information with one another would increase access to information and connect residents with
 each other and the community. Currently residents are not sharing information enough for
 everyone to remain informed.
- Hospitals should collaborate with churches to ensure the availability of healthy food: Hospitals should collaborate with local churches to provide fresh healthy food to residents because many residents are using this service. Increasing the availability of healthy food supports the nutritional health of residents. Improving the nutritional health of residents could reduce the risk of lifestyle diseases such as diabetes. Currently residents feel there is not enough healthy food or fresh produce available in their community.

- Begin providing prevention education to families early: Hospitals should begin teaching
 mothers and families about healthy nutrition and available resources after the birth of a child
 and before discharge. Providing this type of prevention education would empower families to
 make healthier choices for themselves and their children. Empowering families to make
 healthier choices could improve the health of the community overall and cause residents to
 require medical services less frequently. Currently this type of services is not made available to
 new mothers.
- Use available lots for farmers markets: The city should begin to use available lots for farmers markets that the community could get involved in allowing residents greater access to fresh produce. Increasing access to fresh produce would improve the nutritional health of residents.
- Provide more educational classes: The hospitals should collaborate with local resources (e.g. the food bank) to provide nutrition education classes to residents. Nutrition education classes would increase residents' awareness about healthy nutrition which could improve residents' nutritional health. Improving residents' nutritional health could improve their overall health causing residents to require medical services less frequently. Currently residents feel there are not enough nutrition education classes available in the community.
- Residents should get more involved with community garden clubs: Increasing resident
 involvement in community garden clubs would increase their access to seasonally fresh
 produce. Harvard Community Center has a garden club with twenty garden systems that are
 available for resident participation. Residents' involvement in community garden clubs would
 empower residents to grow and harvest their own fresh produce increasing their access to fresh
 produce and improving their nutritional health. Currently many residents are not involved in the
 garden clubs at Harvard Community Center.

PROBLEM IDENTIFICATION:

During the discussion group process, residents that are underinsured or uninsured discussed four health issues and concerns in their community. These were:

- 1. Limited access to health services
- 2. Lack of collaboration and information dissemination
- 3. Limited access to healthy food options
- 4. Lack of access to transportation

LIMITED ACCESS TO HEALTH SERVICES:

Residents that are underinsured or uninsured indicated that health services in the South Pointe Hospital service area are limited in the areas of primary and preventive medical care, mental health care, and dental care due to a lack of insurance, services, awareness and financial resources.

Contributing Factors:

- Uninsured emergency medical services are not available on a sliding scale fee and are often unaffordable.
- Some participants would prefer to see a medical doctor instead of a physician's assistant or nurse practitioner causing them to avoid clinic services.
- Uninsured medical screenings are unaffordable for participants resulting in a lack of participation in prevention services.
- Participants felt there is a lack of events that promote health and prevention education such as health fairs.
- Programs that incentivize healthy behavior (i.e. weight loss and fitness) are not readily available for underinsured/uninsured residents.
- Participants felt they do not obtain all the information they need during a medical appointment due to being rushed and doctors having an undesirable "bedside manner".
- Underinsured/uninsured residents are unaware of available affordable mental health services
 due to a lack of outreach to this specific population and facility closures resulting in a lack of
 access to mental health care including psychotropic medications and therapeutic services.
- Dental services are not readily available to underinsured/uninsured residents.

Mitigating Resources:

Residents that are underinsured or uninsured identified the following resources in their community that they felt could help increase their access to health services:

- METRO Hospital and NEON South charge underinsured/uninsured income based rates for medical services
- The Healthy Growth Program refers mothers for needed services
- Medical residents provide good health care services
- Nurse practitioners can see patients quicker than doctors sometimes
- Some doctors take time with their patients

Group Suggestions/Recommendations:

Residents that are underinsured or uninsured offered the following as possible solutions to improve their access to health services in their community:

- Provide a service that helps underinsured/uninsured residents secure medication: South Pointe
 Hospital should provide a service that ensures underinsured/uninsured residents are able to
 secure medications they are prescribed. There are many programs that help people get their
 medication when they cannot afford it but residents are not aware of these programs and often
 have difficulty completing the required paperwork. Providing a service to help residents secure
 medication would increase the likelihood that they will take the medications they are
 prescribed.
- **Provide incentives for healthy behaviors:** South Pointe Hospital should collaborate with local businesses to provide residents incentives for practicing healthy behaviors such as weight loss

and physical fitness (e.g. the weight loss challenge at J.F.K. recreational center). Incentivizing such behaviors would increase the likelihood that residents would practice healthy behaviors resulting in a healthier community in which residents require health services less frequently.

Provide mobile dental services: Mobile dental services would provide routine dental care and
prevention education to underinsured/uninsured residents to ensure the dental needs of
residents are met. A mobile dental service would improve the health of residents and reduce
dental emergencies among underinsured/uninsured residents.

LACK OF COLLABORATION AND INFORMATION DISSEMINATION:

Residents that are underinsured or uninsured indicated that there is a lack of collaboration and information dissemination causing a lack of awareness about and participation in available programs and services.

Contributing Factors:

- Events, programs and services are not widely publicized causing a lack of participation (i.e. health fairs, United Way's #211 referral service, free services).
- Many residents do not have access to information outlets being used to disseminate information (i.e. Channel 21 requires cable service, email requires internet service).
- Hospitals do not reach out to the community to provide community specific information (e.g. flyers, pamphlets, etc)
- Residents in the community are not informing each other enough and the primary method of information dissemination in the community is word of mouth.
- Residents are not taking responsibility for finding out needed information.
- PTA used to provide collaboration between schools and parents but they are not as effective today.
- Residents are overwhelmed with disorganized duplicated information that they find irrelevant to their needs.

Mitigating Resources:

Residents that are underinsured or uninsured identified the following resources in their community that they felt could improve collaboration and information dissemination:

- Churches disseminate information
- United Way's #211 referral service provides relevant information and referrals
- Residents that have access to cable service are able to get information about free events, programs and services
- WKYC provides information about FREE events
- Many organizations disseminate information via email and the internet

Group Suggestions/Recommendations:

Residents that are underinsured or uninsured offered the following as possible solutions to improve collaboration and information dissemination in their community:

- Increase the effectiveness of information dissemination in the community: The city should spend more money ensuring residents have access to information by identifying the most effective method for disseminating information in the specific community and then implementing that method (e.g. word of mouth, flyers, community calendar and mail inserts). Increasing residents' access to information would increase awareness and participation in events, programs and services.
- Provide a central information portal: The city should provide a central access point where
 available events programs and services can be located allowing residents to access this
 information when they need and/or want to. Providing a central access point for information
 about community events, programs and services would empower residents to seek out
 necessary information and increase their awareness and participation in available events
 programs and services.
- Provide community health fairs and outreach services: South Pointe Hospital should provide
 community health fairs and ongoing outreach services to increase residents' awareness about
 prevention, programs and services available at the hospital and in the community. Increasing
 residents' awareness about programs and services the hospital offers would increase their
 participation in those programs and services. Increasing residents' awareness about prevention
 would increase the likelihood residents would practice prevention and improve the health of the
 community.
- Residents inform one another: Residents need to collaborate with one another and begin
 sharing information amongst themselves to ensure each has access to the most up to date
 relevant information about events, programs and services available in the community. Residents
 sharing information with one another would increase access to information and connect
 residents with each other and the community.

LIMITED ACCESS TO HEALTHY FOOD OPTIONS:

Residents that are underinsured or uninsured indicated there is limited access to healthy food options in their communities due to a lack of transportation, the cost of healthy food and restrictions on food pantry services.

Contributing Factors:

- Participants felt there are not enough places that provide fresh produce.
- There is a farmers market but it is difficult for residents to get there due to a lack of transportation.
- Many residents can not afford the higher cost of healthy food.

- Food pantry services are available but some food pantries will not provide food to an individual who lives outside of the appropriate zip code(s).
- Corner stores are readily available and they sell food but it is not fresh or healthy.
- WIC offices provide mothers with fresh food options and exclude all other residents.

