

2013 Community Health Needs Assessment – Medina Hospital

Founded in 1944, Medina Hospital is an acute care facility with 150 staffed beds offering advanced medical and surgical care, sophisticated technology, research and education. The hospital has specialties in cancer, cardiology, diabetes, rehabilitation and women's health. Medina Hospital is a Primary Stroke Center and has an Emergency Department. The facility has been part of Cleveland Clinic since 2009.

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.

Medina Hospital has identified all of these needs in its CHNA.

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



Medina Hospital

Community Health Needs
Assessment – Final Report



March 30, 2012



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Introduction

Medina Hospital, a 116-bed community hospital located in Medina, Ohio, 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 October 2011 and March 2012. Medina Hospital is a member of the Cleveland Clinic Health System. During the community health needs assessment process, Medina Hospital collaborated with other hospitals comprising the Cleveland Clinic Health System:

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

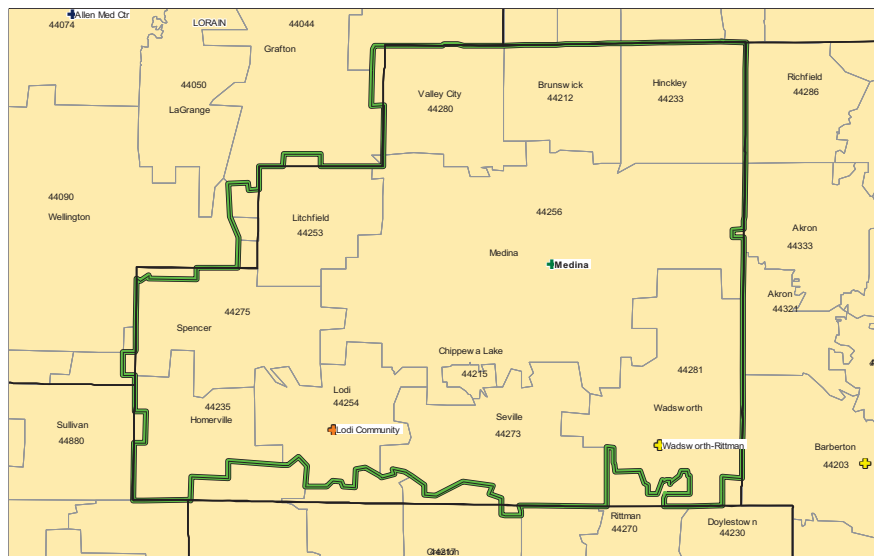
This report fulfills the requirements of a new federal statute established within the Patient Protection and Affordable Care Act (PPACA) requiring that non-profit hospitals conduct community health needs assessments every three years. The community health needs assessment process undertaken by Medina 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 Medina Hospital, members of the hospital's community advisory council and 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.

While community can be defined in many ways, for the purposes of this report, the Medina Hospital community is defined as 11 zip codes in Medina County, Ohio containing 80% of the hospital's inpatient discharges (see Figure 1 & Table 1).

Table 1

Zip	City	County
44254	Lodi	Medina
44235	Homerville	Medina
44215	Chippewa Lake	Medina
44256	Medina	Medina
44281	Wadsworth	Medina
44212	Brunswick	Medina
44275	Spencer	Medina
44233	Hinckley	Medina
44273	Seville	Medina
44253	Litchfield	Medina
44280	Valley City	Medina

Figure 1



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 books¹ on the topic of community health and has presented at more than 50 state and national community health conferences.

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

http://www.haponline.org/downloads/HAP_A_Guide_for_Assessing_and_Improving_Health_Status_Apple_Book_1993.pdf and

A Guide for Implementing Community Health Improvement Programs:

http://www.haponline.org/downloads/HAP_A_Guide_for_Implementing_Community_Health_Improvement_Programs_Apple_2_Book_1997.pdf

Project Mission

The mission of the Medina 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.

Objectives

The objective of this assessment is to analyze 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 under-represented 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 Care Act (PPACA).

Methodology

Tripp Umbach facilitated and managed a comprehensive community health needs assessment on behalf of Medina Hospital — resulting in the identification 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 Medina 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 Medina 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 16 interviews were completed with key stakeholders in the Medina 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 under-represented residents, were included in the needs assessment planning process via two focus groups conducted by Tripp Umbach in the Medina 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: Adult Parents 25-40 Years Old and Underserved/Uninsured Residents in Medina County.

- ❑ **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, where 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 Medina 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 Medina Hospital community (44254, 44235, 44215, 44256, 44281, 44212, 44275, 44233, 44273, 44253 and 44280) more than 100 community resources were identified with the capacity to meet the three community health needs identified in the Medina 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 Medina 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 two community focus groups resulted in the identification of three key community health needs in the Medina Hospital community that are supported by secondary and/or primary data. Needs identified include 1) Improving access to affordable healthcare and medical services, 2) Improving access to community services, specifically to the youth population and 3) Economic improvement, specifically infrastructure (not listed in any specific order). A summary of the top three needs in the Medina Hospital community follows:

❑ IMPROVING ACCESS TO AFFORDABLE HEALTHCARE AND MEDICAL SERVICES

Underlying factors identified by secondary data and primary input from community stakeholders and focus groups with residents: Need for access to affordable healthcare and medical services.

- ✓ Overall, the Medina Hospital zip code areas have a CNI score of 1.4, indicating a low-range level of community health need in the Medina Hospital community. The Medina Hospital community is a collection of “low-need” communities; however, the CNI analysis lets us dig deeper into the traditional socio-economic barriers to community health.^{2,3}
 - Two zip codes within the Medina Hospital community have a CNI score above 1.4, indicating an increased number of socio-economic barriers to healthcare access in the specific areas, which is high for the Medina community, but remains a low overall CNI score. Lodi (44254) and Homerville (44235) record the highest CNI scores (2.4 and 2.0 respectively), indicating the greatest need within the Medina Hospital community. A closer look at Lodi and Homerville reveals the highest percentages of all measures of poverty within the Medina Hospital community including uninsured and unemployed residents. These areas present the highest community health risk, as they have the greatest barriers to healthcare and generally have the poorest health among the Medina Hospital communities.

² CNI quantifies 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.

³ The five prominent socio-economic barriers to community health quantified in CNI include: Income, Culture/Language, Education, Insurance and Housing.

- Homerville (44235) contains the highest uninsured percentages within the Medina Hospital community at 11% uninsured.
- ✓ Stakeholder interview findings support secondary data that residents' wellness and access to healthcare is an important community health priority. Specifically, stakeholders mentioned the following elements relating to residents' wellness and access to healthcare that a healthy community should have:
 - The ability to meet the basic health needs of residents
 - Awareness about the latest health practices
 - Accessible healthcare facilities
 - Medical support services
 - Proactive health and wellness services, and a good hospital
 - Wellness opportunities for the residents
 - Healthy food choices
 - Individuals that have access to healthcare, with adequate health insurance and health knowledge
 - Low disease rates
 - Residents that are healthy
 - Residents that are fit, active and maintain a healthy diet
 - Awareness about being a heart-healthy community

Community stakeholders perceived the health status of many residents to be poor due to medical care being unaffordable for some residents and poor lifestyle choices. While stakeholders felt there is ample access to healthcare resources, great healthcare facilities and healthy initiatives in their communities; they gave the impression that such care is not always affordable for some residents, particularly those that are unemployed. Stakeholders also felt that residents make poor lifestyle choices, which contributes to their unhealthy status and often leads to chronic health conditions (i.e., diabetes, breathing challenges, blood pressure issues and obesity). Stakeholders felt that residents have a limited understanding about prevention, nutrition and health.

- ✓ Both community focus groups identified the need for improved access to healthcare services. Many focus group participants felt that the cost of healthcare is a barrier for some residents due to restrictions on health insurance coverage and a perceived lack of providers (i.e., pediatricians and medical clinics that offer affordable under/uninsured medical care).

- ✓ Some focus group participants and stakeholders were under the impression that access to healthcare for residents is limited due to transportation issues. Participants felt that there is no public transit available in their community. Overall, the absence of readily accessible convenient transportation could cause limited access to healthcare for some residents because they could not travel to and from their healthcare appointments.

❑ IMPROVING ACCESS TO COMMUNITY SERVICES

Underlying factors identified by primary input from community stakeholders and focus groups with residents: Need for access to community services. The number of community services can be ascertained through existing directories and the development of a provider inventory, while access to these services by community members is not quantified by secondary data.

- ✓ Stakeholder interview findings show that a community's ability to support and meet the needs of residents is an important community health priority. Specifically, stakeholders mentioned the following elements relating to a community's ability to support and meet the needs of residents that a healthy community should have:
 - A holistic approach
 - An approach that supports healthy choices
 - The ability to offer quality of life amenities to the residents (i.e., parks and recreation)
 - A safe and secure living environment for everyone
 - An adequate safety net for citizens
 - Services and facilities that meet the basic needs of residents in a reasonable fashion
 - Good support services (i.e., government, recreation, etc.) that collaborate to provide services to the residents
 - Long-term services for the residents
 - Transportation
 - Access to recreational facilities
- ✓ While stakeholders feel the community provides many services to residents, they also perceive a decrease in available community services (i.e., healthcare and food) due to recent limitations in available funding. Stakeholders identified a community's ability to support and meet the needs of its residents as significant to their collective definitions of a healthy community. Stakeholders mentioned, as components of their five- to 10-year community vision, they would like to see

the health system, school system and community actively engaged in the community. Stakeholders also envision the community growing in primary care for the underserved population. Additionally, stakeholders visualize the community will be a place that provides students with after-school activities.

- ✓ While focus group participants perceive that services are available in their community, many participants were under the impression that services were limited in the areas of recreational activities. Many focus group participants gave the impression that there are limited recreational and physical activities available to residents, particularly young people, due to limited facilities and costly fees that may be unaffordable for some residents.
- ✓ Many focus group participants felt that local businesses, hospitals and communities could collaborate and pool resources to meet the needs of residents in their communities. Participants did not perceive collaboration to be taking place in their communities at a level that ensured the needs of residents were being met on a consistent basis.

❑ **COMMUNITY DEVELOPMENT, SPECIFICALLY EMPLOYMENT AND INFRASTRUCTURE**

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

- ✓ The Medina Hospital community is the only Cleveland Clinic hospital community with projected population growth. Often, population growth will necessitate future development of the infrastructure of a community (i.e., public utilities, public transit system and housing).
- ✓ Stakeholder interview findings show that a healthy economy is an important community health priority. Specifically, stakeholders mentioned the following elements relating to a healthy economy that a healthy community should have:
 - A stable healthy economy
 - Employment opportunities
 - A low unemployment rate
 - Positive growth and viability in the housing market and commerce
 - Businesses doing well
- ✓ The overall unemployment rate for the Medina Hospital community of 5.1% is considerably lower than the overall Ohio rate of 7% and substantially lower than the national unemployment rate currently around 9%. Lodi (44254) has the

greatest number of socio-economic barriers to community health with a CNI score equal to 2.4. A closer look at Lodi (44254) reveals the highest unemployment rate (7.5%) in the Medina Hospital community.

- ✓ While stakeholders felt there were economic strengths in their communities such as positive cash flow, little poverty throughout the community, and a variety of industries and businesses in the community; they also felt the weak economy has caused an increase in foreclosures, unemployment and reduced funding for community services.
- ✓ Stakeholders perceive a decrease in available jobs, which they felt increased the number of residents who are under/uninsured due to the loss of employment benefits such as health insurance. Additionally, a decrease in available jobs has contributed to reducing the population and purchasing power of residents. The reduction of population and purchasing power often shrinks the community's tax revenues causing funding cuts for basic civic and social services, while simultaneously reducing incentives for existing small businesses to expand and new businesses to open, thus allowing the community to thrive. Stakeholders also feel there has been an increase in residents' demand for community services due to an increase in unemployment. Stakeholders mentioned, as components of their five- to 10-year community vision, they would like to see the community provide strong workforce training for the residents so the population can grow. Additionally, stakeholders envision the community having financial resources in place to maintain and repair the community so it can have a strong infrastructure.
- ✓ Stakeholders mentioned that the transportation system within the community is limited and not user-friendly. Additionally, stakeholders mentioned that transportation for older adults may not be adequate.
- ✓ Some focus group participants were under the impression there are limited employment opportunities in their communities and believe this is the result of limited transportation to areas that have more employment opportunities. Participants felt that the community could collaborate with public transit services to increase the number and frequency of bus routes. Increasing public transportation could increase the access some residents have to employment, healthy food and medical care.
- ✓ Focus group participants discussed the perception that public property such as sidewalks and public parks are not always well maintained. Participants believed

there are locations in their community that experience high foot-traffic that do not have sidewalks, which often causes residents to walk in the road. Participants felt that communities could construct sidewalks in areas where sidewalks are not available. Finally, participants felt that communities could strive to better maintain the sidewalks that are available. Additionally, participants perceived that local public recreational facilities (i.e., public parks) are not always well maintained, which can limit the safety of those facilities at times.

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).⁴ CNI was applied to quantify the severity of health disparity for every zip code in Ohio based on specific barriers to healthcare access. Because the CNI considers multiple factors that are known to limit healthcare access, the tool may be more accurate and useful than other existing assessment methods in identifying and addressing the disproportionate unmet health-related needs of neighborhoods.

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.

Overall, the Medina Hospital zip code areas have a CNI score of 1.4, indicating a low-range level of community health need in the Medina Hospital community. The Medina Hospital community is a collection of "low-need" communities; however the CNI analysis lets us dig deeper into the traditional socio-economic barriers to community health and identify area where the need may be greater than the overall service area.

Lodi (44254) (CNI=2.4) and Homerville (44235) (CNI=2.0) have the greatest number of socio-economic barriers to community health. The overall unemployment rate for the Medina Hospital community of 5.1% is considerably lower than the overall Ohio rate of 7% and substantially lower than the national unemployment rate currently around 9%. A closer look at Lodi (44254) reveals the highest unemployment rate (7.5%) Homerville (44235) contains the highest rates of uninsured citizens at 11%.

⁴ "Community Need Index." Catholic Healthcare West Home. Web. 16 May 2011.
<http://www.chwhealth.org/Who_We_Are/Community_Health/STGSS044508>.

Table 2

Zip	City	County	Inc Rank	Insur Rank	Educ Rank	Cult Rank	Hous Rank	CNI Score
44254	Lodi	Medina	3	3	2	1	3	2.4
44235	Homerville	Medina	2	3	3	1	1	2.0
44215	Chippewa Lake	Medina	2	2	2	1	2	1.8
44256	Medina	Medina	2	1	1	2	3	1.8
44281	Wadsworth	Medina	2	2	1	1	2	1.6
44212	Brunswick	Medina	2	1	1	1	2	1.4
44275	Spencer	Medina	2	1	2	1	1	1.4
44233	Hinckley	Medina	2	1	1	1	1	1.2
44273	Seville	Medina	1	2	1	1	1	1.2
44253	Litchfield	Medina	1	1	1	1	1	1.0
44280	Valley City	Medina	1	1	1	1	1	1.0
Medina Hospital Community Summary			2	1	1	1	2	1.4

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

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.

The Medina Hospital community PQI scores are lower compared to Ohio with the exception of Low-Birth Weight (Medina = 1.30, Ohio = 1.21). PQI results indicate the Medina Hospital community is a community with a lower number of preventable hospitalizations than the statewide rates. This is a positive sign for the Medina community.

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

Prevention Quality Indicators (PQI)	Medina Hospital Community	Ohio	Difference
Chronic Obstructive Pulmonary Disease Admission Rate (PQI 5)	2.00	3.09	-1.09
Adult Asthma Admission Rate (PQI 15)	0.99	1.99	-1.00
Congestive Heart Failure Admission Rate (PQI 8)	3.89	4.66	-0.77

Disease Prevalence, Health Behaviors and 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.

- ✓ Breast cancer and 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. However, for both breast and prostate cancer, the Medina Hospital community has lower prevalence rates than Ohio. For other cancers, the Medina community is consistent with Ohio.
- ✓ The Medina Hospital community shows lower rates for all heart-related diseases when compared with Ohio.
- ✓ Diabetes, strokes and weak/failing kidneys reported in the Medina Hospital community all show lower prevalence rates when compared with Ohio.
- ✓ The Medina Hospital community shows lower rates for all negative health behaviors (obesity, high blood pressure, and smoking) when compared with Ohio.
- ✓ Fewer citizens partaking in negative health behaviors perhaps contributes to the lower disease prevalence rates and the lower PQI hospital admission rates for the Medina Hospital community when compared with Ohio.

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.

- ✓ Usually, penetrating trauma occurs in violent crime or armed combat, and penetrating injuries are commonly caused by gunshots and stabbings. Penetrating trauma is higher in Cuyahoga County (8.7%), Lorain County (5.2%) and Ohio (6.7%) than within the overall Medina community (3.2%).

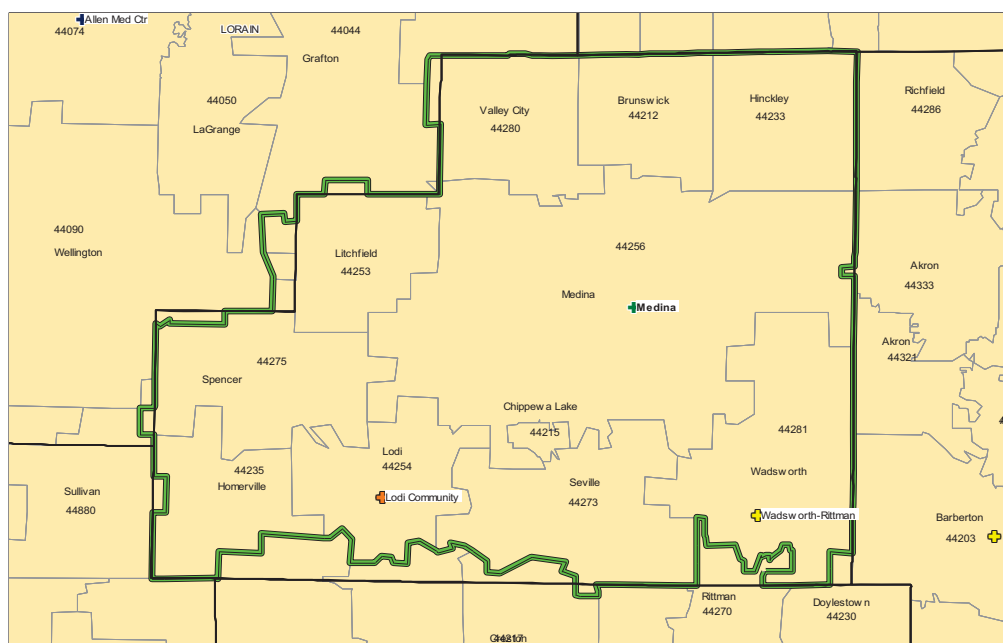
Additional data and greater detail related to the secondary data analysis of the Medina Hospital Community is available in Appendix B.

Demographic Profile

The Medina Hospital service area encompasses Medina County, and is defined as a zip code geographic area based on 80% of the hospital’s inpatient volumes. The Medina Hospital community consists of 11 zip code areas. For the purposes of this hospital profile we have combined the analysis to compare Medina Service Area/Medina County to Ohio. (See Figure 2)

Medina Hospital Community Geographic Definition

Figure 2



Demographic Profile – Key Findings:

- ✓ The Medina Hospital community is the only Cleveland Clinic hospital community with projected population growth.
- ✓ Gender and Age within the Medina Hospital community are consistent with Ohio.
- ✓ There are higher percentages of Caucasian citizens and citizens with some college education or higher in the Medina Hospital community when compared with Ohio.
- ✓ Average and median household income levels are higher in the Medina Hospital community when compared with the average and median income levels of Ohio.
- ✓ The Medina Hospital community unemployment rate is much lower than the overall Ohio and national rates.
- ✓ There are also lower rates of families living in poverty and citizens who are uninsured or on government insurance in the Medina Hospital community when compared with Ohio.

Key Stakeholder Interviews

Tripp Umbach worked collaboratively with the Medina 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 17 stakeholders of the Medina Hospital community. 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 Medina Hospital executive leadership project team (see Appendix C).

The 16 stakeholders identified the following problems and/or barriers as preventing the residents of the Medina Hospital community from achieving their vision of a healthy community. A high-level summary of community health needs identified by community stakeholders include:

❑ THE HEALTH AND WELLNESS OF RESIDENTS

- ✓ The health of a community largely depends on the health status of its residents. Community stakeholders perceived the health status of many residents to be poor due to limited education on how to maintain health, limited awareness about prevention, limited services for the elderly population and limited mental health resources. Additionally, stakeholders mentioned that disease control is a major concern.