Mitigating Resources:

Residents that are underinsured or uninsured identified the following resources in their community that they felt increases access to healthy food:

- Food pantries and many churches are providing free food to residents some of which is fresh food
- WIC offices provide mothers with fresh food options
- Harvard Community Center garden club has twenty garden systems

Group Suggestions/Recommendations:

Residents that are underinsured or uninsured offered the following as possible solutions to increase access to healthy food in their community:

- Hospitals should collaborate with churches to ensure the availability of healthy food: Hospitals
 should collaborate with local churches to provide fresh healthy food to residents because many
 residents are using this service. Increasing the availability of healthy food supports the
 nutritional health of residents. Improving the nutritional health of residents could reduce the
 risk of lifestyle diseases such as diabetes.
- Begin providing prevention education to families early: Hospitals should begin teaching
 mothers and families about healthy nutrition and available resources after the birth of a child
 and before discharge. Providing this type of prevention education would empower families to
 make healthier choices for themselves and their children. Empowering families to make
 healthier choices could improve the health of the community overall and cause residents to
 require medical services less frequently.
- **Use available lots for farmers markets:** The city should begin to use available lots for farmers markets that the community could get involved in allowing residents greater access to fresh produce. Increasing access to fresh produce would improve the nutritional health of residents.
- Provide more educational classes: The hospitals should collaborate with local resources (e.g. the food bank) to provide nutrition education classes to residents. Nutrition education classes would increase residents' awareness about healthy nutrition which could improve residents' nutritional health. Improving residents' nutritional health could improve their overall health causing residents to require medical services less frequently.
- Residents should get more involved with community garden clubs: Increasing resident
 involvement in community garden clubs would increase their access to seasonally fresh
 produce. Harvard Community Center has a garden club with twenty garden systems that are

available for resident participation. Residents' involvement in community garden clubs would empower residents to grow and harvest their own fresh produce increasing their access to fresh produce and improving their nutritional health.

LACK OF ACCESS TO TRANSPORTATION:

Residents that are underinsured or uninsured indicated that there is limited access to transportation due to the removal of the circular and a restricted medical transportation limiting residents' access to medical care and healthy food options.

Contributing Factors:

- There are resources that will provide transportation for medical appointments (i.e. Provide a Ride) but the service requires medical insurance, a doctors signature and is restricted to only the patient seeking medical care.
- The circular bus services was eliminated which provided residents convenient transportation for medical appointments and shopping.

Mitigating Resources:

Residents that are underinsured or uninsured identified the following resource in their community that they felt improved access to transportation:

• METRO and NEON South provide transportation for medical appointments

Group Suggestions/Recommendations:

Residents that are underinsured or uninsured did not offer suggestions or recommendations to improve access to transportation.

APPENDIX F:

South Pointe Hospital Focus Group Summary --Senior Residents Group

SENIOR RESIDENTS FOCUS GROUP INPUT

Community:

South Pointe Hospital service area

INTRODUCTION:

The following qualitative data were gathered during a discussion group conducted with a target population of senior residents in the South Pointe Hospital service area. The target population was defined by an advisory committee of South Pointe Hospital executive leadership. South Pointe Hospital is a 213-bed acute care, community teaching hospital and also one of nine Cleveland Clinic community hospitals in Northeast Ohio. The discussion group was conducted by Tripp Umbach consultants and was located at the Bedford Heights Community Center. Each participant was provided an incentive of twenty-five dollars for participating. Discussion groups were conducted using a discussion guide previously created by Tripp Umbach and reviewed by the South Pointe Hospital executive leadership project team. The purpose of this discussion group was to identify health issues and concerns affecting senior residents in the South Pointe Hospital service area as well as ways to address those concerns for this specific population.

GROUP RECOMMENDATIONS:

The group provided many recommendations to address health issues and concerns for senior residents that live in the South Pointe Hospital service area. Below is a brief summary of the recommendations:

- Provide in-home care as part of discharge planning: Hospitals should provide in-home care following any surgery and/or an inpatient stay to ensure seniors understand discharge instructions, are informed and able to recover fully at home. Providing in-home care would decrease seniors' risk after surgery and increase their comfort with and access to information about their own health status. Providing in-home care could also reduce the likelihood that seniors will return to the emergency room unnecessarily. Currently many seniors do not speak to the doctor after a procedure and they feel the discharge instructions are unclear.
- Provide additional staff to keep patients up to date: Hospitals and clinics should allot staff to
 inform patients about what is happening during lengthy exam room waiting periods. Seniors feel
 they would experience less stress and/or anxiety during medical appointments if they were
 aware of what was causing the wait time. Currently seniors can wait in an exam room up to 2
 hours before they see a doctor.
- Provide a central access portal for information: A central access portal for community specific information would empower seniors to access relevant information as they need it. Empowering seniors with the ability to locate relevant information when they need it would increase awareness of and participation in resources, events, programs and services as well as reduce the overwhelming feeling seniors have about the amount of information they receive. Currently seniors feel overwhelmed by the volume of information they receive.

• Provide a delivery services to meet basic senior needs: A delivery services should be available for a small fee to meet seniors' basic needs (i.e. grocery shopping). The delivery services could provide an aide that seniors could contact for help (e.g. request for grocery pickup and delivery) then the aide would complete the requests on a fee for service basis. Providing an aide to seniors in the community would reduce the daily necessity for transportation and ensure seniors' day-to-day needs are met. Currently seniors do not feel they have adequate information upon discharge from the hospital and often they end up back in the emergency room as a result.

PROBLEM IDENTIFICATION:

During the discussion group process, senior residents discussed four health issues and concerns in their community. These were:

- 1. Inadequate service provision
- 2. Ineffective information dissemination
- 3. Lack of safety
- 4. Lack of transportation and parking

INADEQUATE SERVICE PROVISION:

Senior residents indicated that while they have access to health resources the provision of services is poor due to scheduling difficulties, lengthy exam room waiting periods, inadequate communication from their doctors, poor bedside manner and a lack of support groups. Seniors felt that they did not have enough information about their individual health status causing them to feel uncomfortable, uninformed and scared.

Contributing Factors:

- It is difficult to schedule routine medical appointments because the phone process is lengthy and communication is done via email instead of talking to a person.
- It is difficult to see a doctor the same day because often seniors are told to go to the emergency room instead.
- Seniors felt that they do not receive adequate information about their health status due to lengthy exam room waiting periods and little face time with doctors causing seniors to feel uncomfortable, uninformed and scared.
- Seniors were dissatisfied with the bedside manner of many doctors due to a lack of communication before and after surgeries, a lack of personal connection and little to no time allotted for questions and answers. Seniors indicated this was a major service provision issue among surgeons and specialist at Cleveland Clinic Hospitals.
- There is often a lack of consistency in the staff seniors see during each visit resulting in the necessity to answer the same questions each time.
- Some participants did not feel comfortable speaking to physician's assistants or nurse practitioners because they wanted to see a medical doctor.

- Follow-up from discharge is often inadequate due to a lack of information on discharge instructions and an absence of communication with the doctor causing seniors to return to the emergency room at times when it may be unnecessary.
- Hospital bills list a doctor's name and no explanation of the service provided causing them to be unclear.
- There is a lack of support groups provided at South Pointe Hospital and in the community.

Mitigating Resources:

Senior residents identified the following resources in their community that they felt helps improve service provision:

- Primary care services are good
- HMO can secure a same day medical appointment
- Urgent Care Clinics are available
- Nurse on Call provides assessment and referral services over the phone
- Bedford Hospital has provided support groups
- The newspaper advertises support groups available in the community (i.e. church groups)
- Health Wise Connections provides information about support groups every three months
- Cleveland Clinic has a good EMR system
- Advice nurses are available through Cleveland Clinic to give general information and advice

Group Suggestions/Recommendations:

Senior residents offered the following as possible solutions to improve service provision in their community:

- Provide in-home care as part of discharge planning: Hospitals should provide in-home care
 following any surgery and/or inpatient stay to ensure seniors understand discharge instructions
 and are properly to recover at home. Providing in-home care would decrease seniors' postsurgery health risks and increase their comfort levels. Providing in-home care could also reduce
 the likelihood that seniors will return to the emergency room unnecessarily.
- Provide additional staff to keep patients up to date: Hospitals and clinics should allot staff to
 inform patients about what is happening during lengthy exam room waiting periods. Seniors feel
 they would experience less stress and/or anxiety during medical appointments if they were
 aware of what was causing the wait time.

INEFFECTIVE INFORMATION DISSEMINATION:

Senior residents indicated that the primary methods of disseminating information in their communities are largely ineffective due to a lack of awareness, disorganized and duplicated information, not using technology, and newspaper print being too small. The ineffective dissemination of information causes seniors to be unaware, misinformed and confused.

Contributing Factors:

- Many seniors are not aware of available resources, events, programs and services (i.e. the older adults resource guide, advice nurse service, location of urgent care clinics, etc.) causing a lack participation in and disuse of available resources.
- Seniors felt overwhelmed by the volume of information they receive that is often disorganized and duplicated.
- Many seniors do not access information via the internet due to a fear of technology and a lack of interest and/or understanding.
- Newspapers are the preferred method among many seniors for accessing information and the print is often too small for seniors to read comfortably.

Mitigating Resources:

Senior residents identified the following resources in their community that they felt could improve the effectiveness of information dissemination:

- Older Adults Resource Guide is available for county specific information in Ohio
- Many senior centers offer coordinators to provide information on available resources, programs and services.
- Many 50+ clubs offer informational speakers and pamphlets that address preventive care
- South Pointe Hospital offers classes and informational material (i.e. Health Wise connections)
- Many insurance companies mail out health information
- Many organizations offer technology classes (i.e. the high school, Light of Hearts Villa, the library, and the community center) though it is difficult to get on the schedule
- Many seniors read the newspaper for information

Group Suggestions/Recommendations:

Senior residents offered the following as possible solutions to improve the effectiveness of information dissemination in their community:

Provide a central access portal for information: A central access portal for community specific
information would empower seniors to access relevant information as they need it. Empowering
seniors with the ability to locate relevant information when they need it would increase
awareness of and participation in resources, events, programs and services as well as reduce the
overwhelming feeling seniors have about the amount of information they receive.

LACK OF SAFETY:

Senior residents indicated that there is a lack of safety due to an absence of street lights and young residents causing trouble resulting in some seniors not feeling safe in their communities, particularly after dark.

Contributing Factors:

- There are not enough street lights in the community causing the streets to be too dark at night.
- Some seniors do not feel safe in their community after dark.
- Seniors believe there are a lot of young children causing trouble in their communities.

Mitigating Resources:

Senior residents did not identify resources in their community that could increase safety.

Group Suggestions/Recommendations:

Senior residents did not offer suggestions or recommendations to increase safety in their community.

LACK OF TRANSPORTATION AND PARKING:

Senior residents indicated there is a lack of transportation and insufficient parking due to cumbersome scheduling requirements, inconvenient schedules, the lengthy distance to bus stops, and the absence of sidewalks. The lack of transportation and insufficient parking reduces mobility and limits seniors' access to primary and preventative health care.

Contributing Factors:

- Some seniors avoid seeking medical care at facilities that do not offer adequate parking and/or have expensive parking fees (i.e. Mary Mount Hospital and Cleveland Clinic Hospitals).
- Transportation provided by the county to senior and disabled residents (i.e. CRT service) is inconvenient and cumbersome requiring a week advance scheduling, inconvenient pick-up and drop off times. This can add up to four to six hours to the time required to attend medical appointments.
- Transportation provided by RTA to senior and disabled residents (i.e. PERA) has a cumbersome
 enrollment process, is not as handicap accessible and has similar issues with transportation time
 as the CRT service.
- The only public transportation available is the RTA bus service which requires seniors to walk long distances on streets without sidewalks to get to bus stops.
- Many seniors do not drive or have access to private transportation.

Mitigating Resources:

Senior residents identified the following resources in their community that they felt increase access to transportation and parking:

- The city provides a van/bus to transport seniors with in a seven mile radius which requires twenty-four hours advanced notice
- PERA and CRT services are available to senior and disabled residents
- Some seniors are able to drive or have access to private transportation

Group Suggestions/Recommendations:

Senior residents offered the following as a possible solution to increase access to transportation and parking in their community:

Provide a delivery services to meet basic senior needs: A delivery services should be available
for a small fee to meet seniors' basic needs (i.e. grocery shopping). The delivery services could
provide an aide that seniors could contact for help (e.g. request for grocery pickup and delivery)
then the aide would complete the requests on a fee for service basis. Providing an aide to
seniors in the community would reduce the daily necessity for transportation and ensure
seniors' day-to-day needs are met.

APPENDIX G:

South Pointe Hospital -- Inventory of Community Resources

Tripp Umbach completed an inventory of community resources available in the South Pointe 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 South Pointe Hospital community (40105, 44120, 44120, 44122, 44128, 44137, 44139, 44146, 44202, 44241, 44056, 44067, 44087, 44236) more than 85 community resources were identified with the capacity to meet the three community health needs identified in the South Pointe Hospital CHNA. (Please refer to the Community Health Needs Assessment Report to review the detailed community needs.)

An inventory of the resources in the South Pointe 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)

Table)																
		INVENTORY OF COMMUNITY R	ESOURCES AVAILAE	BLE TO ADDRESS COMMUI	NITY HEALTH NEEDS IDENTIFIED IN THE SOUTH	I POINTE HOS										
Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDERINSURED/UNINSURED	ACCESS TO AFFORDABLE HEALTH CARE AND MEDICAL SERVICE PROVISION	Primary Care Preventive Care	COMMUNITY AWARENESS AND COHESIVENESS	Collaboration	Outreach / Prevention Education	Dissemination of Information	NFRASTRUCTURE	ransportation Nutrition Education	vurrition Education Affordable healthy food choices	Parks and Recreation Housing
Organization/Provider 211 / First Call For Help	Portage	218 W. Main Street, Ravenna, OH 44266 ~(330)297-1424 ext. 119 ~ www.uwportage.org	More Information	No restriction	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 afterhours day care referral line. Provides printed directories for seniors, youth and others, and maintains a comprehensive database of health and human services.		a a		*	х	5	х	ш	FZ	. •	- I
211 / FIRST CALL FOR HELP	Summit	703 South Main Street, Suite 211 Akron, OH 44311 ~ ~1(888)212-5041	More Information	No restriction	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 afterhours day care referral line. Provides printed directories for seniors, youth and others, and maintains a comprehensive database of health and human services.				*	x		x				
211 / FIRST CALL FOR HELP - CLEVELAND	Cuyahoga	1331 Euclid Ave. Cleveland, OH 44115 ~ (216)436-2000 ~ www.211cleveland.org	More Information	No restriction	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 afterhours day care referral line. Provides printed directories for seniors, youth and others, and maintains a comprehensive database of health and human services.				*	x		x				
AKRON CHILDREN'S HOSPITAL PEDIATRICS – SOLON	Cuyahoga	34125 Solon Road Solon , OH 44139 ~ (440)349-0067	More Information	Juveniles	Pediatric primary, preventive, emergency and specialty medical care.	*	*	x x	*		x	x				
AKRON CHILDREN'S HOSPITAL PEDIATRICS – TWINSBURG	Summit	8054 Darrow Road, Suite 3 Twinsburg , OH 44087 ~(330)425-3344	More Information	Juveniles	Pediatric primary, preventive, emergency and specialty medical care.	*	*	хх	*		x	х				