While stakeholders felt there is ample access to medical resources, great healthcare facilities and healthy initiatives in their communities, they gave the impression that medical care is not always affordable for some residents, particularly those that are unemployed. Stakeholders felt their communities could be healthier if programs were put in place to offer healthcare information and education to residents along with activities for all generations to participate.

Stakeholders also felt that residents make poor lifestyle choices, which contributes to their unhealthy status and often leads to persistent health conditions (i.e., diabetes, heart disease and obesity). Stakeholders felt that residents have a limited understanding about preventive health choices and healthy nutrition options. Stakeholders identified residents that make smart choices in living a healthy lifestyle and are responsible for their own well-being as significant to their collective definitions of a healthy community. Stakeholders felt that their community could be healthier if residents were more physically active, there were wellness opportunities

for residents to engage in, more education and outreach regarding eating right/being healthy and healthy food was more accessible to residents. Stakeholders mentioned as components of their five- to 10-year community vision, the community will be healthier with improved awareness, prevention and a wellness initiative, the community will provide healthy eating options for the residents, and the community will have ample green space where residents can exercise. Additionally, stakeholders mentioned that their vision is for residents in the community to lead healthy and safe lifestyles.

❑ **WEAK ECONOMY**

- ✓ Tough economic times have besieged a majority of American cities. While stakeholders felt there were economic strengths in their communities such as positive cash flow, little poverty throughout the community, and a variety of industries and businesses in the community, they also felt the weak economy has caused an increase in foreclosures, unemployment and reduced funding for community services.

Stakeholders perceive a decrease in available jobs, which they felt increased the number of residents who are under/uninsured due to the loss of employment benefits such as health insurance. Additionally, a decrease in available jobs has contributed to reducing the population and purchasing power of residents. The reduction of population and purchasing power often shrinks the community's tax revenues causing funding cuts for basic civic and social services, while simultaneously reducing incentives for existing small businesses to expand and new business to open, allowing the community to thrive. Stakeholders mentioned, as components of their five- to 10-year community vision, they would like to see the community provide strong workforce training for the residents so the population can grow. Additionally, stakeholders envision the community having financial resources in place to maintain and repair the community so it can have a strong infrastructure.

While stakeholders feel the community provides many services to residents, they also perceive a decrease in available community services (i.e., medical and food) due to funding cuts. Stakeholders also feel there has been an increase in residents' demand for community services due to an increase in unemployment. Stakeholders identified a community's ability to support and meet the needs of its residents as significant to their collective definitions of a healthy community. Stakeholders mentioned, as components of their five- to 10-year community vision, they would like to see the health system, school system and community actively engaged in the

community. Stakeholders also envision the community growing in primary care for the underserved population. Additionally, stakeholders visualize the community will be a place that provides students with after-school activities.

Stakeholders perceive the housing market in their communities as vulnerable due to the number of foreclosures that occurred during the economic crisis. Often when homes are foreclosed upon they are left vacant for lengthy periods of time, which can attract crime, have a negative impact on the community's image and cause homebuyers to avoid purchasing property in the area. Stakeholders stated that they would like to see the population in the community grow due to an increase in financial resources as a component of their five- to 10-year vision for their community.

☐ **COMMUNITY COLLABORATION**

- ✓ While some stakeholders felt collaboration was strong within their communities, others felt it was an issue in their community.

Stakeholders are under the impression that there is an inability to work collectively across Medina County. Additionally, stakeholders feel that Medina County is not being viewed as a region. Stakeholders believe that there is a lack of communication between residents. Stakeholders mentioned, as components of their five- to 10-year community vision, they would like to see community agencies become inter-related with resources being funneled through a central location.

☐ **LIMITED TRANSPORTATION**

- ✓ Stakeholders mentioned that the transportation system within the community is limited and not user-friendly. Additionally, stakeholders mentioned that transportation for older adults may not be adequate.

Barriers to a healthy community were addressed during the interview, as respondents were encouraged to describe a healthy community. There were four themes identified upon review of the stakeholders' collective definitions of a healthy community. These were: resident wellness including access to healthcare, a community's ability to support and meet the needs of residents, a healthy economy and education.

- ☐ **RESIDENT WELLNESS INCLUDING ACCESS TO HEALTHCARE** was identified by 11 stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to residents' wellness and access to healthcare that a healthy community should have:

- ✓ The ability to meet the basic health needs of residents
- ✓ Awareness about the latest health practices
- ✓ Accessible healthcare facilities
- ✓ Medical support services
- ✓ Proactive health and wellness services and a good hospital
- ✓ Wellness opportunities for the residents
- ✓ Healthy food choices
- ✓ Individuals that have access to healthcare, with adequate health insurance and health knowledge
- ✓ Low disease rates
- ✓ Residents that are healthy
- ✓ Residents that are fit, active and maintain a healthy diet
- ✓ Awareness about being a heart-healthy community

□ **A COMMUNITY'S ABILITY TO SUPPORT AND MEET THE NEEDS OF RESIDENTS** was identified by eight stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to the community's ability to support and meet the needs of residents that a healthy community should have:

- ✓ A holistic approach
- ✓ An approach that supports healthy choices
- ✓ The ability to offer quality of life amenities to the residents (i.e., parks and recreation)
- ✓ A safe and secure living environment for everyone
- ✓ An adequate safety net for citizens
- ✓ Services and facilities that meet the basic needs of residents in a reasonable fashion
- ✓ Good support services (i.e., government, recreation, etc.) that collaborate to provide services to the residents
- ✓ Long-term services for the residents
- ✓ Transportation
- ✓ Access to recreational facilities

□ **A HEALTHY ECONOMY** was identified by six stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to a healthy economy that a healthy community should have:

- ✓ A stable healthy economy
- ✓ Employment opportunities
- ✓ A low unemployment rate
- ✓ Positive growth and viability in the housing market and commerce

- ✓ Businesses doing well

- **EDUCATION** was identified by six stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following element relating to education that a healthy community should have:

- ✓ An excellent school system

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

Focus Groups with Community Residents

Tripp Umbach facilitated two focus groups with residents in the Medina Hospital community service area. Top community concerns include, access to healthcare and medical services, community services and maintenance of public property. Approximately 10 residents from the Medina 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 Medina 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 both of the focus group audiences.

The two focus group audiences were:

- ✓ Adult Parents 25-40 Years Old
 - Conducted at the St. Ambrose Church (Medina, OH)
- ✓ Underserved/Uninsured Residents Living in Medina County
 - Conducted at the Medina County District Library (Medina, OH)

Key high-level themes from both focus groups include:

□ ACCESS TO HEALTHCARE SERVICES

Many focus group participants felt that access to pediatric and under/uninsured healthcare and medical services was difficult for some residents to access due to these services being limited in the areas of availability of providers, affordable under/uninsured services and the perception of medical services provided at local facilities.

- ✓ **Availability of pediatric services:** Group participants were under the impression that pediatric and medical services for under/uninsured can be difficult to access due to the perception that there is no local medical clinic that offers free/affordable under/uninsured medical care, a limited

number of local pediatricians, and the perception that pediatric emergency medical care at local medical facilities can be problematic at times.

Some participants were under the impression that there are no local medical clinics providing free under/uninsured medical care. Participants felt that community-based organizations and local hospitals could collaborate to provide a clinic that would offer 24-hour under/uninsured medical care to residents within the community.

Some participants believed that there were a limited number of pediatricians practicing in the community. Participants believed that many residents are seeking pediatric medical care outside of their community. Participants felt that residents would prefer to seek pediatric medical care in their community rather than outside of their community. Participants were under the impression that providing a local children's hospital would improve access to pediatric medical care for residents.

- ✓ ***Affordability of medical services:*** Group participants were under the impression that pediatric and under/uninsured medical services can be difficult for some residents to afford due to the limitations of health insurance (i.e., speech therapy).

Some participants perceived the cost of uninsured medical care to be unaffordable at medical facilities in the community. Participants believed that local medical providers could more clearly state the cost of services prior to providing medical services, which could increase consumer control. Increasing consumer control in healthcare could allow under/uninsured residents to make more informed decisions about their healthcare spending.

- ✓ ***Perceptions about local healthcare services:*** Participants perceived that the pediatric emergency medical care available at local medical facilities was not always the quality that residents prefer for their children. Participants were under the impression that parents are taking children to one of the children's hospitals that are accessible to the region. However, the nearest children's hospital that offers pediatric emergency medical care is up to 45 minutes away from the community.

❑ COMMUNITY SERVICES

While focus group participants perceive that services are available in their community, many participants were under the impression that services were limited in the areas of recreational activities and dissemination of information.

- ✓ **Limited recreational and physical activities:** Many focus group participants gave the impression that there are limited recreational and physical activities available to residents, particularly young people, due to limited facilities and costly fees that may be unaffordable for some residents.

Participants were under the impression that recreational programs for adolescents are limited in their community due to program closures, limited adult-supervision, and fees that can be unaffordable for some residents.

- ✓ **Information dissemination:** Many focus group participants perceived that residents are not aware of the programs and services available, including health-related programs. Some participants felt that there is information available for residents in the community, but the process of tracking down that information on a regular basis may be difficult for some residents. Many participants felt the result of limited information dissemination in their communities is a reduced awareness among residents, which causes a reduction in resident participation in available events, programs and services.

❑ MAINTENANCE OF PUBLIC PROPERTY

Focus group participants discussed the perception that public property such as sidewalks and public parks are not always well maintained.

- ✓ Some focus group participants were under the impression that sidewalks and public parks are not always well maintained and/or available. Participants believed there is locations in their community that experience high foot-traffic that do not have sidewalks, which often causes residents to walk in the road. Additionally, participants perceived that local public recreational facilities (i.e., public parks) are not always well maintained, which can limit the safety of those facilities at times.

Additional data and greater detail related to the Medina Hospital Community Focus Groups is available in Appendixes D and E.

Conclusions and Recommendations

The community needs identified through the Medina 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 services. For example, limited access to affordable healthcare and medical services increases the potential for risk to the overall well-being and health of residents and the community. While the unemployment rate is low for Medina County as a whole, the unemployment rate for one of the zip code area’s within the Medina Hospital community is higher than the rest of the county. Community stakeholders and focus group participants are concerned that medical care is often unaffordable, particularly for residents that are under/uninsured. Participants believe there are limited resources in their communities that offer affordable under/uninsured residents medical services. Furthermore, community stakeholders perceive the Medina Hospital community has an increase in unemployment, which often causes an increase in residents who are under/uninsured due to the loss of employment benefits such as health insurance, as well as a decrease in their purchasing power. As a result, stakeholders perceive a decrease in available community services (i.e., public transportation, community services, etc.) due to funding cuts.

Medina 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 Medina 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:

Medina Hospital Community Key Stakeholder Organizations

Key Stakeholder Organizations

Representatives from the following community based organizations provided detailed input during the community health needs assessment process:

- ☐ Leadership Medina County (Non-Profit Organization)
- ☐ Medina County Economic Development Corporation (Business Corporation)
- ☐ City of Medina Police Department (Government Organization)
- ☐ Red Cross (Service Organization)
- ☐ Brunswick Chamber of Commerce (Local Government)
- ☐ The A.I. Root Company (Family-Owned Business)
- ☐ Office for Older Adults (Public Service)
- ☐ Feeding Medina County (Service Organization)
- ☐ Medina Breakfast Kiwanis (Non-Profit Organization)
- ☐ Medina County Health Department (Service Organization)
- ☐ Medina City School District (Public School System)
- ☐ Westfield Group (Public Service)
- ☐ Highland Local School District (Public School System)
- ☐ Medina Chamber of Commerce (Local Government)
- ☐ Cleveland Clinic Family Medicine (Healthcare Organization)
- ☐ City of Medina (Local Government)

APPENDIX B:

Medina Hospital Community Secondary Data Profile

Medina Hospital Community Health Needs Profile



Contents



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

Overview of Secondary Data Methodology

- Tripp Umbach obtained information on the health status and socio-economic/environmental factors related to health and needs of residents of 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)

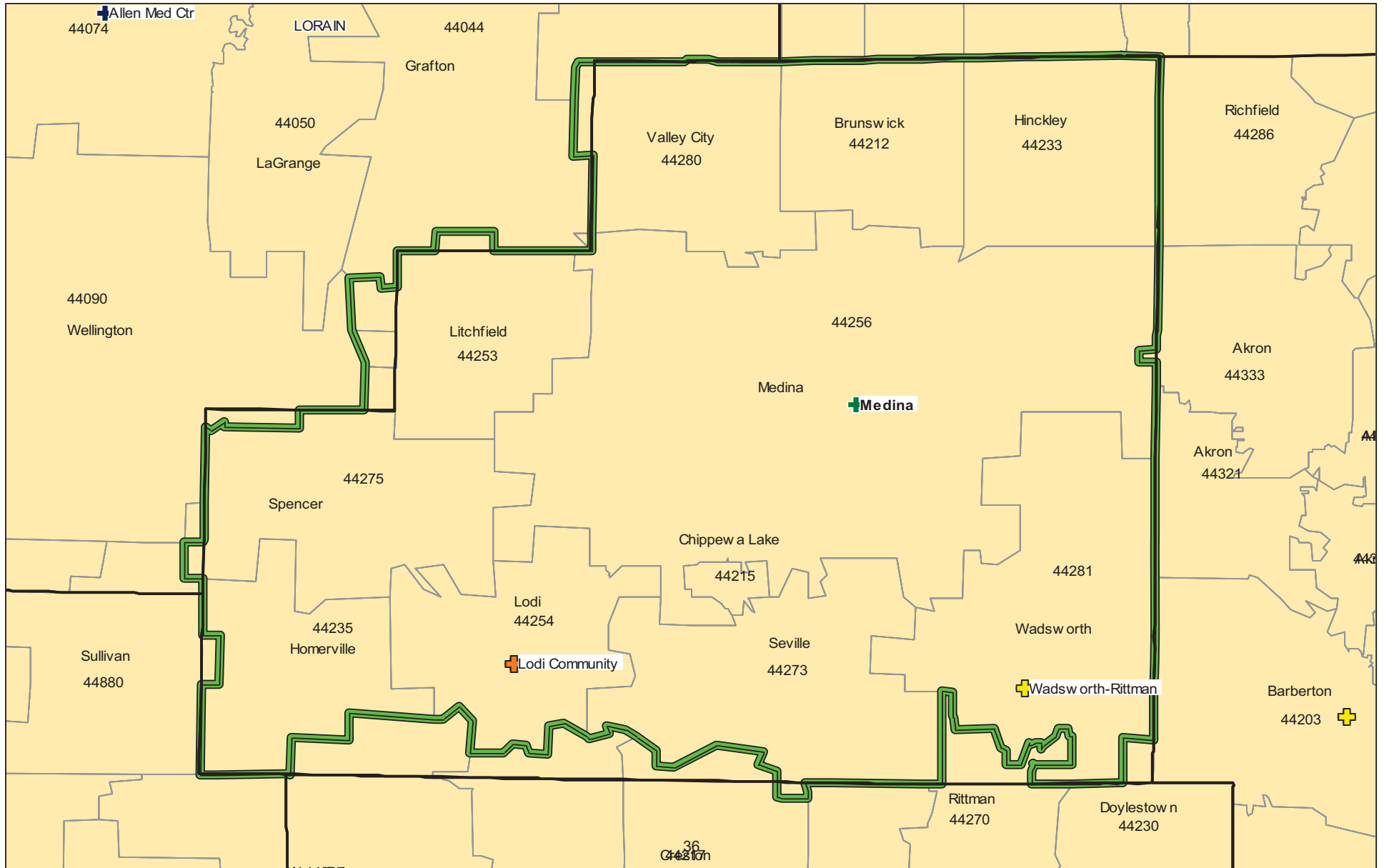
- In 2005 Catholic Healthcare West, in partnership with Thomson Reuters, pioneered the nation's first standardized Community Need Index (CNI). CNI was applied to quantify the severity of health disparity for every zip code in Ohio based on specific barriers to healthcare access.
- Because the CNI considers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

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.

Medina Hospital – Community Map





Community Demographic Profile

- ❑ **Hospital community** is defined as a zip code geographic area based on 80% of the hospital's inpatient volumes. The Medina Hospital service area only encompasses Medina County. The Medina Hospital community consists of 11 zip code areas within Medina County. For the purposes of this hospital profile, we have combined the analysis to compare Medina Service Area/Medina County to Ohio.
- ❑ The Medina Hospital community is the only Cleveland Clinic hospital community with **projected population growth**.
- ❑ **Gender and Age within the Medina Hospital community** are consistent with Ohio.
- ❑ **There are higher percentages of Caucasian citizens and citizens with some college education or higher** in the Medina Hospital community when compared with Ohio.
- ❑ **Average and median household income** levels are higher in the Medina Hospital community when compared with the average and median income levels of Ohio.
- ❑ **The Medina Hospital community unemployment rate** is much lower than the overall Ohio and national rates.
- ❑ **There are also lower rates of families living in poverty and citizens who are uninsured or on government insurance** in the Medina Hospital community when compared with Ohio.

Key Points – Community Needs in the Medina Hospital Community

- ❑ **The Medina Hospital community is the only Cleveland Clinic hospital community projecting a population increase by 2015.**
 - ❑ Positive economic indicators such as low unemployment rates may be contributing to the population increase within the Medina Hospital community.
- ❑ **The Medina Hospital community recorded the lowest (most favorable) Community Need Index (CNI) among all of the Cleveland Clinic hospitals with a CNI score of 1.4.**
- ❑ **The Medina Hospital community is a collection of “low-need” communities; however the CNI analysis lets us dig deeper into the traditional socio-economic barriers to community health.**
 - ❑ Lodi (44254) (CNI=2.4) and Homerville (44235) (CNI=2.0) have the greatest number of socio-economic barriers to community health.
- ❑ **A closer look at Lodi (44254) reveals the highest unemployment rate (7.5%) compared with the overall unemployment rate for the Medina Hospital community (5.1%) and Ohio (7.0%).**
- ❑ **Homerville (44235) contains the highest rates of uninsured citizens at 11%.**

Key Points – Community Needs in the Medina Hospital Community

- ❑ **For the majority of diseases, the Medina Hospital community records lower prevalence rates when compared with Ohio.**
 - ❑ Lower unemployment and uninsured rates may contribute to overall lower rates of disease prevalence in Medina County. Disease prevalence rates in Medina County are lower than Ohio averages.
- ❑ **PQI scores in the Medina Hospital community are at or below Ohio PQIs for most factors.**
- ❑ **The Medina Hospital community also records lower rates of all negative health behaviors (obesity, high blood pressure, smoking) when compared with Ohio.**
- ❑ **Penetrating trauma rates in the Medina Hospital community is lower than overall Ohio levels.**

Medina Hospital Community – Initial Reactions to Secondary Data

- The consultant team has identified the following data trends and their potential impact on the transition into the primary data collection of the Community Health Needs Assessment.
 - Overall, the Medina Hospital community CNI is low (1.4, on a scale from 1 to 5), however, Lodi and Homerville require a closer examination because they show the highest rates of unemployment, uninsured, citizens living in poverty and citizens with no high school diploma within the hospital community.
 - Disease prevalence and PQL scores are primarily lower than Ohio rates.
 - The Medina Hospital community also records lower rates for all negative health behaviors (obesity, high blood pressure, smoking) when compared with Ohio. Primary data collection may uncover Medina Hospital community efforts to support and maintain health-conscious behaviors.



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 U.S. 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.