Organization/Provider AKRON SUMMIT COMMUNITY	Counties Served	Contact Information 55 E. Mill Street Akron, Ohio 44309-2000 ~(330)376-7730	Internet Information More Information	Population Served Summit County residents	Services Provided Food bank, dental care, eye care, prevention	AFFORDABLE HEALTHCARE FOR UNDERINSURED/UNINSURED	ACCESS TO AFFORDABLE HEALTH CARE AND MEDICAL SERVICE PROVISION	Primary Care	COMMUNITY AWARENESS AND	Collaboration	Outreach / Prevention Education	Dissemination of Information	INFRASTRUCTURE	Transportation Nutrition Education	Affordable healthy food choices	Parks and Recreation Housing
ACTION, INC		~http://www.ascainc.org/about.html			education, shelter and referrals.	*	*)	*		x	x	*		x	
ALDERSGATE UNITED METHODIST CHURCH	Cuyahoga	4069 Eastwood Ln. Warrensville Hts., OH 44122 ~(216)921-4075 ~ worshipaumc.org	More Information	Residents of Warrensville, Highland Hills, North Randall and residents of Zip Code 44128	Provides a bag of non-perishable food for those in need.								*		х	
AURORA SENIOR ACTIVITY CENTER	Portage	129 West Pioneer Trail Aurora, Ohio 44202 ~(330)995-9148 ~ www.auroraoh.com	More Information	Seniors 55+	Provides recreational, social and physical activities, wan service, a free newsletter, meals on wheels, screenings, education, volunteer opportunities and a senior center with wellness activities, exercise classes and social opportunities.		*)	*		x	x	*	x	х	
BEACHWOOD COMMUNITY CENTER	Cuyahoga	25325 Fairmount Boulevard Beachwood, Ohio 44122 ~ (216)292-1970 ~recreation@beachwoodohio.com	More Information	Beachwood Residents of all ages	Provides recreational, social and physical activities, wan service, a free newsletter, meals on wheels, screenings, education, volunteer opportunities and a senior center with wellness activities, exercise classes and social opportunities.		*	,	*		x	x	*	x	x	x
BEACHWOOD FHC	Lake, Geauga, Summit, Portage and Cuyahoga	26900 Cedar Road Beachwood, Ohio 44112 ~(216)839-3000	More Information	No restrictions	Full service hospital with primary and preventive care, including Women's Health, and Pediatric health, etc.		*	x x	*		х	х		х		
BEDFORD HEIGHTS SENIOR SERVICES AND DISABILITIES DIV,	Cuyahoga	Jimmy Dimora Community Center ~ 5615 Perkins Rd. Bedford Hts., OH 44146 ~www.bedfordheights.gov	More Information	Seniors 60+ and persons with disabilities	Provides recreational, social and physical activities, van service, a free newsletter, meals on wheels, screenings, education, volunteer opportunities and a senior center with wellness activities, exercise classes and social opportunities.	*	*	x)	*		x	x	*	x	x	x

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDERINSURED/UNINSURED	ACCESS TO AFFORDABLE HEALTH CARE AND MEDICAL SERVICE PROVISION	orimary Care Preventive Care	COMMUNITY AWARENESS AND COHESIVENESS	Collaboration	Outreach / Prevention Education	Dissemination of Information	NFRASTRUCTURE	ransportation Mutrition Education	Affordable healthy food choices	Parks and Recreation	Housing
BRIDGE OF HOPE COMMUNITY	Cuyahoga	3949 Lee Rd. Cleveland, OH 44128 ~ (216)276-0571	More Information	Residents of 44128, 44122	Provides 3-4 days worth of groceries packed	~ _			- 0 0	Ŭ	J						
CENTER		~bohcc@sbcglobal.net		and 44120	according to family size.								*		x		
CENTER FOR COMMUNITY PROGRESS	All Counties	1001 Connecticut Avenue N.W., Suite 1235 ~Washington, D.C. 20036 ~ (877)542-4842	More Information	No restrictions	Community Progress exists to help meet the growing need in America's cities and towns for effective, sustainable solutions to turn vacant, abandoned, and problem properties into vibrant places.								*				x
CENTER OF HOPE & CHRISTIAN CUPBOARD	Portage	1034 West Main Street Ravenna, OH 44266-2708 ~(330)297-5454	More Information	Residents of Ravenna City, Ravenna Township, Charlestown, Diamond, Edinburg, Palmyra and Rootstown	Provides daily hot meals and food pantry assistance.								*		х		
CITY OF MAPLE HEIGHTS	Cuyahoga	15901 Libby Rd. Maple Hts., OH 44137 ~ (216)663-0552 ~ www.mapleheightsohio.com	More Information	Residents of Maple Heights	Provides a variety of recreational facilities and activities for residents of the City of Maple Heights. Facilities include parks, tennis courts, two outdoor swimming pools, a kiddie pool, picnic areas with grills, basketball courts, playgrounds, batting and golf cages, jogging and hiking trails. Offerings include swimming, tennis, baseball, softball, basketball, volleyball, soccer, and street		*	х	*		x	x	*	x	x	x	
CITY OF SHAKER HEIGHTS	Cuyahoga	3400 Lee Rd. Shaker Hts., OH 44120 ~ (216)491-1480 ~www.shakeronline.com	More Information	Residents of Shaker Heights	Provides immunizations, health screenings, and vital statistics records. Parks and recreation facilities.		*	хх	*		х	х	*			х	х
CLEVELAND HEIGHTS OFFICE ON AGING	Cuyahoga	1 Monticello Blvd. Cleveland Heights, OH 44118 ~(216)691-7377 ~ www.clevelandheights.com	More Information	Seniors 60+	Provides van service, a free newsletter, meals on wheels, screenings, education, volunteer and employment opportunities and a senior center with wellness activities, exercise classes and social opportunities.	*	*	x x	*		x	x	*	x	х		
CUYAHOGA COMMUNITY COLLEGE EASTERN CAMPUS	Cuyahoga	4250 Richmond Rd. Highland Hills, OH 44122 ~(216)987-3555	More Information	Age restrictions for specific services	Provides a variety of health services done by students who are supervised by professionals. Services include preventive blood pressure, cholesterol, and glucose screenings, eye glasses (including repairs and adjustments), and physical and occupational therapy services.	*	*	x x	*		x	x					
CUYAHOGA COUNTY BOARD OF	Cuyahoga	1341 Parkview Dr. Lyndhurst, 44124	More Information	No restriction	Immunizations, prevention education, outreach,	*	*	хх	*		х	х					
CVS MINUTECLINIC	Lake, Geauga, Summit, Portage and Cuyahoga	~(216)201-2001 ~ ccbh.net/ccbh/opencms/CCBH Chagrin Falls, Twinsburg, Woodmere, Solon, Willoughby, OH ~ www.minuteclinic.com	More Information	18 month +	and screening. Walk-in clinic services		*	хх	*			x					