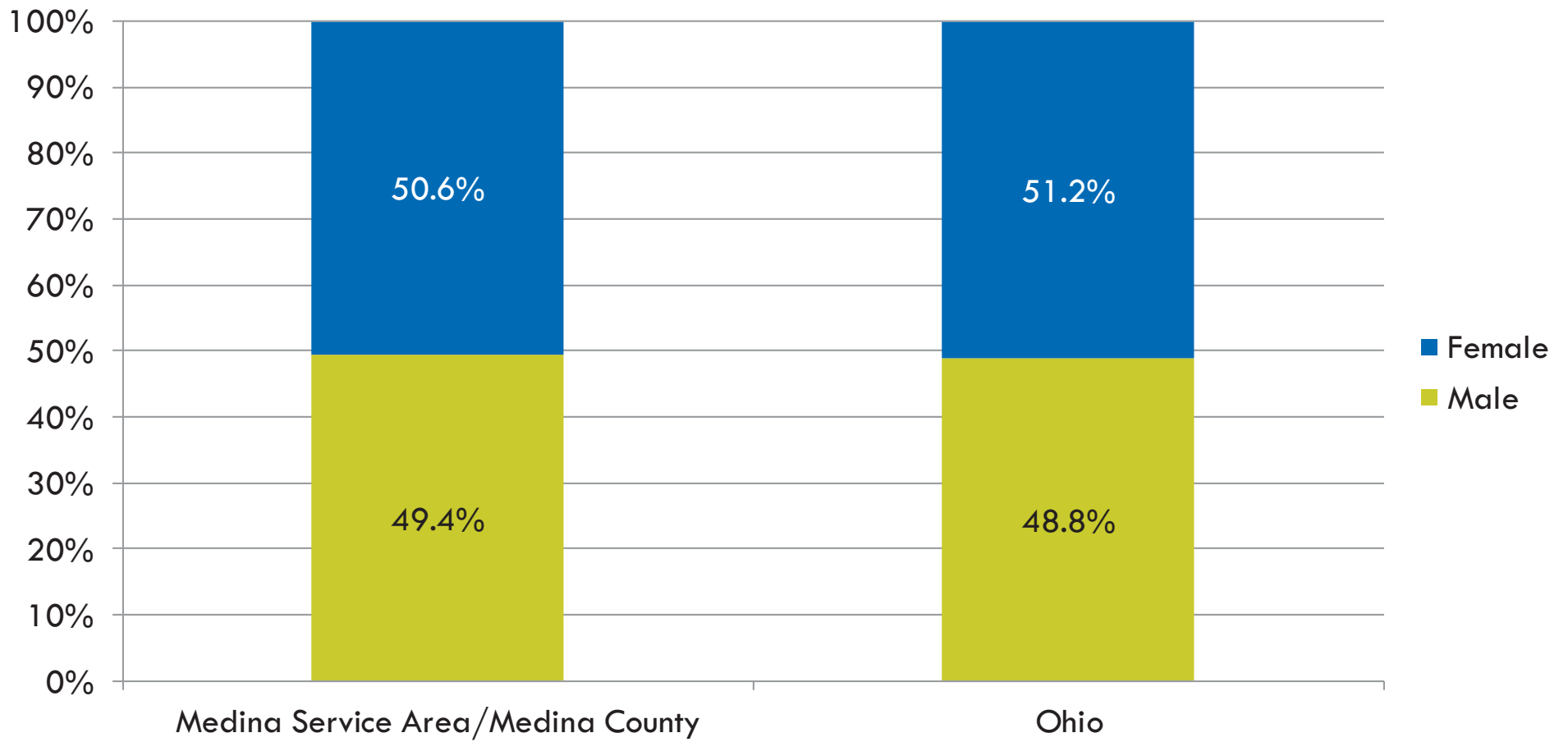
Demographic Profile

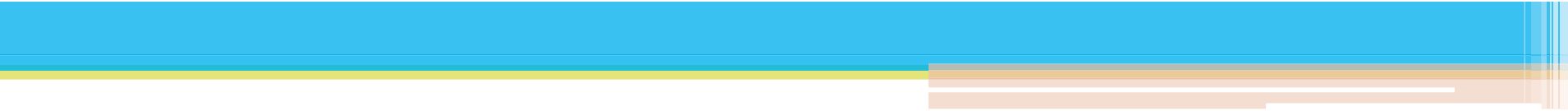
- **Hospital community** is defined as a zip code geographic area based on 80% of the hospital's inpatient volumes. The Medina Hospital service area only encompasses Medina County. The Medina Hospital community consists of 11 zip code areas within Medina County. For the purposes of this hospital profile we have combined the analysis to compare Medina Service Area/Medina County to Ohio.
- The Medina Hospital community is the only Cleveland Clinic hospital community with **projected population growth**.
- **Gender and Age within the Medina Hospital community** are consistent with Ohio.
- **There are higher percentages of Caucasian citizens and citizens with some college education or higher** in the Medina Hospital community when compared with Ohio.
- **Average and median household income** levels are higher in the Medina Hospital community when compared with the average and median income levels of Ohio.
- **The Medina Hospital community unemployment rate** is much lower than the overall Ohio and national rates.
- **There are also lower rates of families living in poverty and citizens who are uninsured or on government insurance** in the Medina Hospital community when compared with Ohio.

Population

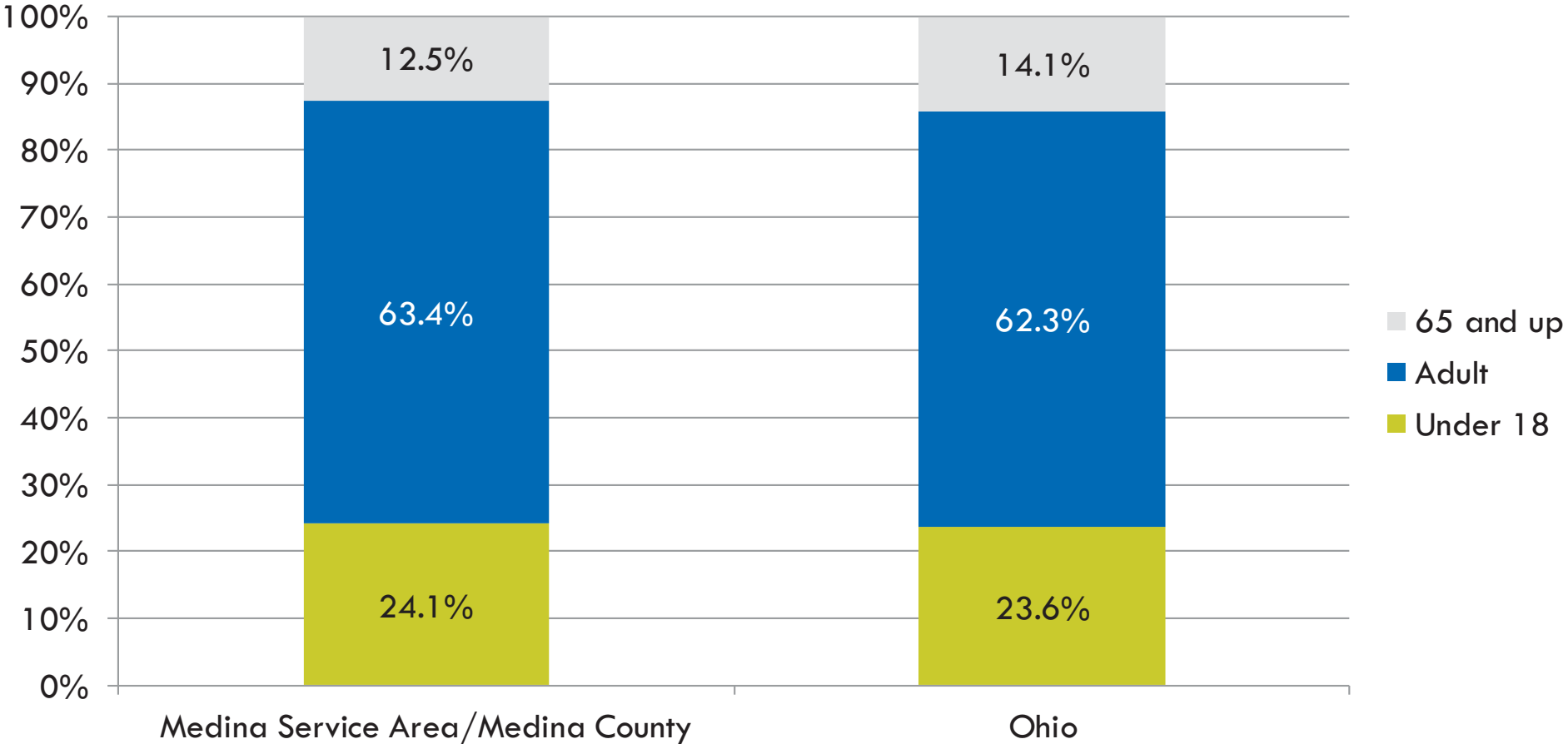
Total Population	Medina Service Area/ Medina County	Ohio
2000	150,180	11,353,136
2010	172,829	11,496,028
2015	181,775	11,471,127
Projected 5 year change (2010 – 2015)	8,946	-24,901