Organization/Provider DIABETES PARTNERSHIP OF	Counties Served Cuyahoga, Lake,	Contact Information 3601 S Green Rd. #100 Beachwood, OH 44122 ~(216)591-	Internet Information	Population Served No restriction, Diabetes	Services Provided Provides education, research and advocacy for	AFFORDABLE HEALTHCARE FOR UNDERINSURED/UNINSURED	ACCESS TO AFORDABLE HEALTH CARE AND MEDICAL SERVICE PROVISION	Primary Care Preventive Care	COMMUNITY AWARENESS AND COHESIVENESS	Collaboration	Outreach / Prevention Education	Dissemination of Information	INFRASTRUCTURE	Transportation Nutrition Education	Affordable healthy food choices	Parks and Recreation	Housing
CLEVELAND	Lorain, Geauga, Portage, Summit	0800 ~ http://www.diabetespartnership.org/		patients	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.		*	х	*		х	x					
DIABETES RESOURCE GUIDE	Cuyahoga, Lake, Lorain, Geauga, Portage, Summit	3601 S. Green Rd. #100 Beachwood, OH 44122 ~(216)591- 0800 ~ http://www.diabetespartnership.org/	More Information	No restriction, Diabetes patients	Produces an annual directory of diabetes-related services in the six county agency service area, On the web site, and if necessary by mail.				*	х		х					
DROST FAMILY CENTER	Lake, Cuyahoga, Geauga, Portage, Summit	24075 Commerce Park Rd. Beachwood, OH 44122 ~(216)504-2608 ~ www.jfsa-cleveland.org	More Information	Russian-speaking Seniors 60+	Provides assistance with preparing for citizenship tests for older adults who are Russian-speaking. Also provides help with navigating local social service systems for this population.		*	x	*		x	x	*		х		
EMERGENCY FOOD LINE	Summit	703 South Main Street, Suite 211 Akron, Ohio 44311 ~1(888)212-5041 ~ www.infolineinc.org	More Information	Residents of Summit County	Provides referrals to area food pantries for individuals and families in need of a 3-day emergency supply of food or baby formula and								*		х		
FAIRHILL PARTNERS	Cuyahoga	12200 Fairhill Rd. Cleveland, OH 44120 ~ (216)421-1350 ~www.fairhillpartners.org	More Information	No restrictions	Provides a class where those with chronic illnesses (diabetes, fibromyalgia, hypertension, etc.) learn information and techniques to live effectively with their illness. Class is also appropriate for those who are managing the chronic disease of someone they care for.				*		х	x	*	Х	x	x	x
FAITH FILLED TRANSPORTATION	Cuyahoga	4022 Stilmore Rd. Cleveland, OH 44121 ~ (216)382-5075	N/A	N/A	Transportation								*	x			
FAMILY AND COMMUNITY SERVICES, INC	Portage	705 Oakwood Street, Suite 221 Ravenna, OH 44266 ~(330)297-7027 ~ www.portagefamilies.org	More Information	Portage County residents	Food bank, Hot meals, Clothing, Shelter, Prescription assistance, Health education, mental health services, Referrals, Senior services, Senior centers, Youth services and Family support services.	*	*	х	*	x	х	x	*	x	х		
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	18+	Non-emergency medical transportation								*	x			
GREATER CLEVELAND REGIONAL TRANSIT AUTHORITY	Cuyahoga County	1240 West 6th Street Cleveland, OH 44113-1302 ~(216)781- 1110 ~ www.riderta.com	More Information	No restrictions	Public transportation system with bus, rapid transit and paratransit service on approx. 100 routes with local and express service.								*	х		Ī	
GUIDE TO FREE OR AFFORDABLE HEALTH CARE FOR CHILDREN, TEENS AND ADULTS	Cuyahoga	5398 1/2 Northfield Rd. Maple Hts., OH 44137 ~(216)987- 8433 ~ employment.cuyahogacounty.us	More Information	No restriction	Provides a guide to low cost or free health care in Cuyahoga County. Particularly emphasizes programs which are free or offer sliding scales. Available in English and Spanish versions.	*			*	х	х	х					
HARVARD COMMUNITY SERVICES CENTER COMMUNITY NETWORKING	Cuyahoga	18240 Harvard Ave. Cleveland, OH 44128 ~ (216)991-8585 ~ hcsc@harvardcsc.org	More Information	No restrictions	Works with residents, churches, educators, businesses and organizations to bring the community together to address concerns and issues that affect the neighborhood.				*	х	x	x	*	Х	x	х	х

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDERINSURED/UNINSURED	ACCESS TO AFFORDABLE HEALTH CARE AND MEDICAL SERVICE PROVISION	Primary Care Preventive Care	COMMUNITY AWARENESS AND COHESIVENESS	Ollaboration	outreach / Prevention Education	Dissemination of Information	NFRASTRUCTURE	ransportation Jutrition Education	Affordable healthy food choices	arks and Recreation	Housing
HEBREW SHELTER HOME -	Cuyahoga	Beachwood, OH 44122	More Information	No restrictions	Provides shelter and kosher food with minimal	∢ ⊃	4 4		0 0	U	0		=	<u>⊢</u> 2	⋖		
HOMELESS SHELTER					cooking facilities to eligible persons. Shelter capacity is 5 bedrooms. No private rooms available for individuals. Families may stay together. Services include an indoor and outdoor play area for children.								*		x		x
KENT SOCIAL SERVICES	Portage	1066 S. Water Street Kent, OH 44240-3840 ~ (330)673-6963	More Information	Residents of Kent, Brady Lake and Franklin Township	Provides daily hot meals and food pantry assistance.								*		х		
LAKE COUNTY FREE CLINIC	Lake, Geauga, Ashtabula, and eastern parts of Cuyahoga County	54 S State St. Rm. 302 Painesville, OH 44077 ~ (440)352- 8686 ~ www.lakefreeclinic.org	More Information	Under/Uninsured	Provides diagnosis and treatment of short-term illnesses and basic medical needs. Offers limited treatment for chronic conditions such as arthritis, hypertension, thyroid, and diabetes. Provides routine physicals for work, school, sports, and Headstart. Will perform reduced cost laboratory work on an outpatient basis for those who have a requisition order and pediatric and adult dental services.	*	*	x x	*		X	х					
LAKE WEST HOSPITAL	Lake, Geauga, Summit, Portage and Cuyahoga	36000 Euclid Avenue Willoughby, Ohio 44094-4662 ~(440)953-9600	More Information	No restrictions	Full service hospital with primary, preventive and emergency medical care, women's health, pediatric health and geriatric psychiatry, etc.		*	x x	*		x						
LEE-SEVILLE-MILES HUNGER CENTER	Cuyahoga	16718 Miles Ave. Cleveland, OH 44128 ~ (216)436-2000 ~www.hungernetwork.org	More Information	Residents of 44105, 44120 and 44128	Provides a 3 day supply of groceries (canned and dry foods to make up 3 meals a day) packed according to family size. Occasionally, baby formula may be available								*		х		
LHS TYLER URGENT CARE CLINIC	Portage	7956 Tyler Blvd. Mentor, Ohio 44060 ~ (440)255-6400	More Information	No restrictions	Urgent care for many non-life-threatening emergencies.		*	x x	*			x					
LIGHT OF HEARTS VILLA	Cuyahoga	283 Union St. Bedford, OH 44146 ~ (440)232-1991	More Information	Senior residents of Bedford, Bedford Heights, Walton Hills, and Sagamore Hills	Provides a one-time three-day supply of food to those in need.								*				х
MAYFIELD CITY SCHOOL DISTRICT	Cuyahoga	211 Alpha Dr. Mayfield Village, OH 44143 ~ (440)995-7600 ~ www.mayfieldschools.org	More Information	Residents (age restrictions may apply)	Provides a wide variety of personal enrichment classes for children and adults of all ages. Offerings include, but are not limited to, arts and crafts, business and financial management, computers, cooking, dance, fitness, tai-chi, yoga, health awareness, meditation, gardening, foreign languages, travel, self-defense, photography, habyetiting dances actions can be considered.				*		x	x					
MAYFIELD HEIGHTS DEPARTMENT OF HUMAN SERVICES	Cuyahoga	6154 Mayfield Road Mayfield Heights, Ohio 44124 ~(440)442-2626	More Information	Seniors 60 +	Transportation, Social work and out reach services,				*		х	x	*	x	х		
MENTOR CAMPUS	Portage	9485 Mentor Avenue Mentor, Ohio 44060-4554 ~(440)974-6800	More Information	No restrictions	Full service medical facility with primary and preventive medical services.		*	хх	*		х	х					H
METRO HEALTH BUCKEYE HEALTH CENTER	Cuyahoga	2500 MetroHealth Drive Cleveland, OH 44109 ~(216)778-7800	More Information	Females	Women's wellness services, reproductive health services and prevention screening and education.	*	*	x x	*		х	х					