Gender

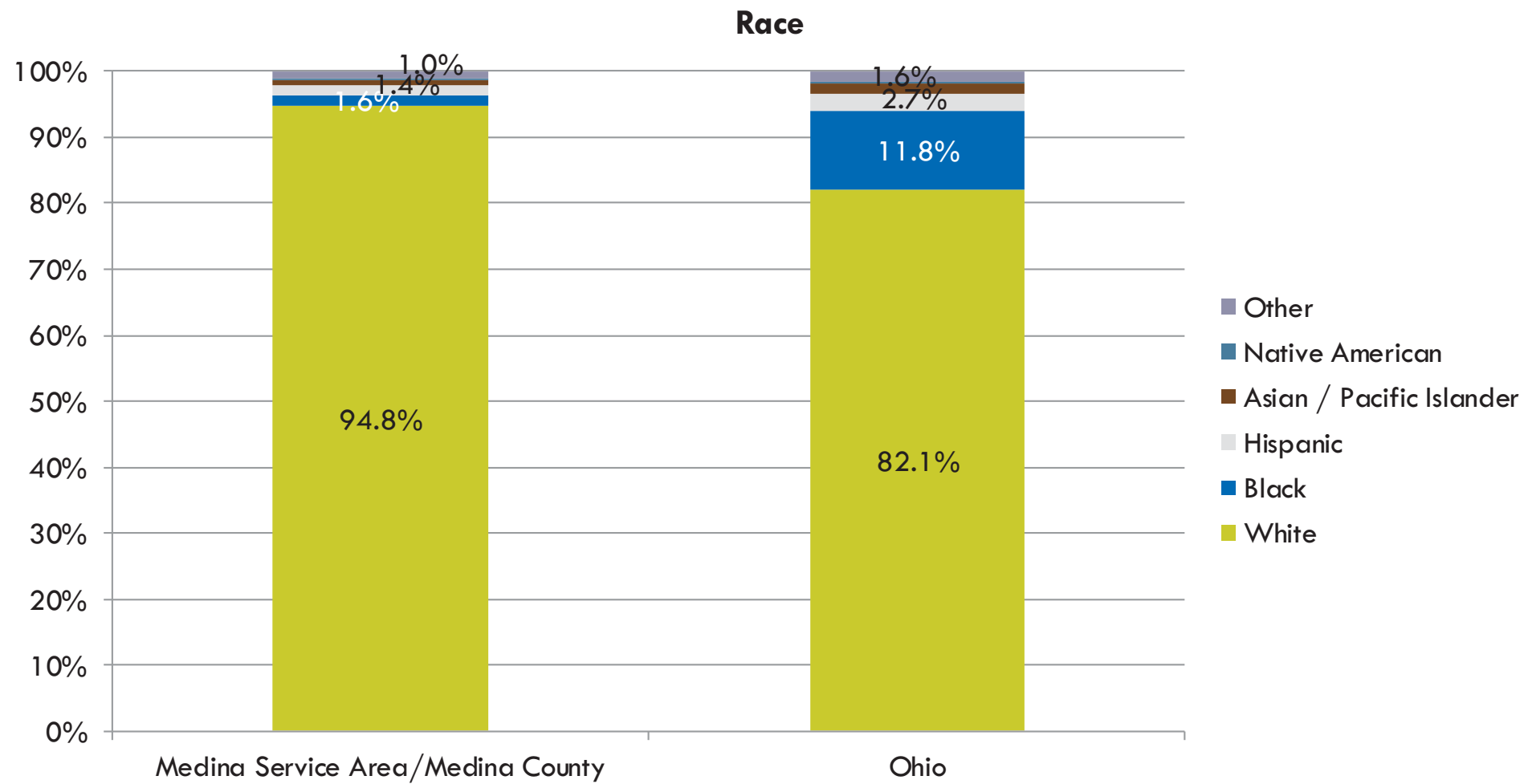




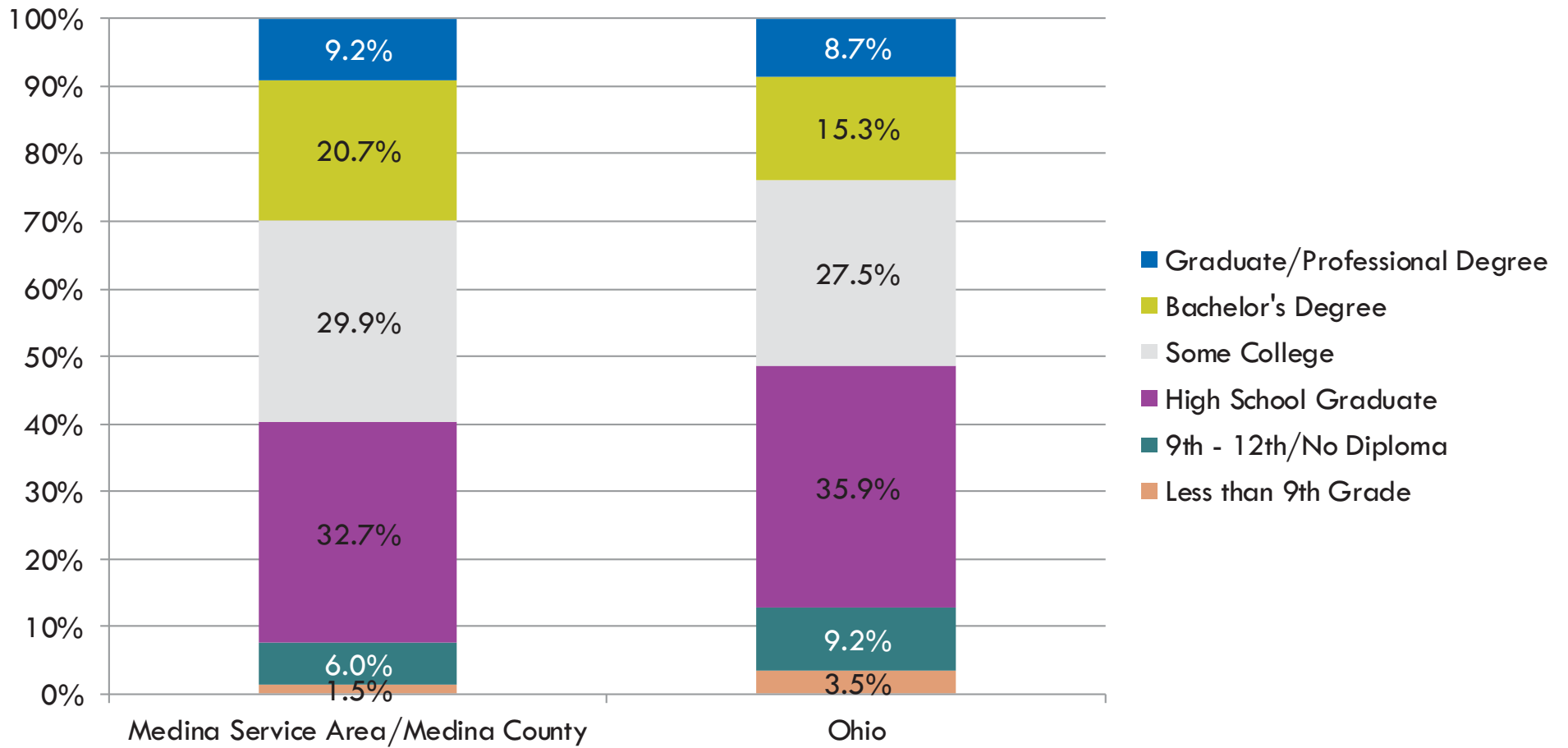
Age



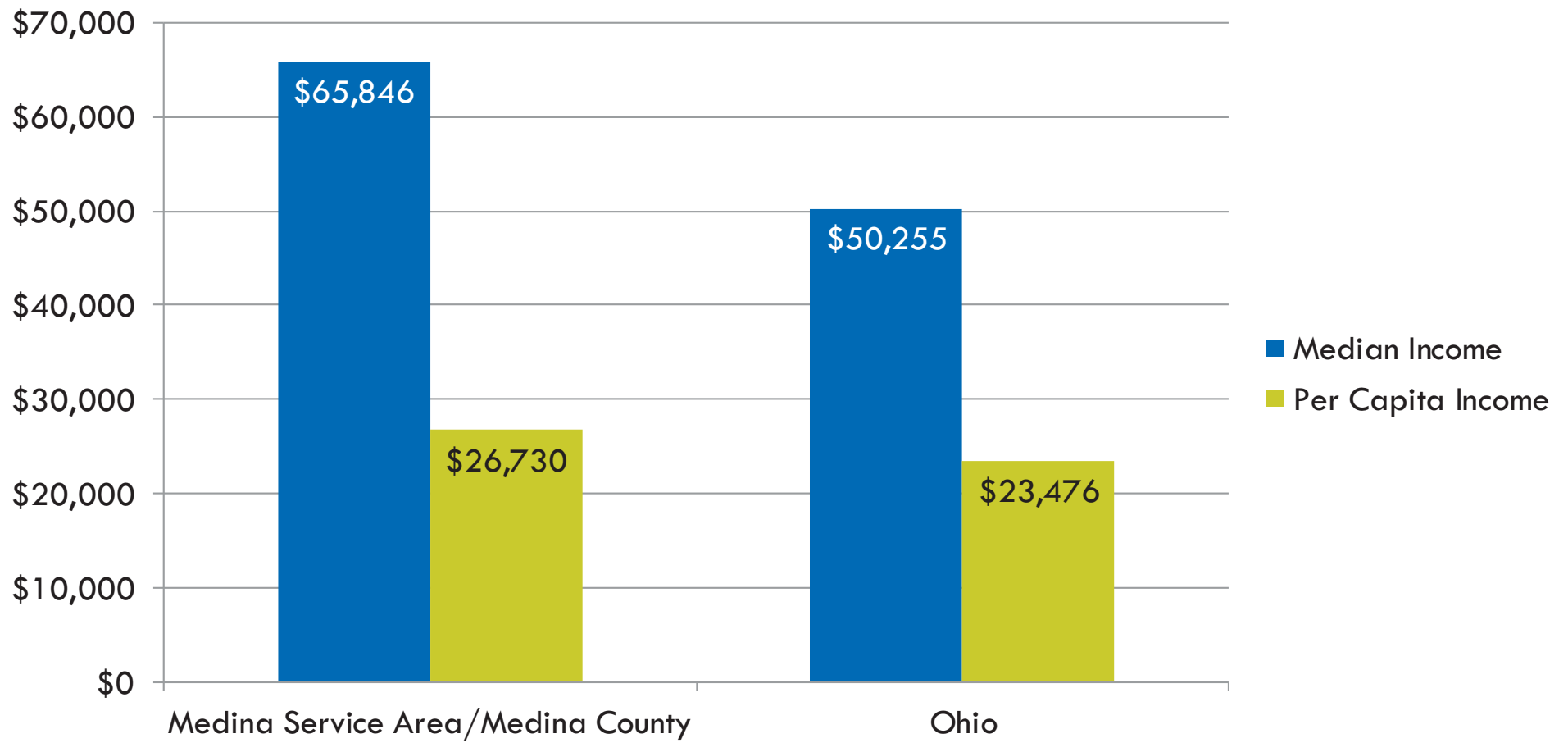
Source: Thomson Reuters



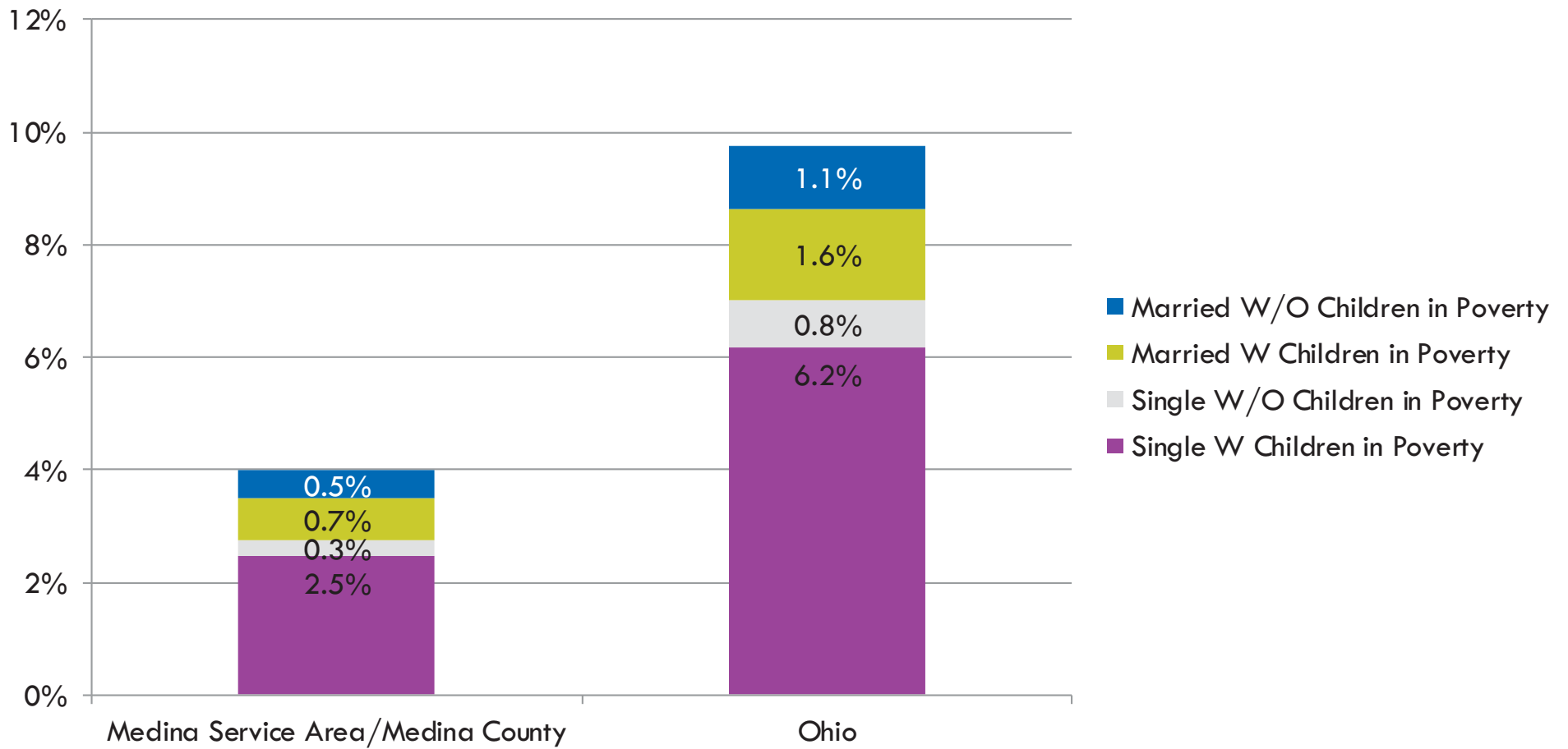
Educational Attainment



Household Income

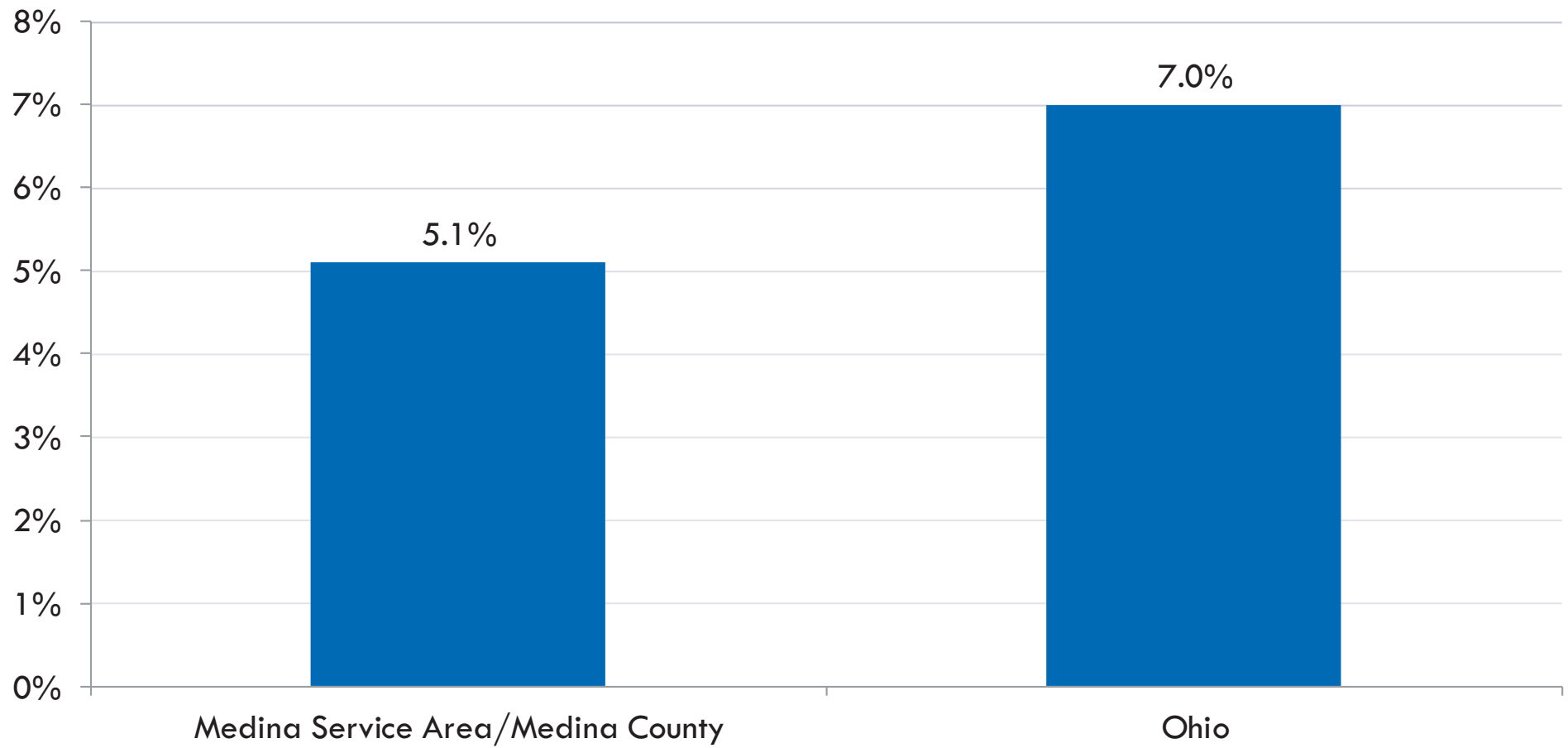


Household Status

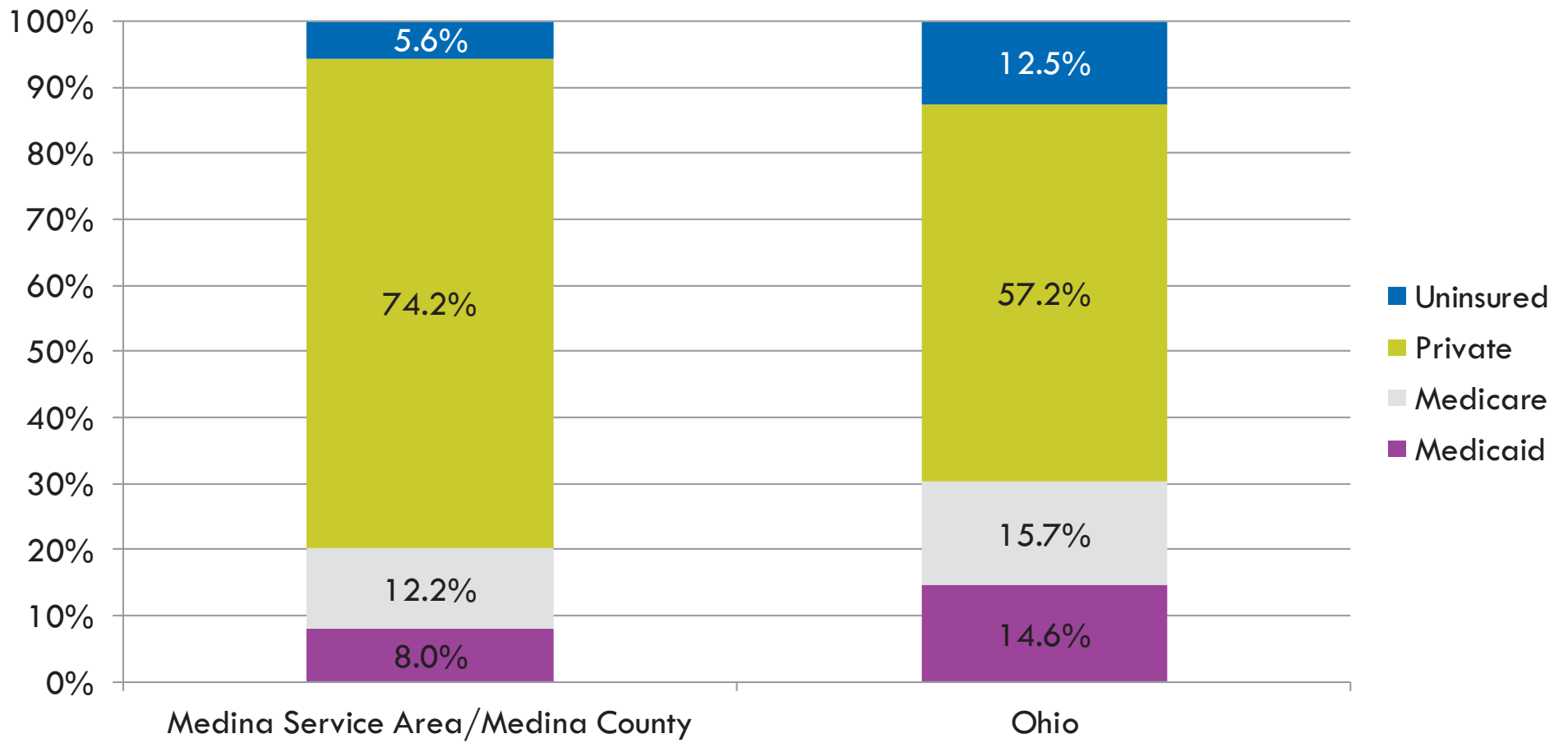


Unemployment Rate

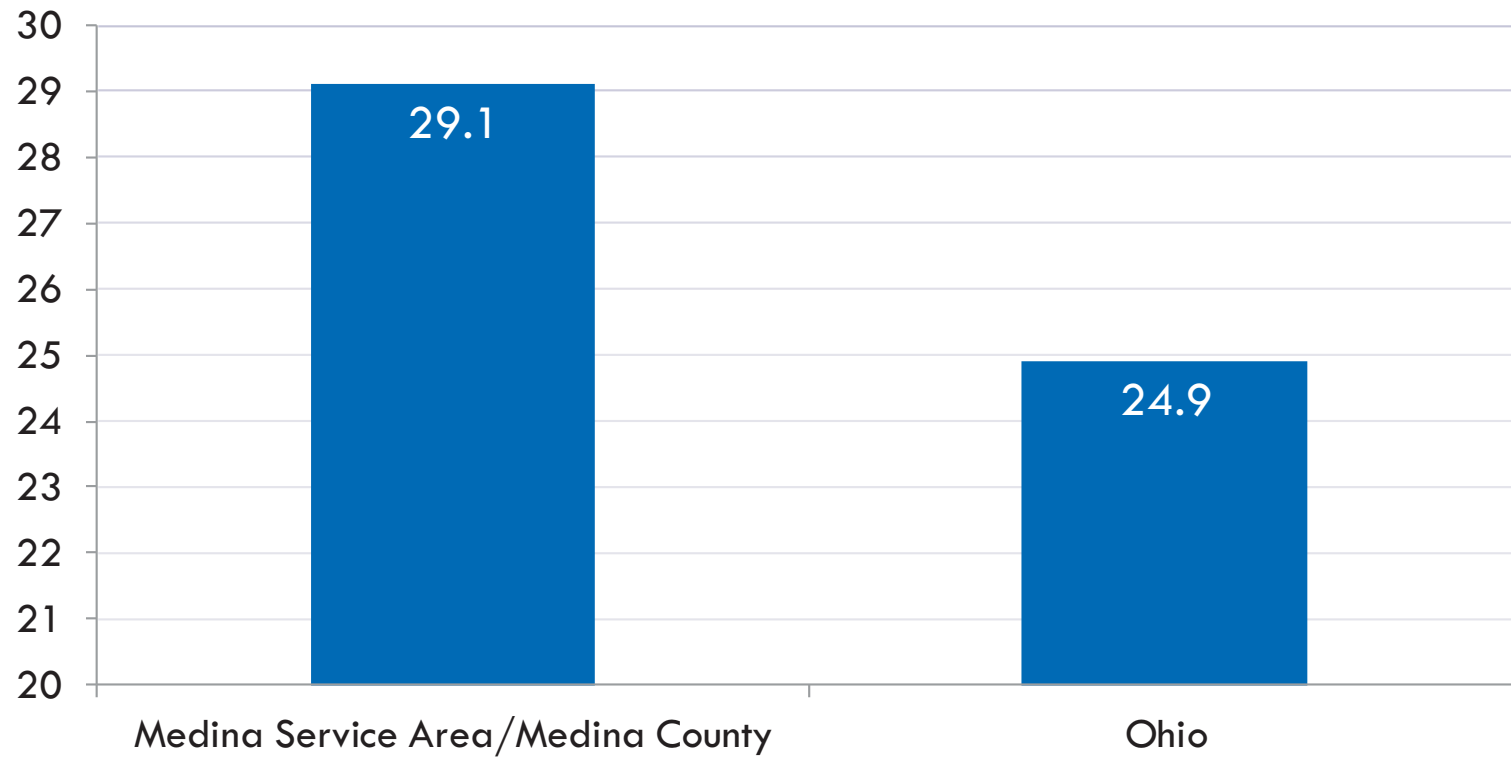
* 2010 Unemployment Statistics – accessed March 2011



Insurance Status



Average Work Commute (mins)



Overview



Community Need Index (CNI)

- ❑ **The unemployment rate is highest within the Lodi (44254) area at 7.5%.**
 - ❑ However, the unemployment rate of Lodi is consistent or lower than Medina County, Ohio and national rates.
 - ❑ Of the Medina Hospital community, **Homerville (44235) has the highest rates of citizens living in poverty**, uninsured citizens, citizens with limited English proficiency and citizens without a high school diploma.
 - ❑ In contrast, Hinckley (44233) only has 2.9% of the population with no insurance.
- ❑ **The number of families and adults 65 and older living in poverty is a barrier to community health.**
 - ❑ The communities of Lodi (44254) and Homerville (44235) have the highest rates of individuals and families living in poverty within the Medina Hospital community.



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

Zip	City	County	Tot Pop	HH	Rental %	Unemp %	Uninsu %	Minor %	Lim Eng	No HS Dip	65+ Pov	M w / Chil Pov	Sin w / Chil Pov	Inc Rank	Insur Rank	Educ Rank	Cult Rank	Hous Rank	CNI Score
44212	Brunswick	Medina	41,431	15,199	17.9%	5.0%	5.0%	6.0%	5.9%	8.4%	13.8%	1.6%	22.5%	2	1	1	1	2	1.4
44215	Chippewa Lake	Medina	2,528	998	17.1%	5.3%	6.5%	3.2%	3.1%	11.4%	13.6%	2.3%	18.2%	2	2	2	1	2	1.8
44233	Hinckley	Medina	8,251	2,936	5.5%	7.2%	2.9%	3.9%	8.2%	7.2%	7.4%	1.3%	25.2%	2	1	1	1	1	1.2
44235	Homerville	Medina	2,225	661	13.1%	5.7%	11.0%	6.0%	24.4%	16.9%	15.7%	21.7%	3.7%	2	3	3	1	1	2
44253	Litchfield	Medina	4,293	1,415	5.8%	4.8%	3.7%	3.0%	3.3%	8.3%	10.9%	2.1%	16.0%	1	1	1	1	1	1
44254	Lodi	Medina	5,395	2,157	23.4%	7.5%	10.3%	2.9%	2.2%	12.9%	20.2%	2.9%	36.2%	3	3	2	1	3	2.4
44256	Medina	Medina	60,854	22,416	20.2%	4.0%	4.7%	6.5%	4.0%	5.8%	12.6%	1.7%	20.6%	2	1	1	2	3	1.8
44273	Seville	Medina	7,893	2,931	13.4%	6.5%	4.5%	2.3%	3.3%	7.4%	9.7%	1.9%	12.4%	1	2	1	1	1	1.2
44275	Spencer	Medina	4,081	1,436	13.1%	4.6%	5.3%	3.0%	4.9%	11.7%	13.4%	3.1%	26.2%	2	1	2	1	1	1.4
44280	Valley City	Medina	5,199	1,785	8.9%	4.4%	4.3%	5.4%	4.7%	9.4%	11.2%	0.6%	19.0%	1	1	1	1	1	1
44281	Wadsworth	Medina	30,679	12,013	20.4%	6.0%	6.0%	3.6%	3.0%	7.0%	17.9%	2.2%	19.4%	2	2	1	1	2	1.6
Medina Hospital Community Summary			172,829	63,947	17.9%	5.1%	5.1%	5.2%	4.7%	7.5%	14.0%	2.1%	21.1%	2	1	1	1	2	1.4

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

A CNI score above 3.0 will typically indicate a specific socio-economic factor impacting the community's access to care. At the same time, a CNI score of 1.0 does not indicate that the community requires no attention at all, but rather the community may need to focus resources.

Source: Thomson Reuters

Community Need Index (CNI)

Zip	City	County	Inc Rank	Insur Rank	Educ Rank	Cult Rank	Hous Rank	CNI Score
44254	Lodi	Medina	3	3	2	1	3	2.4
44235	Homerville	Medina	2	3	3	1	1	2.0
44215	Chippewa Lake	Medina	2	2	2	1	2	1.8
44256	Medina	Medina	2	1	1	2	3	1.8
44281	Wadsworth	Medina	2	2	1	1	2	1.6
44212	Brunswick	Medina	2	1	1	1	2	1.4
44275	Spencer	Medina	2	1	2	1	1	1.4
44233	Hinckley	Medina	2	1	1	1	1	1.2
44273	Seville	Medina	1	2	1	1	1	1.2
44253	Litchfield	Medina	1	1	1	1	1	1.0
44280	Valley City	Medina	1	1	1	1	1	1.0
Medina Hospital Community			2	1	1	1	2	1.4

- Lodi (44254) and Homerville (44235) record the highest CNI scores and have the greatest need in the Medina Hospital community. However, with a CNI score of 2.4 and 2.0 respectively (not even half of the highest community need score of 5.0), the Medina Hospital community is faced with less socio-economic barriers overall.

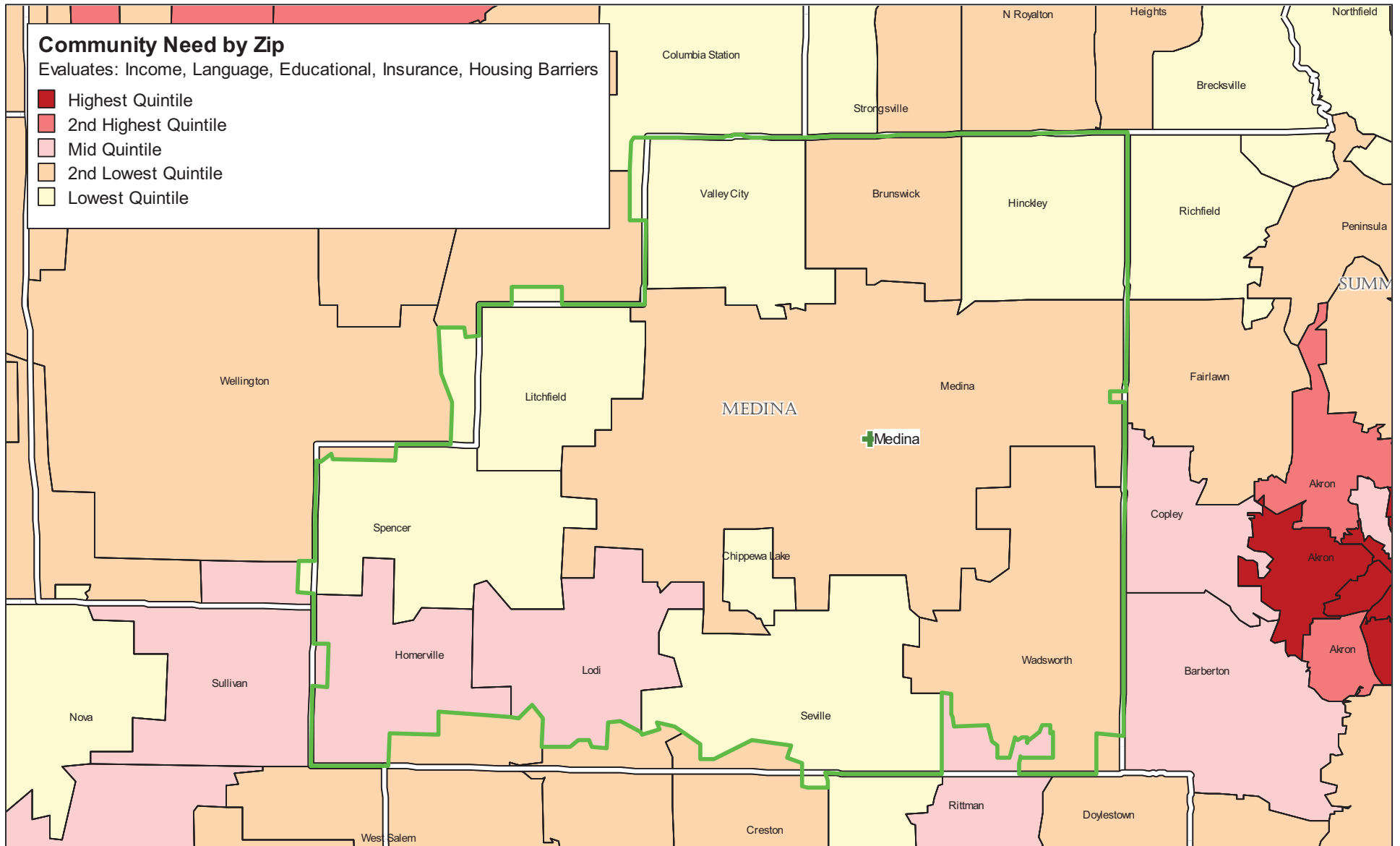
Community Need Index (CNI)

Zip	Tot Pop	HH	Rental %	Unemp %	Uninsu %	Minor %	Lim Eng	No HS Dip	65+ Pov	M w/ Chil Pov	Sin w/ Chil Pov	Inc Rank	Insur Rank	Educ Rank	Cult Rank	Hous Rank	CNI Score
44254	5,395	2,157	23.4%	7.5%	10.3%	2.9%	2.2%	12.9%	20.2%	2.9%	36.2%	3	3	2	1	3	2.4
44235	2,225	661	13.1%	5.7%	11.0%	6.0%	24.4%	16.9%	15.7%	21.7%	3.7%	2	3	3	1	1	2.0

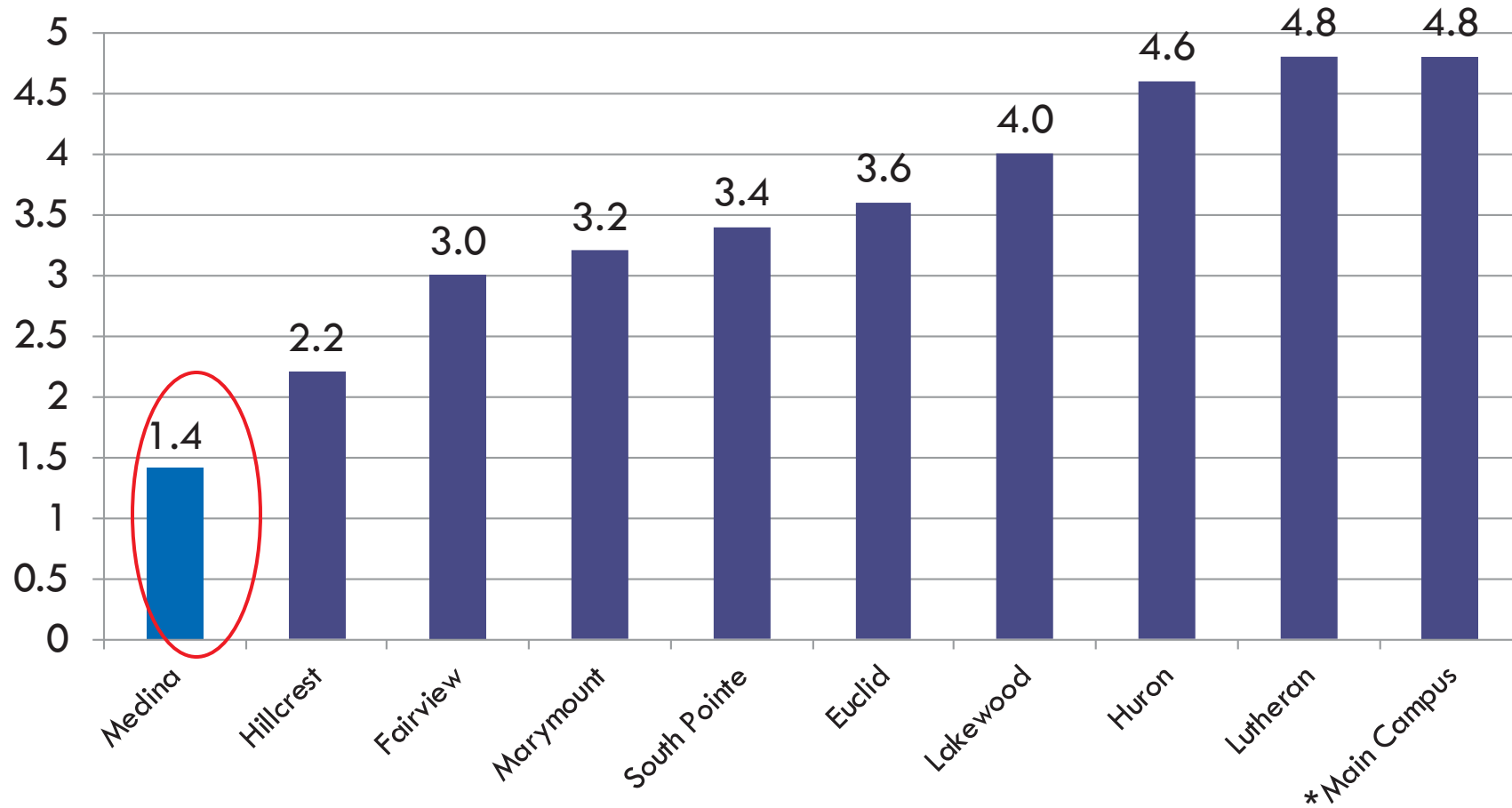
- The CNI zip code summary provides the community hospital with valuable background information to begin addressing the community needs.
- A closer look at Lodi (44254) reveals the highest unemployment rate within the hospital community of 7.5%. The overall unemployment rate for the Medina Hospital community is 5.1%. Lodi community has a higher unemployment rate than the Medina Hospital community (5.1%) and Ohio (7.0%), but this is still lower than the national rate of unemployment (approximately 9%).
- Also, Homerville (44235) contains the highest rates of uninsured citizens at 11%. It is true that this is the highest rate for the Medina Hospital community, but it is important to note that this and the unemployment rate are both comparable or lower than Ohio and national levels.
- The number of single parents with children living in poverty is more than 36% in the Lodi community, much higher than the Medina Hospital community average of 21%.

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Medina Hospital – CNI Map



Community Need Index – Hospital Communities



- The Medina Hospital community shows the lowest CNI score, indicating the fewest number of traditional socio-economic barriers to community health.

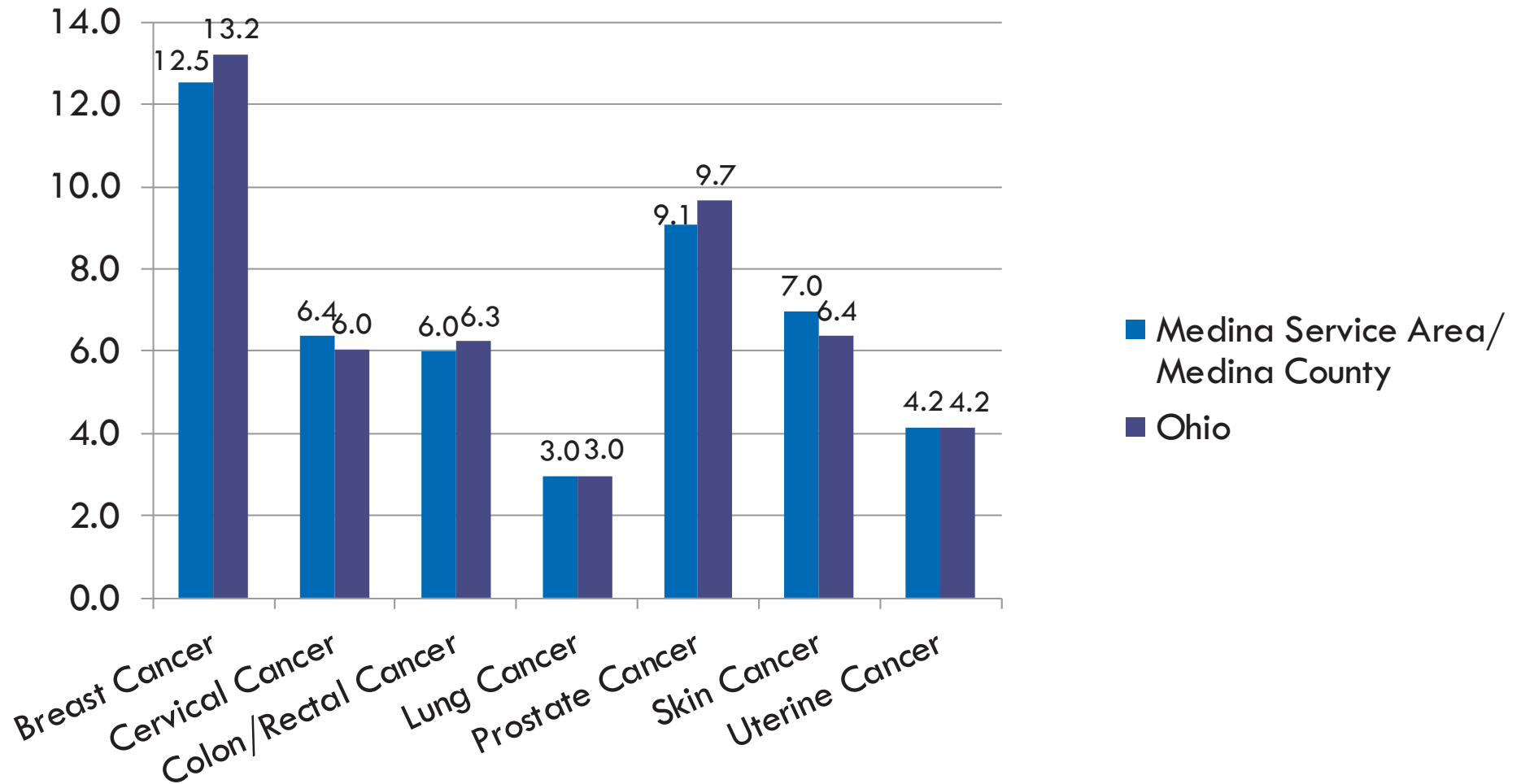
Overview



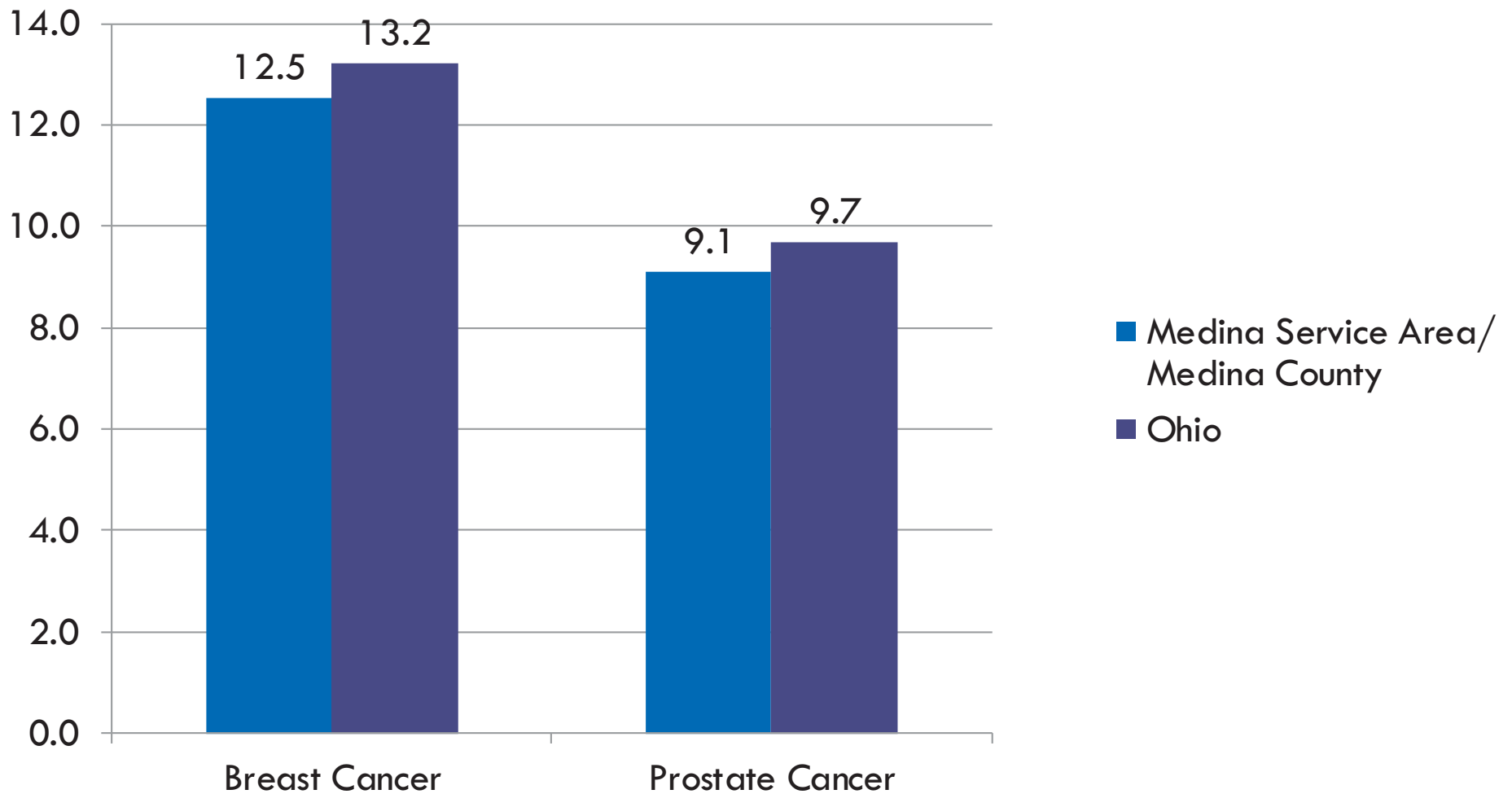
Disease Prevalence Profile

- ❑ **Breast cancer and 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. However, for both breast and prostate cancer, the Medina Hospital community has lower prevalence rates than Ohio. For other cancers, the Medina Hospital community is consistent with Ohio.
- ❑ The Medina Hospital community shows lower rates for all heart-related diseases when compared with Ohio.
- ❑ **Diabetes, strokes and weak/failing kidneys** reported in the Medina Hospital community all show lower prevalence rates when compared with Ohio.

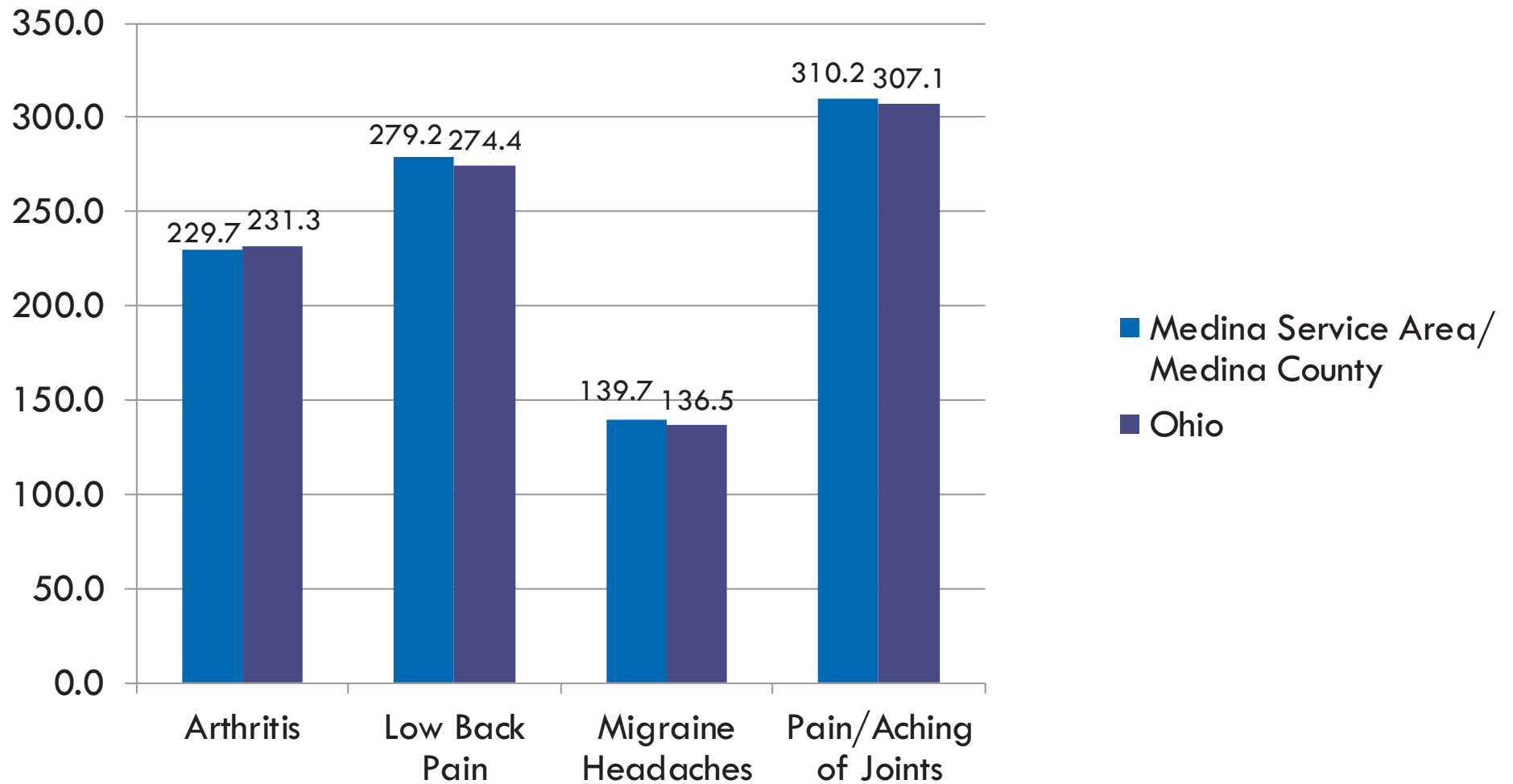
Cancer Prevalence Rates



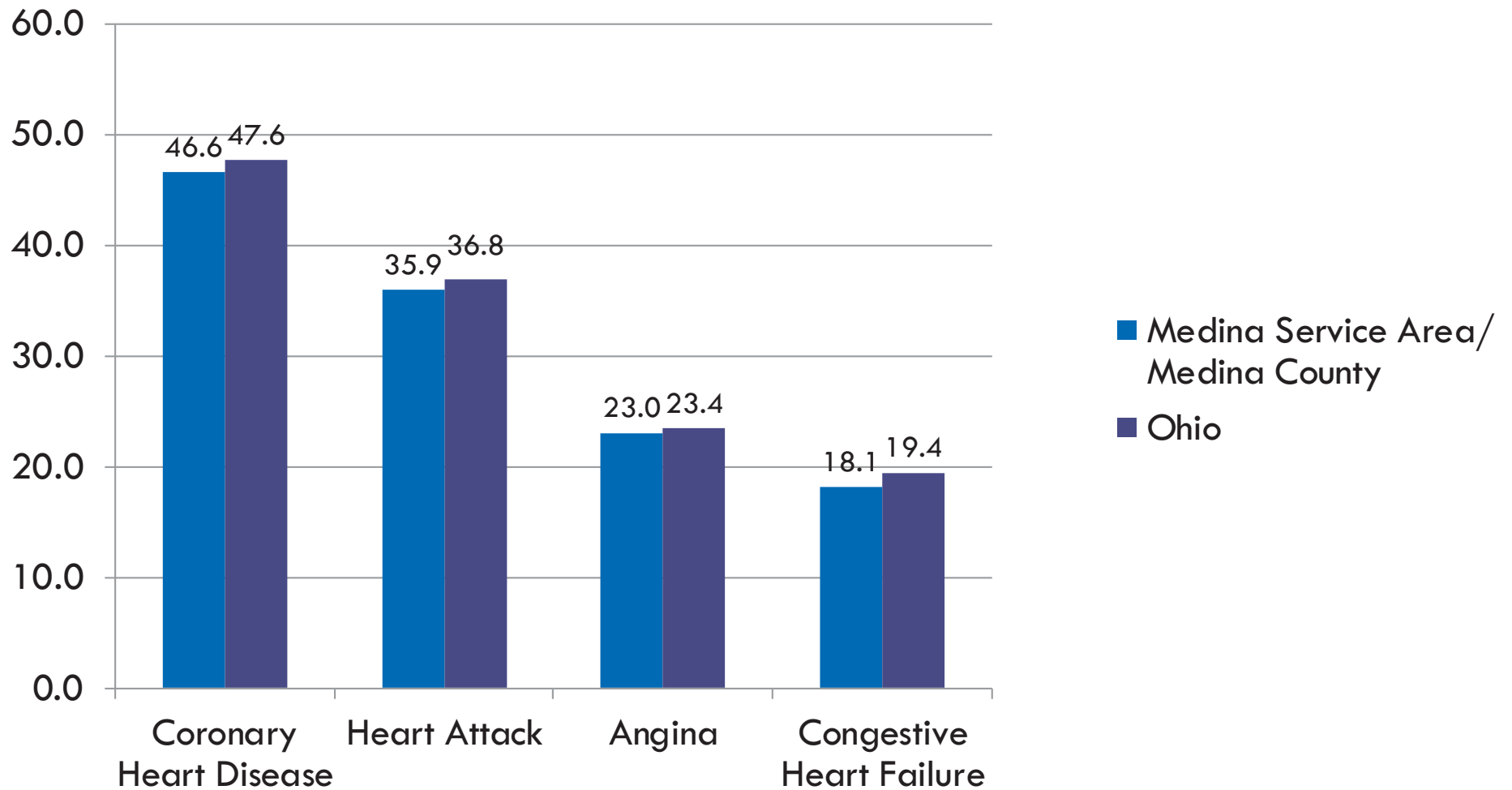
Cancer Prevalence Rates – Breast and Prostate