Organization/Provider		Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDERINSURED/UNINSURED	ACCESS TO AFFORDABLE HEALTH CARE AND MEDICAL SERVICE PROVISION	Primary Care Preventive Care	COMMUNITY AWARENESS AND COHESIVENESS	Collaboration	Outreach / Prevention Education	Dissemination of Information	INFRASTRUCTURE	Transportation	Affordable healthy food choices	Parks and Recreation	Housing
METROHEALTH BEACHWOOD HEALTH CENTER	Cuyahoga	3609 Park East Drive, Suite 300 North Building Beachwood, OH 44122	More Information	No restrictions	Primary, preventive and emergency medical care for adults and children.	*	*	x x	*		x	x					
MILES PARK CORPS COMMUNITY CENTER	Cuyahoga	4139 E 93rd St. Cleveland, OH 44105 ~ (216)341-1640	N/A	No restrictions	Provides a three-day supply of canned and dry food, Social services, disaster assistance, recreation.				*		x	x	*	>	x	х	x
MONTEFIORE	Cuyahoga	One David N. Myers Pkwy. Beachwood, OH 44122 ~(216)910 2471 ~ www.montefiorecare.org	More Information	Seniors 60 +	Provides a comprehensive system of health care services for older adults. Services include post-hospital skilled stay, long-term residential care, dementia care, home health care, outpatient rehabilitation, hospice and palliative care, support groups, and assisted living rehab therapy and memory-care at The Weils.	*	*	x x	*		x	x	*	x			
NEW CLEVELAND FOOD BASKET	Cuyahoga	12210 Miles Ave. Cleveland, OH 44105 ~ (216)271-9271	More Information	Cuyahoga residents	Provides emergency food.								*		х		
OAKWOOD GOLDEN AGE CENTER	Cuyahoga	23035 Broadway Avenue Oakwood, OH 44146 ~(440)232- 9907 ~www.gacgc.org/Centers/Oakwood.htm	More Information	Seniors	Provides recreational, social and physical activities, van service, a free newsletter, meals on wheels, screenings, education, volunteer opportunities and a senior center with wellness activities, exercise classes and social opportunities.		*	x x	*		x	x	*	x	х		
OHIO STATE UNIVERSITY EXTENSION - CUYAHOGA COUNTY	Cuyahoga	9127 Miles Ave. Cleveland, OH 44105 ~ (216)429-8229 ~www.cuyahoga.osu.edu	More Information	No restrictions	Provides a food safety and nutrition education course for clients of participating agencies and organizations.								*	>	1		
PLANET MEDICAL TRANSPORTATION	Cuyahoga, Lake and Geauga	P.O. Box 18215 Cleveland Heights, OH 44118 ~ (216)381- 5858	More Information	No restrictions	Medical transportation, Translation services (fee for services)								*	x			
PLANNED PARENTHOOD OF NORTHEAST OHIO-BEDFORD CENTER	Cuyahoga	19550 Rockside Rd. Bedford, OH 44146 ~ (440)232-8381 ~www.plannedparenthood.org/cleveland	More Information	No restrictions	Reproductive health care services	*	*	x x	*		x	x					

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDERINSURED/UNINSURED	ACCESS TO AFFORDABLE HEALTH CARE AND MEDICAL SERVICE PROVISION	Primary Care Preventive Care	COMMUNITY AWARENESS AND COHESIVENESS	Collaboration	Outreach / Prevention Education	Dissemination of Information NFRASTRUCTURE	46.0	Iransportation Vutrition Education	Affordable healthy food choices	Parks and Recreation Housing
PLANNED PARENTHOOD OF	Cuyahoga	33790 Bainbridge Rd. Ste. 101 Solon, OH 44139	More Information	No restrictions	Reproductive health care services				- 0 0	Ŭ	_				_	
NORTHEAST OHIO-SOLON EXPRESS CENTER		~www.plannedparenthood.org/cleveland				*	*	x x	*		x	×				
PORTAGE COUNTY HEALTH DISTRICT	Portage	449 S. Meridian St., 3rd Floor, Portage County Admin. Bldg Ravenna, Ohio 44266 ~ (330)296-9919 ~www.co.portage.oh.us/healthdepartment.htm	More Information	All residents of Portage County	Control of Communicable Diseases, Tuberculosis Control, Immunization Clinics, Rabies Control by monitoring all animal bites, Coordination of School Nurse Program, High Blood Pressure Detection, Health Risk Reduction Programs, Health Aspects of Major Disasters, Preventive Health and Exercise Programs, Paternity Blood Draws, Wellness Assessment, Medical Reserve Corp Coordination .	*	*	x x	*		x	X				
RESOURCE GUIDE FOR OLDER ADULTS AND THEIR FAMILIES	Cuyahoga, Geauga, Lake, Lorain, Medina	925 Euclid Ave. Ste. 600 Cleveland, OH 44115 ~(800)626-7277 ~ www.psa10a.org	More Information	Seniors	Directory/Resource List Publication for Older Adult/Aging Issues, Printed Materials for Older Adult/Aging Issues.				*		х	x				
ROBINSON MEMORIAL HOSPITAL	Portage	6847 N. Chestnut Street Ravenna, OH 44266 ~ (330)297- 0811 ~ www.robinsonmemorial.org	More Information	All residents of Portage County	Full service hospital with primary, preventive and emergency medical care.		*	хх	*		х	x				
ROSS C. DEJOHN COMMUNITY CENTER	Cuyahoga	6306 Marsol Road Cleveland, OH 44124 ~ (440)442-0919	More Information	Mayfield Residents of all ages	Provides recreational, social and physical activities, health screenings, prevention education, transportation, meals and volunteer activities.		*	хх	*		х	x *	;	κ	х	
SAGAMORE HILLS MEDICAL CENTER	Cuyahoga	863 West Aurora Road Sagamore Hills, OH 44067 ~(330)468- 0190	More Information	No restrictions	Statilite facility for South Pointe Hospital provides emergency, primary, and preventive care including Cardiac Rehab, Diabetes Education, Laboratory Testing, Occupational Medicine, Radiology and Imaging, Rehabilitation Therapies.		*	x x	*		х	x				
SCHNURMANN HOUSE	Cuyahoga	1223 Drury Court Mayfield Heights, Ohio 44124 ~(440)461-4588	More Information	Seniors	Modern, low-rent apartments with fully equipped kitchens, Ample outdoor parking; garage space upon availability, Campus mini-bus for shopping or medical appointments, Professional social service assistance to obtain services from community agencies as needed, Volunteer opportunities, On site beauty shop, On site laundry facilities, In-house cable TV, Social Center for activities and programs, Individual storage lockers, and Nutritious meals.				*		x	x *	;	K	x	
SENIOR FARMERS MARKET NUTRITION PROGRAM	All Counties	1(800)266-4346 ~www.aging.ohio.gov/services/seniorfarmersmarketnutritio nprogram	More Information	Low-income Seniors 60+	Coupons issued for the purchase of fruits, vegetables, herbs and honey at the farmers market June-October							*	:		x	