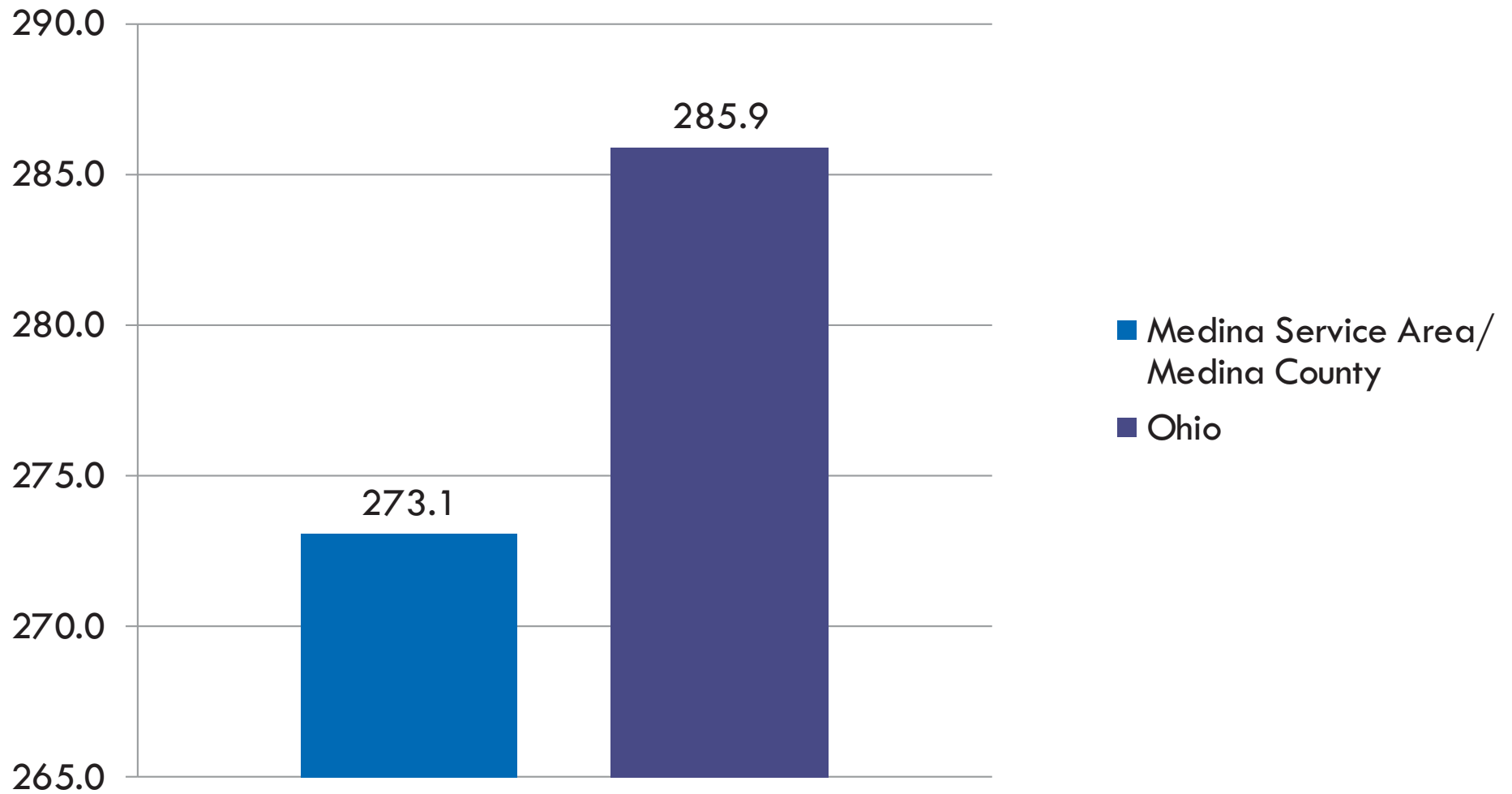
Aches/Pains Prevalence Rates



Heart-Related Prevalence Rates

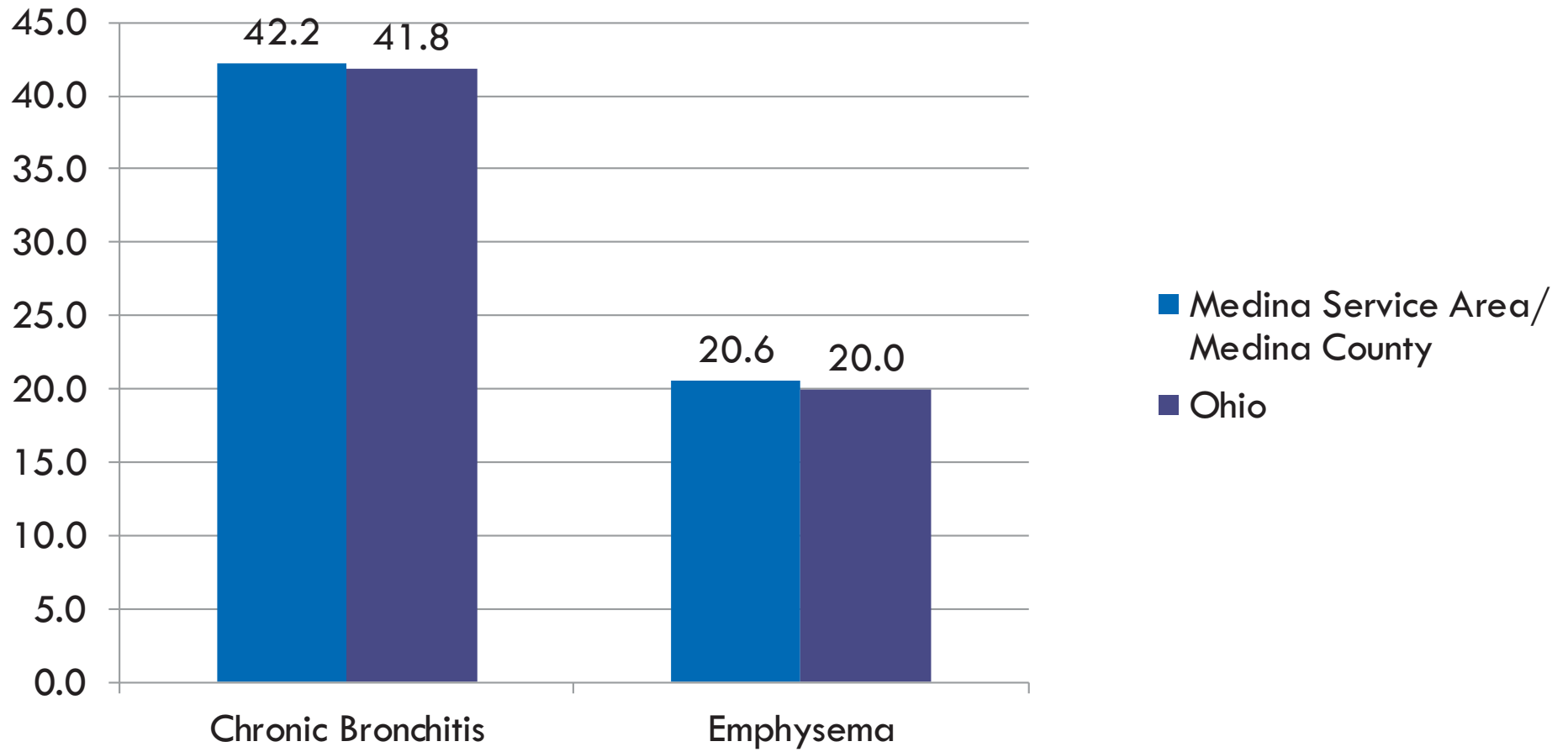


Hypertension – Heart Related Prevalence Rates

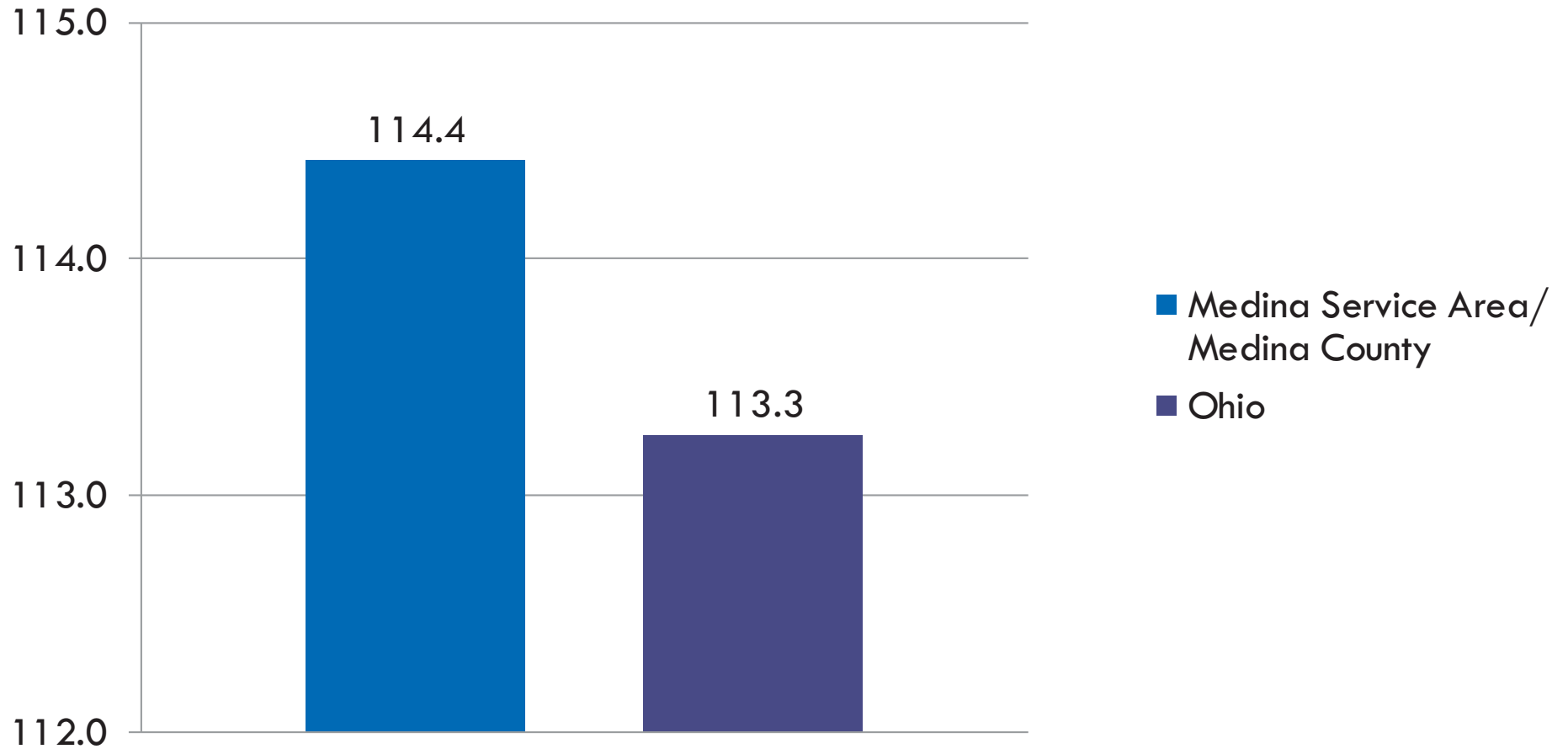


Source: Thomson Reuters

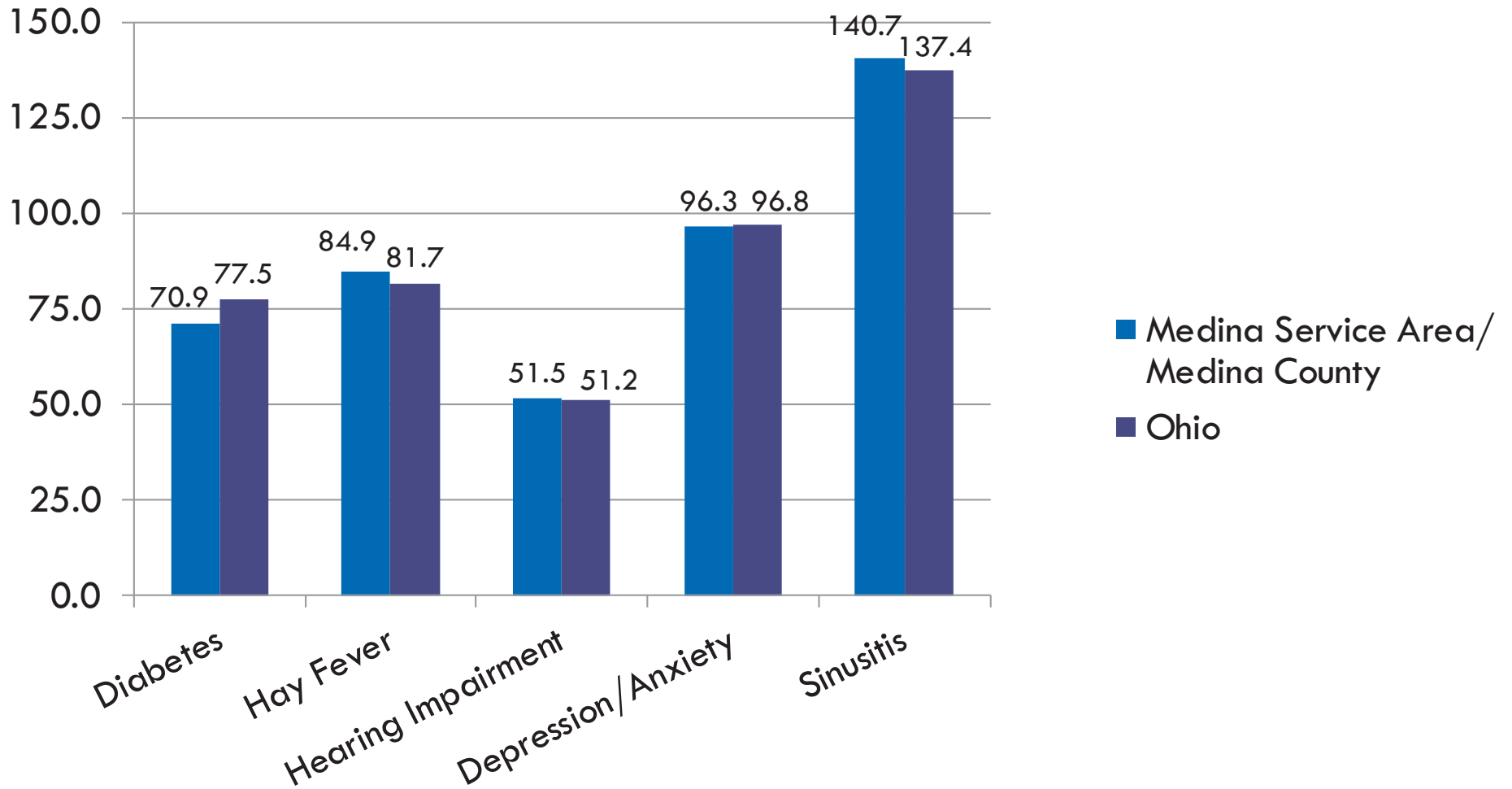
Lung-Related Prevalence Rates



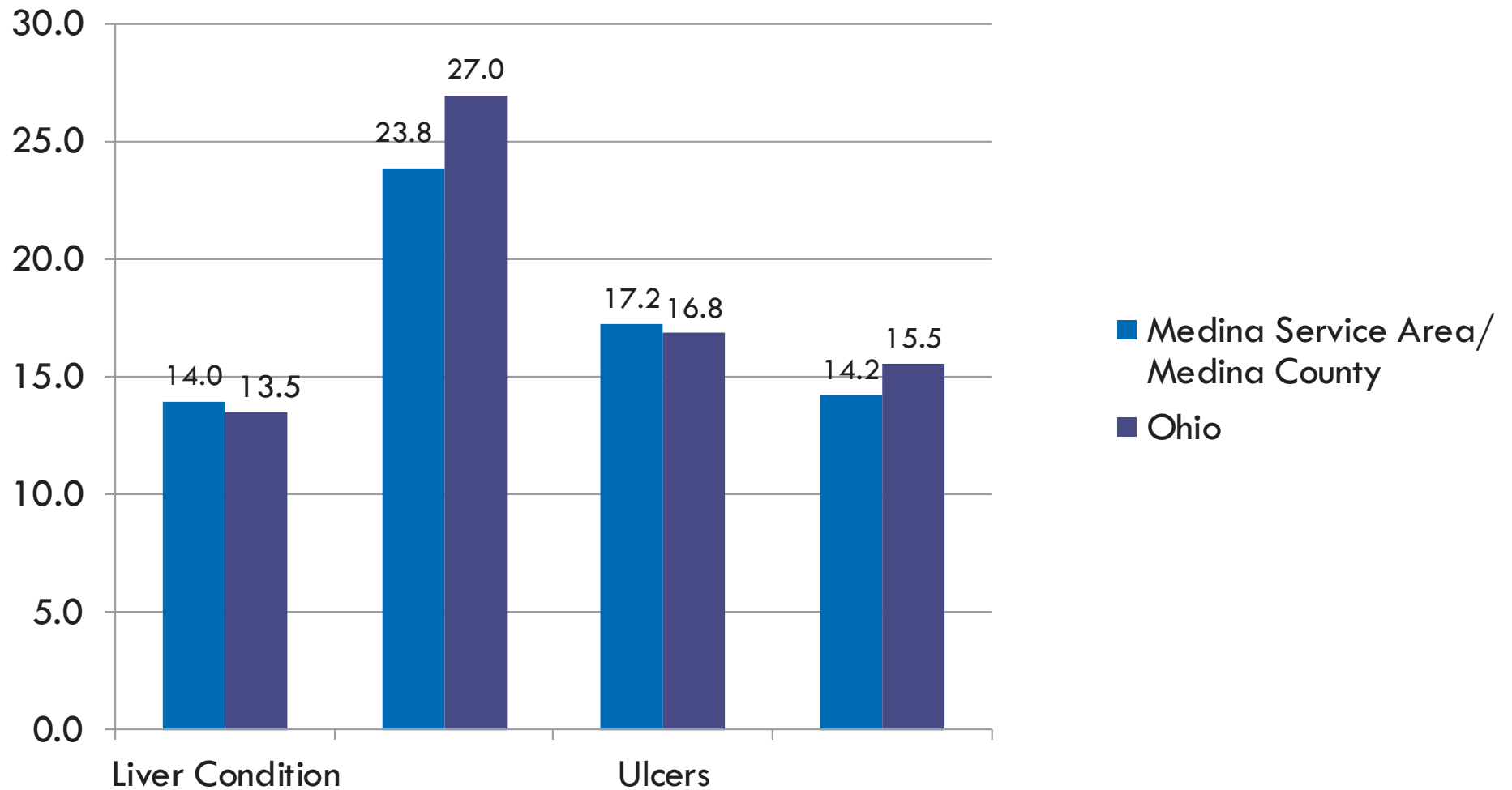
Asthma – Lung-Related Prevalence Rates



Disease Prevalence Rates



Disease Prevalence Rates



Overview



Prevention Quality Indicators Index (PQI)