Organization/Provider	+	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDERINSURED/UNINSURED	ACCESS TO AFFORDABLE HEALTH CARE AND MEDICAL SERVICE PROVISION	Primary Care Preventive Care	COMMUNITY AWARENESS AND COHESIVENESS	Collaboration	Outreach / Prevention Education	Dissemination of Information	INFRASTRUCTURE	Transportation	Affordable healthy food choices	Recreation	Housing
SHAKER HEIGHTS CITY OF - DEPARTMENT OF NEIGHBORHOOD REVITALIZATION	Cuyahoga	3450 Lee Rd. Shaker Hts., OH 44120 ~ (216)491-1370 ~www.shakeronline.com	More Information	Residents of Shaker Heights	Provides home repair grants of up to \$2,000 and free exterior paint to help residents correct exterior housing code violations.								*			x	x
SHAKER HEIGHTS COMMUNITY CHURCH - HUNGER NETWORK SITE	Cuyahoga	20120 Lomond Blvd. Shaker Hts., OH 44122 ~ (216)619-8155 ~ shchunger@sbcglobal.net	More Information	Exact boundaries may be determined by calling 211/First Call For Help	Provides a 3-5 day supply of groceries (canned and dry foods to make up 3 meals a day) packed according to family size. Occasionally, baby formula may be available.								*		х		
SOLON DEPARTMENT OF SENIOR SERVICES	Cuyahoga	3500 Portz Pkwy. Solon, OH 44139 ~ (440)349-6363 ~www.solonohio.org	More Information	Resident Seniors 60+ of Solon	Provides recreational, social and physical activities, van service, a free newsletter, meals on wheels, screenings, education, volunteer opportunities and a senior center with wellness activities, exercise classes and social opportunities.	*	*	x x	*		х	x	*	x	x	x	
SOUTH POINTE HOSPITAL	Lake, Geauga, Summit, Portage and Cuyahoga	20000 Harvard Rd. Warrensville Heights, OH 44122 ~(216)491-6000 ~ www.southpointehospital.org	More Information	No restrictions	Full service hospital with primary, preventive and emergency medical care, behavioral health, cancer center, cardiovascular services, diabetes education center, Health Wise Connection, etc.		*	x x	*		x	x	*	x >	(
SOUTHWEST GENERAL COMMUNITY OUTREACH WELLNESS CLINIC	Cuyahoga	7390 Old Oak Blvd. Middleburg Hts., OH 44130 ~(440)816-4044 ~ www.swgeneral.com	More Information	Adults 18+	Provides health information and health screenings, answers general health questions, and offers presentations on a variety of health issues. Screenings available vary with location and time of year, but may include cholesterol, glucose, blood pressure, body fat composition, osteoporosis, depression, pulmonary function, colorectal cancer, breast exams, and others.	*	*	х	*		x						
ST. VINCENT CHARITY	Cuyahoga	2351 East 22nd Street Cleveland, OH 44115 ~ (216)861-6200 ~ www.stvincentcharity.com	More Information	No restrictions	Full service hospital with primary, preventive and emergency medical care.	*	*	хх	*		х	х					
SUMMIT COUNTY HEALTH DISTRICT	Summit	1100 Graham Road Circle Stow, OH 44224-2992 ~(877)687- 0002	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, Primary, Preventive and Dental health care.	*	*	хх	*		x	х					
THEA BOWMAN CENTER	Cuyahoga	11901 Oakfield Ave. Cleveland, OH 44105 ~ (216)491-0699			Provides a four-day supply of food, GED instruction, Tutoring, Benefits screening, hot meals.				*		x	х	*	,	х		
TRI-CITY CONSORTIUM ON AGING	Cuyahoga	1370 Victory Dr. South Euclid, OH 44121 ~ (216)291-3902 ~ www.tri-cityseniors.org	More Information	Older adult residents and their caregivers in South Euclid, Lyndhurst and Highland Heights.	Plans, coordinates, and provides meals, social and educational activities, wellness activities, transportation, and other supportive services.	*	*	x x	*	х	х	х	*	x	х		

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDERINSURED/UNINSURED	ACCESS TO AFFORDABLE HEALTH CARE AND MEDICAL SERVICE PROVISION	Primary Care Preventive Care	COMMUNITY AWARENESS AND COHESIVENESS	Collaboration	Outreach / Prevention Education	Dissemination of Information	INFRASTRUCTURE	Fransportation Nutrition Education	Affordable healthy food choices	Parks and Recreation
TWINSBURG FHC	Summit	8701 Darrow Road Twinsburg, Ohio 44087 ~ (330)888-4000		No restrictions	Full service facility with primary, preventive and emergency medical care.		*	хх	*			х	_			
TWINSBURG FITNESS CENTER	Summit	10260 Ravenna Road Twinsburg, OH 44087 ~ (330)405-5757 ~ www.mytwinsburg.com	More Information	No restrictions	pProvides physical activities, exercise equipment, classes, education.				*		х					
TWINSBURG SENIOR CENTER	Summit	10260 Ravenna Road Twinsburg, OH 44087 ~ (800)852-6325 ~ www.mobilemealsinc.org	More Information	Seniors 55+	Provides recreational, social and physical activities, van service, a free newsletter, meals on wheels, screenings, education, volunteer opportunities and a senior center with wellness activities, exercise classes and social opportunities.		*	x x	*		x	x	*	х	х	
UNITED WAY SENIOR INFO LINE	Summit	703 South Main Street, Suite 211 Akron, Ohio 44311 ~1(888)212-5041 ~ www.infolineinc.org	More Information	No restriction	Provides information and referral, including uninsured, low-income residents to access free and low-cost prescription medications, an				*		х	х				
UNIVERSITY HEIGHTS COMMUNITY GARDENING	Cuyahoga	Taylor Road Learning Garden 2300 Warrensville Center Road University Heights, Ohio 44118 ~www.uhgardens.org/cityinfo	More Information	No restrictions	Residents can participate in gardening activities and harvest fresh produce year round.								*		х	
UNIVERSITY HOSPITAL AHUJA	Cuyahoga	3999 Richmond Road Beachwood, OH 44122 ~ (216)593- 5500	More Information	No restrictions	Full service hospital with primary, preventive and emergency medical care.		*	хх	*			х				
UNIVERSITY HOSPITAL CHAGRIN HIGHLANDS MEDICAL CENTER	Cuyahoga	3909 Orange Place Orange Village, OH 44122 ~(216)896- 1700	More Information	No restrictions	Full service facility with primary and preventive and urgent care medical care, including Women's Health, and Pediatric health, etc.		*	хх	*		х	x				
UNIVERSITY HOSPITAL CONCORD HEALTH CARE	Cuyahoga	7500 Auburn Road Concord Twp, OH 44077 ~ (440)358- 0400	More Information	No restrictions	Provides primary and specialty care for adults and children.		*	хх	*		х	х				
UNIVERSITY HOSPITAL LANDERBROOK HEALTH CENTER	Cuyahoga	5850 Landerbrook Drive Mayfield Heights, OH 44124 ~(440)646-2626	More Information	No restrictions	Provides outpatient medical services for adult and pediatric primary and specialty care.		*	х	*		х	х				
UNIVERSITY HOSPITAL MAYFIELD VILLAGE HEALTH CENTER	Cuyahoga	730 Som Center Road Mayfield Heights, OH 44143 ~(866)844-2273	More Information	No restrictions	Provides Adult primary and specialty medical care.		*	х	*			х				
UNIVERSITY HOSPITAL MENTOR MEDICAL CENTER	Portage	9000 Mentor Ave. Mentor, OH 44060 ~ (440)255-0800	More Information	No restrictions	Full service facility with primary, preventive and urgent care, including Women's Health, and Pediatric health, etc.		*	x x	*		х	x				
UNIVERSITY HOSPITAL RICHMOND	Cuyahoga	27100 Chardon Road Richmond Heights, OH 44143 ~(440)585-6500	More Information	No restrictions	Full service hospital with primary, preventive and emergency medical care.		*	хх	*			х				
UNIVERSITY HOSPITAL SUBURBAN	Cuyahoga	1611 South Green Road South Euclid, OH 44121 ~(216)382-9492	More Information	No restrictions	Provides outpatient medical services for adult and pediatric primary and specialty care.		*	хх	*			х				
UNIVERSITY HOSPITAL TWINSBURG	Summit	8819 Commons Blvd. Twinsburg, OH 44087 ~ (330)486-9600	More Information	No restrictions	Full service facility with primary and preventive, emergency and urgent care medical care, including Women's Health, and Pediatric health, etc.		*	хх	*		х	x				
VILLAGE OF HIGHLAND HILLS SENIOR CITIZEN MULTI SERVICE CENTER	Cuyahoga	3700 Northfield Rd. Highland Hills, OH 44122 ~(216)283-3000	More Information	Seniors 60 + residents of the Village of Highland Hills	Provides recreational, social and physical activities, van service, a free newsletter, meals on wheels, screenings, education, volunteer opportunities and a senior center with wellness activities, exercise classes and social opportunities.		*	x x	*		х	x	*	х	х	
VISITING PHYSICIANS ASSOCIATION (EAST)	Lake, Geauga, Summit, Portage and Cuyahoga	7350 Industrial Park Blvd. Mentor, OH 44060 ~ (888)742- 0508	More Information	Seniors	Home health services that include primary and preventive medical care and care coordination for geriatric population.		*	хх	*		x	х	*	x		