- The Medina Hospital community is substantially lower than Ohio within the following PQIs:

Prevention Quality Indicators (PQI)	Medina Service Area	Ohio	Difference
Chronic Obstructive Pulmonary Disease Admission Rate (PQI 5)	2.00	3.09	-1.09
Adult Asthma Admission Rate (PQI 15)	0.99	1.99	-1.00
Congestive Heart Failure Admission Rate (PQI 8)	3.89	4.66	-0.77

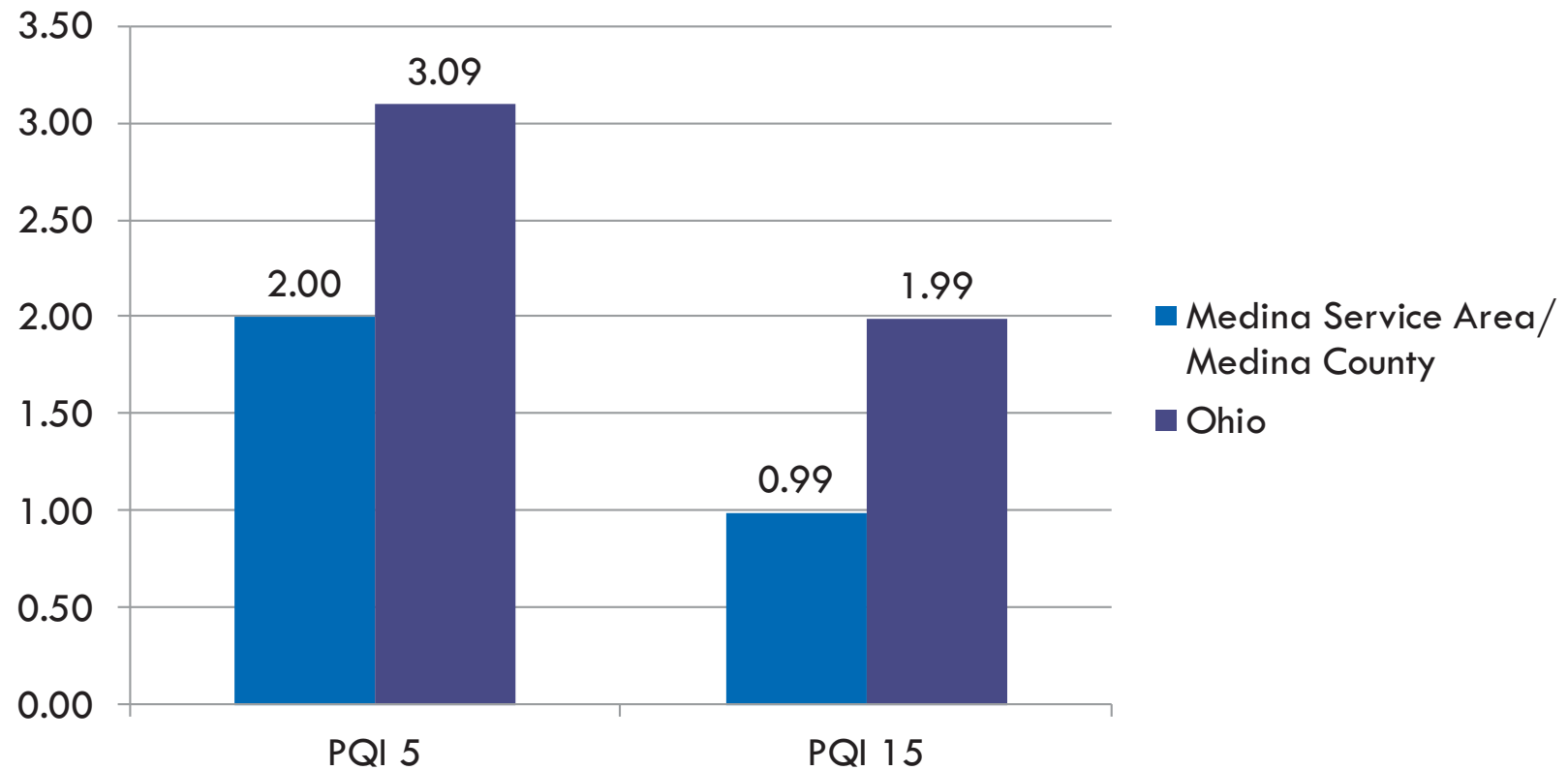
- PQI scores in the Medina Hospital community are below Ohio for all factors with the exception of Low-Birth Weight (Medina =1.30, Ohio=1.21).

Prevention Quality Indicators Index (PQI)

PQI Subgroups

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

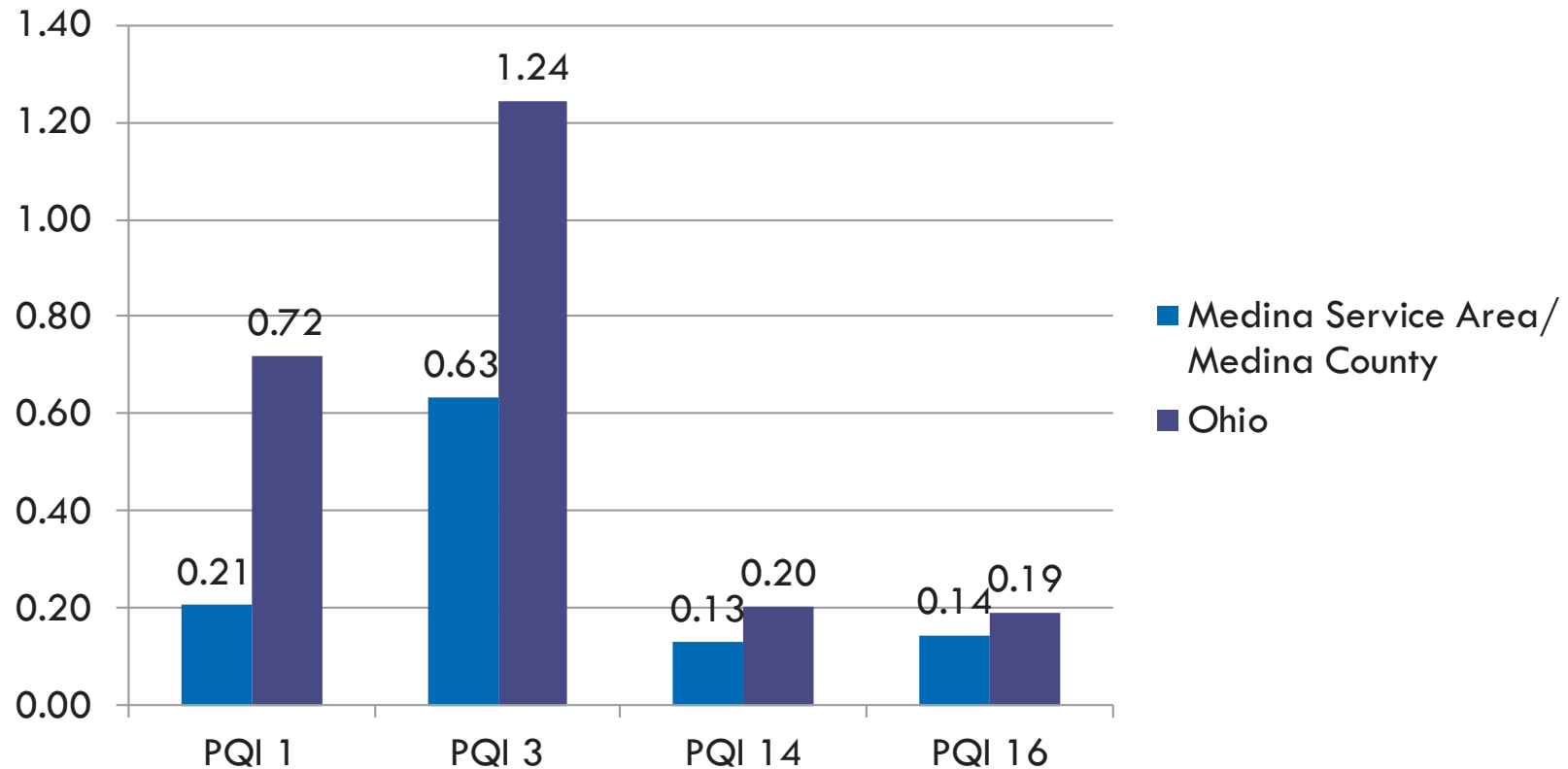
Chronic Lung Conditions



PQI 5 Chronic Obstructive Pulmonary Disease Admission Rate

PQI 15 Adult Asthma Admission Rate

Diabetes



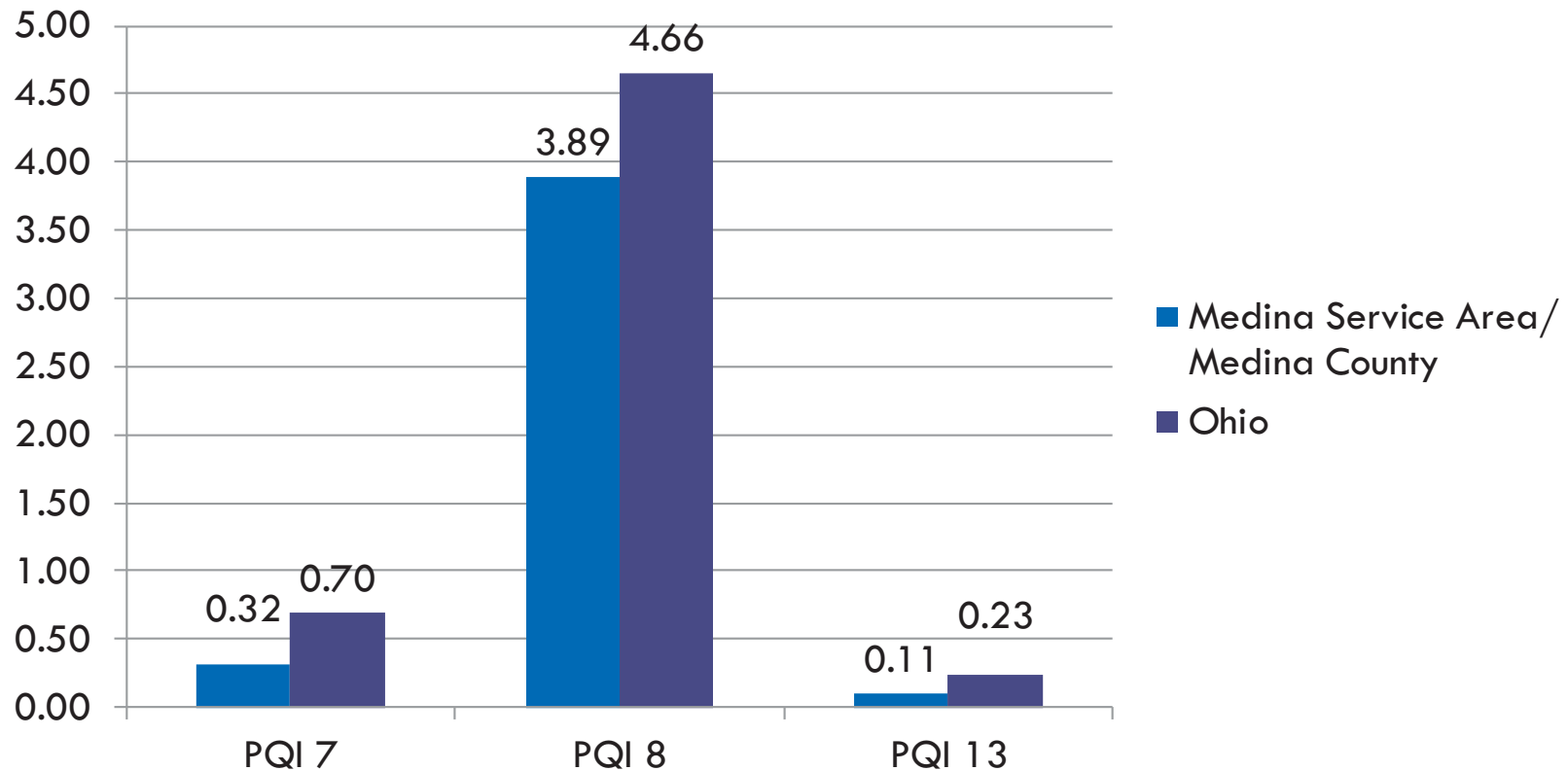
PQI 1 Diabetes Short-Term Complications Admission Rate

PQI 3 Diabetes Long-Term Complications Admission Rate

PQI 14 Uncontrolled Diabetes Admission Rate

PQI 16 Lower Extremity Amputation Rate Among Diabetic Patients

Heart Conditions

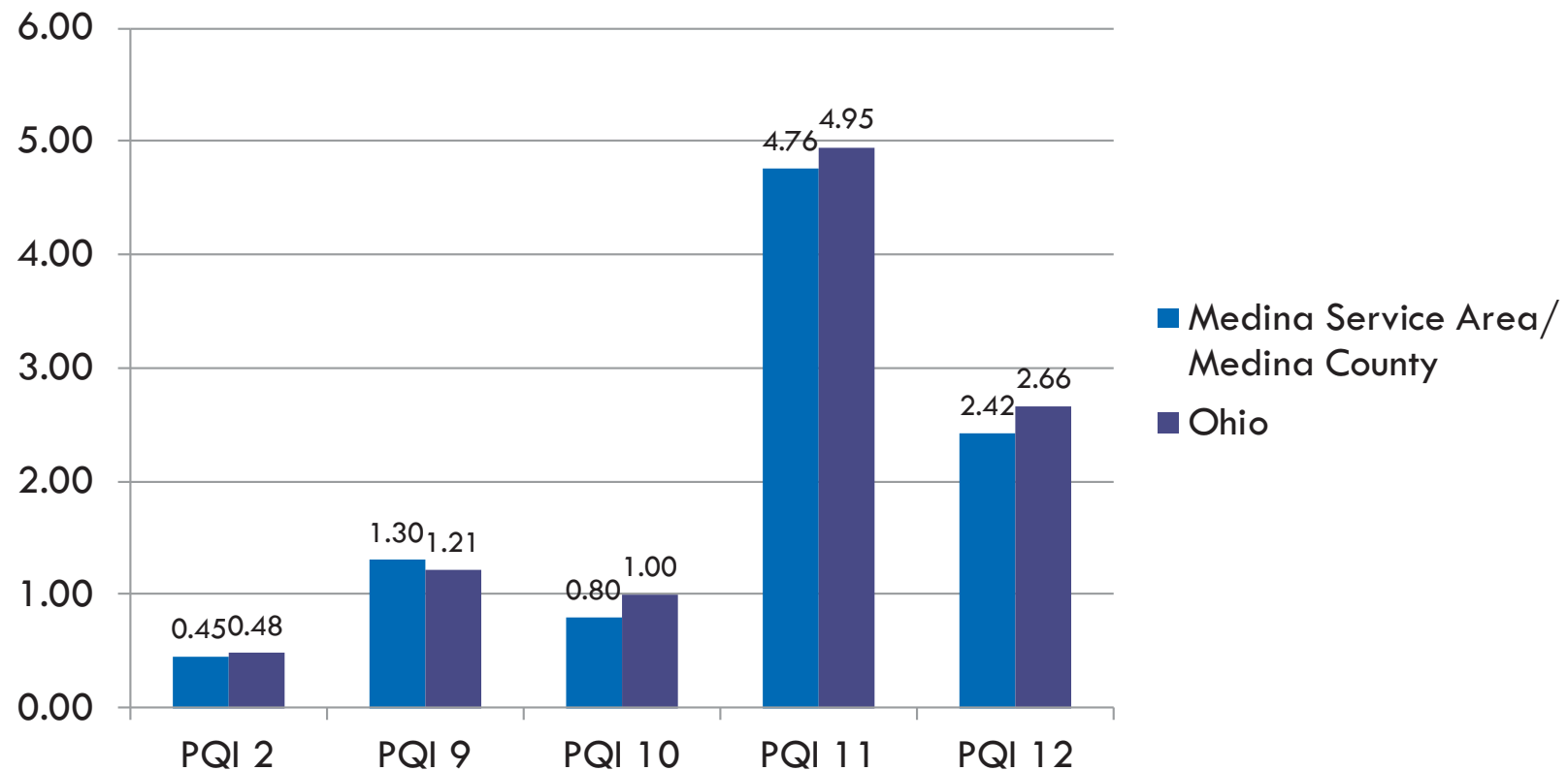


PQI 7 Hypertension Admission Rate

PQI 8 Congestive Heart Failure Admission Rate

PQI 13 Angina Without Procedure Admission Rate

Other Conditions



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

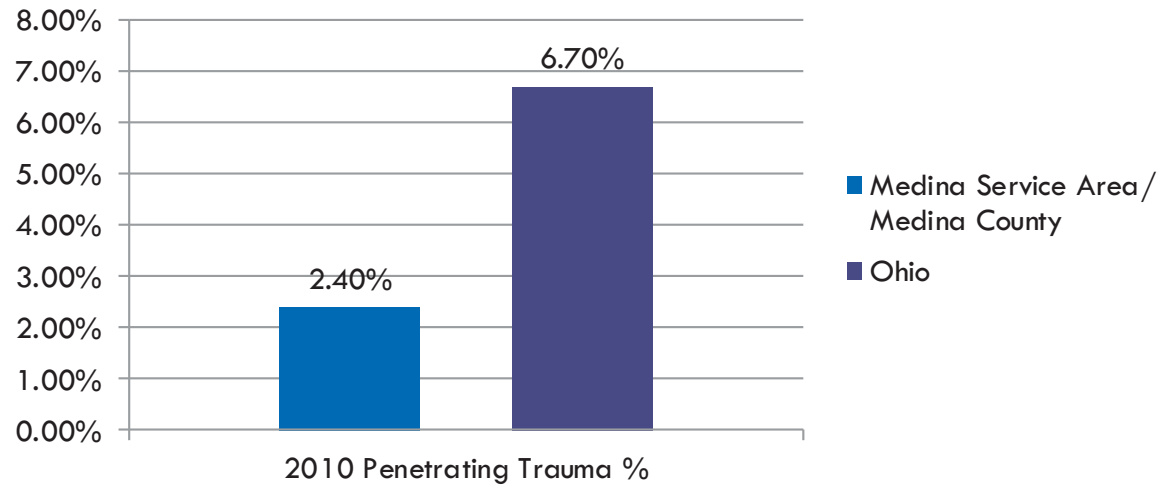
Overview



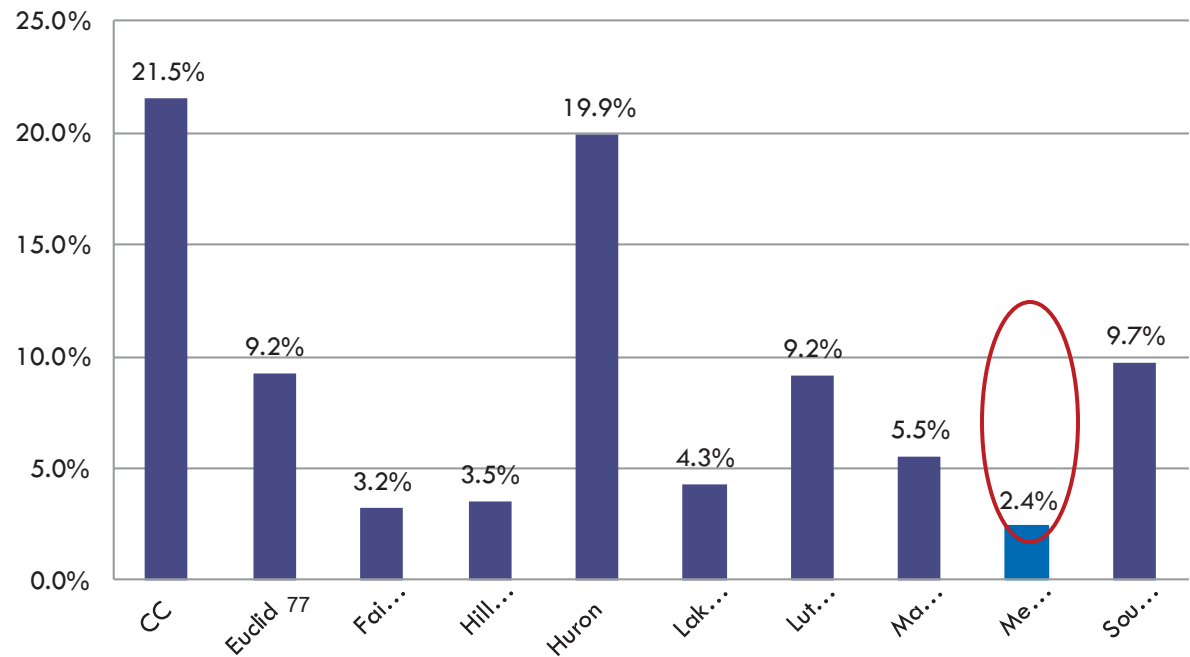
Penetrating Trauma Data

- ❑ Tripp Umbach collected statistical data from the Ohio Department of Public Safety, Division of Emergency Medical Services, Ohio Trauma Registry, also known as OTR. The data refers to all trauma cases resulting in severe injury occurring in Ohio during 2010. OTR trauma data provides the ability to quantify the overall frequency of trauma cases by occurrence type.
- ❑ There are five types of trauma quantified by OTR: asphyxia, blunt, burns, penetrating and “other”. The consultants identified the percentage of penetrating traumas compared to the overall number of trauma cases in a zip code defined hospital community. The resulting percentage provides a secondary data source quantifying the number of violent traumas related to a foreign object or shattered bone.
- ❑ Penetrating trauma can be caused by a foreign object or by fragments of a broken bone. Usually, penetrating trauma occurs in violent crime or armed combat; penetrating injuries are commonly caused by gunshots and stabbings.
- ❑ **The Medina Hospital community had the lowest percentage of penetrating trauma** incidents among all of the Cleveland Clinic Hospital communities at only 2.4%.