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDERINSURED/UNINSURED	ACCESS TO AFFORDABLE HEALTH CARE AND MEDICAL SERVICE PROVISION	rimary Car	Preventive Care COMMUNITY AWARENESS AND	COHESIVENESS	Collaboration	Outreach / Prevention Education	Dissemination of Information	INFRASTRUCTURE	Fransportation Nutrition Education	ordable heal	Parks and Recreation
WESTERN RESERVE AREA AGENCY ON AGING	Cuyahoga, Geauga, Lake, Lorain, Medina	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 to maintain high levels of health, productivity and independence.				*		х	х	х	*	х	х	
WILLOUGHBY FHC	Lake, Geauga, Summit, Portage and Cuyahoga	2550 SOM Center Road Willoughby Hills, OH 44094 ~(800)807-2888	More Information	No restrictions	Full service facility with primary and preventive and urgent care medical care, including Women's Health, and Pediatric health, etc.		*	x	x *	•			x				









South Pointe Hospital 20000 Harvard Road Warrensville Heights, OH 44122

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: Cleveland Clinic Health System-East Region # 34-0714593

Date Approved by

Authorized Governing Body: September 9, 2013

Authorized Governing Body: Board of Directors,

The Cleveland Clinic Foundation and ratified by the Cleveland Clinic Community Hospitals

Executive Committee

Contact: Cleveland Clinic

chna@ccf.org

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2013 SOUTH POINTE HOSPITAL 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. <u>Description of Hospital</u>

South Pointe Hospital, a Cleveland Clinic hospital located in Warrensville Heights, Ohio, is a 173-bed acute care, community teaching hospital serving the healthcare needs of Cleveland's southeast suburbs. The hospital provides inpatient and outpatient services treating a variety of health conditions and specializes in cardiology, cancer, diabetes, gastroenterology, orthopaedics and pain management, primary care, radiology, urology and wound care services.

South Pointe has been designated as a Pathway to Excellence by the American Nurses Credentialing Center and is only the 2^{nd} hospital in Ohio to achieve such designation. In addition, the hospital is the site of the Center for Osteopathic Regional Education for the Ohio University College of Osteopathic Medicine.

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. <u>Hospital Mission</u>

South Pointe Hospital was formed in 1994 as a result of a merger between two hospitals, Brentwood Hospital and Meridia Suburban Hospital, to conduct health care, research and education activities and provide health care services persons in its community. South Pointe Hospital's mission is:

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

II. Community Definition

The South Pointe Hospital community is defined as the geographic area comprising 80% of inpatient volume. The South Pointe Hospital community consists of 13 zip codes in Cuyahoga, Portage and Summit Counties: 44105, 44120, 44122, 44128, 44137, 44139, 44146, 44202, 44236, 44241, 44056, 44067 and 44087.

South Pointe Hospital is located within 10 miles of two other Cleveland Clinic hospitals, Hillcrest and Marymount Hospitals. Because of this proximity, a portion of South Pointe Hospital's community overlaps with those of each of the other hospitals. These three hospitals work together as a part of the Cleveland Clinic health system to serve residents in Cleveland's southeastern communities and suburbs.

III. How Implementation Strategy was Developed

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

Each year, senior leadership at South Pointe Hospital and 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

<u>B. Value</u>: Continually strive to increase the quality of care provided and the efficiency with which that care is delivered

<u>C. Knowledge</u>: 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, key stakeholder interviews and focus group input were reviewed to identify and analyze the needs identified by each source. The top health needs of the South Pointe Hospital community are those that are supported both by secondary data and raised by key stakeholders and focus groups.

Needs are listed by category (e.g., patient care, community services). See the South Pointe Hospital CHNA for more information: clevelandclinic.org/2013SouthPointeCHNA

A. Chronic Disease and Health Conditions

- 1. Heart Related Diseases
- 2. Adult Asthma
- 3. Diabetes
- 4. Kidney Disease
- 5. Low Birth Weight
- B. Access to Health Services
- C. Research
- D. Education

- E. Access to Community Services
- F. Economic and Community Development

VI. Needs Hospital Will Address

A. Chronic Disease and Health Conditions:

1. Heart Related Diseases

South Pointe Hospital offers patient care and outreach services relating to heart diseases, including hypertension, congestive heart failure and strokes. The hospital provides inpatient and outpatient care through its Congestive Heart Failure Clinic and is designated by the Joint Commission as a Primary Stroke Center.

In addition to its clinical activities, South Pointe Hospital conducts health screenings, nutrition services, and outreach activities geared toward cardiovascular health and promotion of disease management.

2. Adult Asthma

South Pointe Hospital provides acute inpatient care, outpatient care, and pulmonary rehabilitation services to patients suffering from Adult Asthma.

3. Diabetes

South Pointe Hospital provides patient care and outreach activities for patients suffering from diabetes and its long-term complications. In addition, the hospital provides acute inpatient and outpatient clinical services, nutrition services, and hosts education activities and other community events on disease management. The hospital has a Diabetes Education Center with an accredited self-management program through which patients learn about meal planning, weight control, and diet modification over a three-month period.

4. Kidney Disease

South Pointe Hospital provides acute inpatient and outpatient patient care services, including dialysis services and nutrition services to patients suffering from kidney disease. In 2013, the hospital opened a kidney transplant evaluation clinic in conjunction with the Cleveland Clinic main campus.

5. Low Birth Weight

South Pointe Hospital provides basic family medicine and nutrition services to patients and their children. The hospital works with Hillcrest Hospital to treat pediatric patients in need of more specialized care, including care affiliated with low birth weight babies.

B. Access to Health Services

South Pointe Hospital provides medically necessary services to all patients regardless of race, color, creed, gender, country of national origin or ability to pay. South Pointe Hospital has a financial assistance policy that is among the most generous in the region and 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

South Pointe Hospital 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. The hospital also offers transportation services to its patients residing within a five mile radius of the hospital for their outpatient appointments.

C. Research

Clinical trials and other clinical research activities occur throughout the Cleveland Clinic health system including at the community hospitals.

D. Education

South Pointe Hospital has an affiliation with the Ohio University College of Osteopathic Medicine and is one of the largest osteopathic teaching hospitals in Ohio. Medical students, interns and residents from across the country are trained at South Pointe.

Cleveland Clinic and Ohio University plan to open a medical school extension on the South Pointe Hospital campus. The goal of the extension campus is to address the growing shortage of primary care physicians in Ohio.

VII. Needs Hospital Will Not Address

South Pointe Hospital cannot directly address certain community health needs identified in the CHNA. Access to Community Services and Economic and Community Development are important and may impact a person's health status but do not relate directly to South Pointe Hospital's mission to deliver health care. These are needs that governmental and other agencies have the more appropriate expertise and resources necessary to address. Although South Pointe Hospital cannot address these needs directly, it can and does support governmental and other agencies to help with these needs.

See Appendix G for the Inventory of Available Resources of the Community Health Needs Assessment for additional detail on the organizations and programs, including those affiliated with South Pointe Hospital or the Cleveland Clinic, that are located within the South Pointe Hospital community and capable of addressing these needs.

South Pointe Hospital cannot directly address the following community health 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 South Pointe Hospital. Therefore, the hospital will not address this need in its implementation strategy.

Although it cannot address this need, South Pointe Hospital does and will continue to collaborate with and support community organizations to help them meet this need.

B. Economic and Community Development

The need for Economic and Community Development including the need for more housing options, parks and recreation centers, readily accessible transportation and better infrastructure, was identified as a need in the CHNA.

South Pointe Hospital cannot focus or otherwise address the need for transportation, parks, or other community services unrelated to the delivery of health care. Although South Pointe Hospital is not directly involved with developing community infrastructure and improving the economy because its mission relates to the delivery of quality healthcare, 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.

South Pointe Hospital employs over 1100 physicians and other caregivers and provides an overall economic benefit to the community.