2010 Trauma: % Penetrating



2010 Trauma by Community: % Penetrating



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

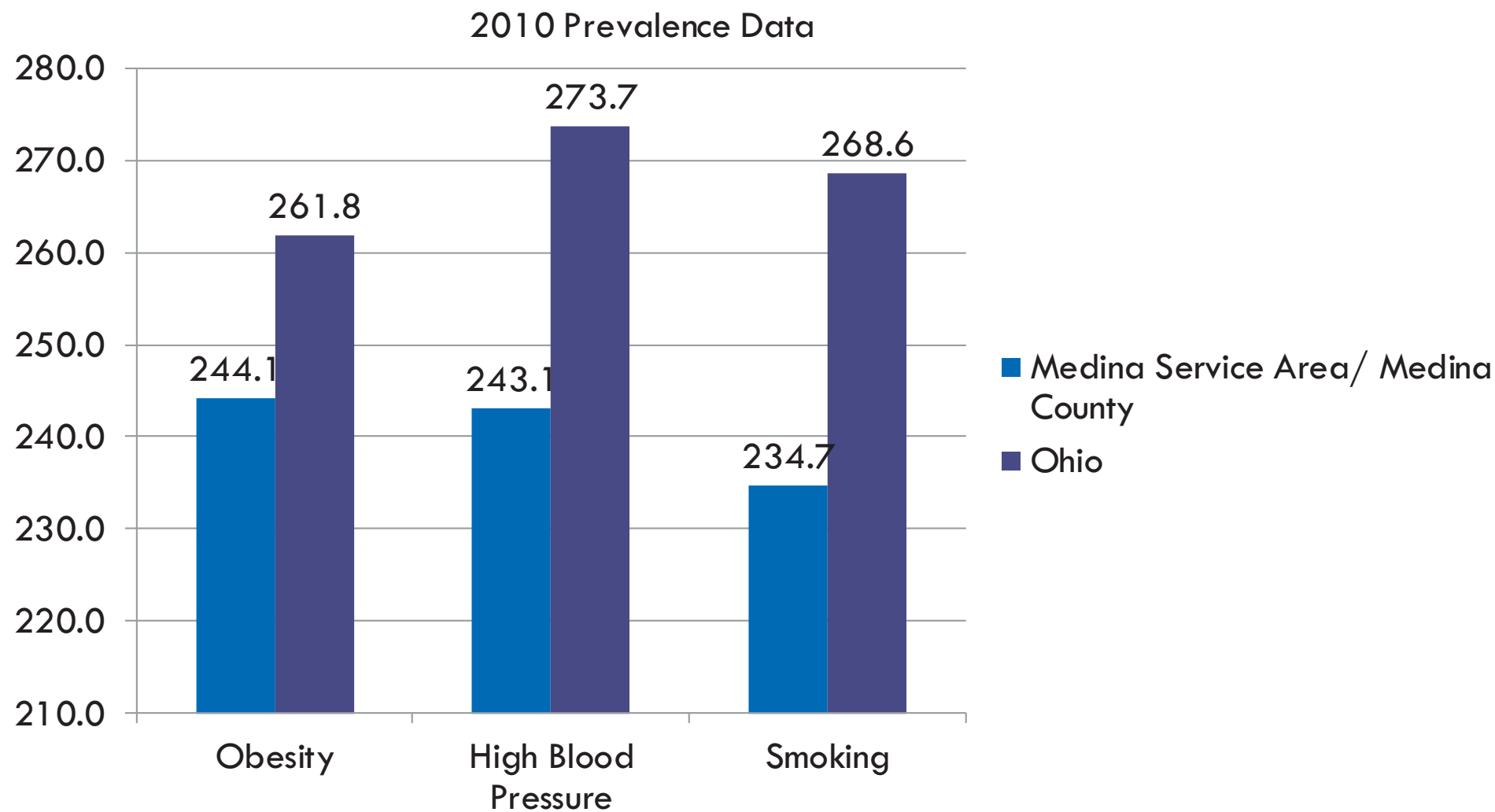
Source: Ohio Trauma Registry

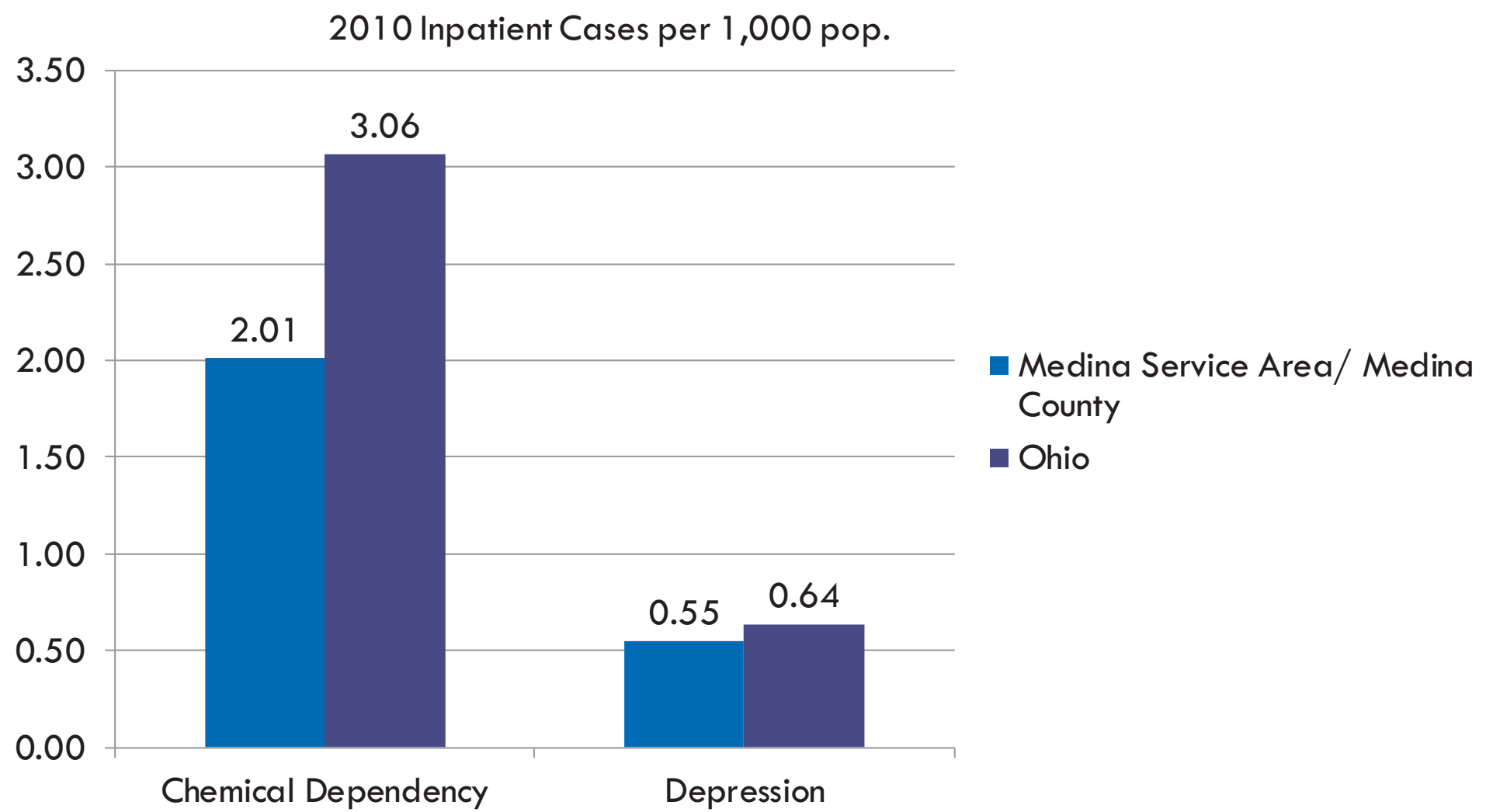
Overview



Health Behaviors 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 healthcare access primarily related to chronic disease and injury. Data for this analysis was provided by Thomson Reuters.
- ❑ Data related to chemical dependency and depression were obtained from the Ohio Hospital Association (OHA), based on 2010 substance abuse and depression related Diagnosis Related Groups (DRGs) prevalence within the zip code defined area of each hospital community.
- ❑ The Medina Hospital community shows lower rates for all negative health behaviors (obesity, high blood pressure, smoking) when compared with Ohio.
- ❑ **Fewer citizens partaking in negative health behaviors** perhaps contributes to the lower disease prevalence rates and the lower PQI hospital admission rates for the Medina Hospital community when compared with Ohio.





APPENDIX C:

Medina Hospital Interview Summary -- Key Stakeholder Group

COMMUNITY STAKEHOLDER INTERVIEW SUMMARY

Community:

Medina Hospital service area

Data Collection:

The following qualitative data were gathered during individual interviews with sixteen stakeholders of the Medina area as identified by an advisory committee of Medina Hospital executive leadership. Medina Hospital is a 116-bed community 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 and reviewed by the Medina 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.*

Of the sixteen respondents, the places mentioned by stakeholders when asked what community they were speaking on behalf of are: Medina, Medina County, Wadsworth, Brunswick, Granger, Hinckley, and Sharon, Ohio (in order of most mentioned). (See Appendix 2 for raw data)

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

Of the sixteen respondents, thirteen currently live in the community and three work in the community but do not reside there. Of the thirteen residents, the shortest length of residency is six years and the longest is thirty-three years. The median length of residency is 15 years and the mean length of residency is 15.77 years. Of the three respondents who are employed but do not reside in the community, the shortest length of employment is four years and the longest is seven years. The median length of employment is 7 years and the mean length of employment is 6 years. (See Appendix 3 for raw data)

QUESTION #3: *Your position in the community?*

Of the sixteen respondents, there was a diverse representation of positions held in the community. Those positions represented included: non-profit leader, county administrator, business professional, community leader, educational leader, city administrator, county employee, physician, and business leader.

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

The four themes identified upon review of the stakeholders' collective definitions of a "healthy community" are: resident wellness including access to health care, a community's ability to support and meet the needs of residents, a healthy economy, and education. (See Appendix 4 for raw data)

Resident wellness including access to health care was identified by eleven stakeholders as significant to the definition of a healthy community. Specifically, stakeholders mentioned the following elements relating to residents' wellness and access to healthcare that a healthy community should have:

- The ability to meet the basic health needs of residents
- Awareness about the latest health practices
- Accessible healthcare facilities
- Medical support services
- Proactive health and wellness services and a good hospital
- Wellness opportunities for the residents
- Healthy food choices
- Individuals that have access to healthcare, with adequate health insurance and health knowledge
- Low disease rates
- Residents that are healthy
- Residents that are fit, active and maintain a healthy diet
- Awareness about being a heart-healthy community

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

- A holistic approach
- An approach that supports healthy choices
- The ability to offer quality of life amenities to the residents (i.e. parks and recreation)
- A safe and secure living environment for everyone
- An adequate safety net for citizens
- Services and facilities that meet the basic needs of residents in a reasonable fashion
- Good support services (i.e. government, recreation, etc.) that collaborate to provide services to the residents
- Long-term services for the residents
- Transportation
- Access to recreational facilities

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

- A stable healthy economy
- Employment opportunities
- A low unemployment rate
- Positive growth and viability in the housing market and commerce
- Businesses doing well

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

- An excellent school system

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

Out of sixteen responses, nine stakeholders felt their community was healthy, four felt their community could be healthier and two felt their community was not healthy. One stakeholder stated the community is “average.” (See Appendix 5 for raw data)

Some of the reasons stakeholders stated they believe the Medina area is a healthy community are:

- Healthcare is increasing in sophistication
- The community is not violent
- The community is getting better
- The community has a good framework in place

Although the majority of interviewees agreed that the Medina area is a healthy community, four stakeholders felt the community could be healthier. Those stakeholders expressed concerns directly related to the physical health of their community. Those concerns were:

- There is still a lot of work to do
- There is a percentage of people who do not have health insurance

The two stakeholders that felt the Medina area is not healthy did not provide any further explanation.

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

Upon review of the sixteen stakeholders’ responses the following methods were identified as being effective in achieving a healthy community. (See Appendix 6 for raw data)

- Provide universal healthcare
- Ensure collaborative efforts, citizen involvement, and public sector engagement
- Provide solid infrastructure, educational programs, and health programs
- Continue to increase healthcare sophistication and services
- Continue strong and vibrant economic development to keep the economy viable

- Offer outreach programs for students and families
- Coordinate healthy school practices, such as healthier lunches and snacks as well as physical activity programs for students
- Identify needs and solutions for needs
- Provide education and employment opportunities
- Increase collaboration among agencies including the healthcare and financial providers
- Provide physical fitness facilities, preventive care and healthy eating resources for the residents
- Increase prevention programs and focus on issues from birth to old age
- Ensure social support systems to help residents as the community grows
- Offer food pantries that provide education on maintaining a healthy weight and lifestyle
- Develop a walkable community with trails that connect to parks
- Provide activities and programs for kids
- Develop collaboration from community to community to improve as a whole
- Pay attention to core values and make sure needs are addressed
- Increase education and awareness about healthcare and wellness
- Make resident health a conscious topic of discussion
- Send out information on prevention and wellness
- Ensure good leadership and responsible hospital organizations and departments
- Ensure that business, non-profit, state entities, and school systems are working together

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

The sixteen stakeholders interviewed identified the following factors in their vision of what the Medina area should look like in five to ten years (See Appendix 7 for raw data):

- The community will be a larger community with more non-profit agencies and medical facilities
- The community will continue on the same track with a low unemployment rate and opportunities for businesses, schools, and healthcare services to grow (specifically the light industry, the service industry and tourism)
- The community will provide strong workforce training
- The population will grow
- The community will be healthier with improved awareness, prevention, and a wellness initiative
- The community will be healthy and wealthy
- The community resources will be easily accessible for the residents
- The community agencies will be interrelated with resources being funneled through a central location
- The health system, school system, and community will be actively engaged in the community creating more overall community engagement
- The community will continue to grow in primary care for underserved, indigent, and/or under/uninsured populations
- The community will provide healthy eating options for residents (i.e., farmers market) and a strong education system
- The community will have walking trails, sidewalks, and green space
- The community will plan for future positive growth and have a strong infrastructure
- The community will maintain an emphasis on the positive (i.e., the park system and education base)
- The community will continue to establish itself as a wonderful small town with access to big city

facilities

- The community will be a place that provides students with after-school activities
- The community residents will lead a healthy and safe lifestyle
- The community will maintain the buildings and infrastructure
- The community will have better services in all areas
- The city and/or county will have more financial resources available to maintain and repair the community
- The community will continue to strive to meet the needs of residents

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 sixteen stakeholders interviewed identified the following strengths/resources and their benefits (See Appendix 8 for raw data):

- There are a lot of medical resources in the community:
 - People have access to excellent medical facilities
 - People have access to local hospitals
 - There are high quality health programs
 - The community has some of the best doctors in the country
 - The community has Medina Hospital
 - There is a high percentage of people who have healthcare coverage
- Leadership and residents foster a positive environment:
 - The community has a strong sense of family and family values
 - There is a positive work ethic
 - People have a small town attitude
 - Leadership is engaged and caring
- There is collaboration taking place at all levels in the community:
 - There is good collaborative leadership in all segments of the community
 - There are strong county level collaborations
 - Different agencies work together and are willing to partner to do what is right for the community
 - Networking takes place within the community
 - The community has a great relationship with Medina Hospital and Cleveland Clinic
- There are existing resources:
 - The community has an existing foundation of resources to build upon
 - There are a variety of industries and businesses in the community
 - There is a good diversity of business and residents are not dependent on one industry
 - Most people are of middle income
 - There is not a lot of poverty in the community
 - There is a positive cashflow

- The community provides many services to residents:
 - Regional airport
 - Wonderful parks
 - Great community recreation center
- The community maintains a good educational system:
 - The school system continues to be strong and solid
 - The educational system that is in place continues to attract people to the area
 - The majority of students are involved in at least one extracurricular activity

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 sixteen stakeholders interviewed identified the following problems and/or barriers as holding the residents of the Medina area back from achieving their previously defined visions (See Appendix 9 for raw data):

- The health and wellness of residents:
 - There is limited education on how important it is to maintain health
 - There is limited awareness about prevention
 - The community is reactive instead of proactive
 - There are limited geriatric services and healthcare for the aging population
 - There are limited mental health services
 - Obesity, heart disease, and diabetes are a big concern
- The community is facing economic challenges:
 - Budgets have been cut and the community doesn't have the resources needed to support the quality of growth
 - School funding cuts limit opportunities for young kids to excel
 - The workforce training programs need to be strengthened so that businesses can hire people
 - There is a limited light industry workforce
 - The dynamics of the community have changed due to unemployment
 - People do not have health insurance to seek medical care due to the under/unemployment rate
 - Underemployed residents may not have adequate food
 - The housing market is vulnerable
 - There is a lack of jobs
- Transportation is limited and not user friendly:
 - There is a problem with transportation and congestion
 - Transportation for older adults may not be adequate

- While some stakeholders felt collaboration was a strength, others felt it was an issue in their community:
 - There is an inability to work collectively across the county
 - The county is not being viewed as a region
 - The community is not equipped with the resources of a larger county
 - Residents' personal interests versus what is best for the general community can create issues
 - There is a lack of communication between residents
 - The community is so collaborative if one piece disappears the entire system would be hurt

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

Out of sixteen responses, nine stakeholders responded that they believe there are adequate resources available in the Medina area to address the aforementioned issues/problems. Three stakeholders did not believe adequate resources were available and four believed there were some resources but not enough to meet all identified needs. (See Appendix 10 for raw data)

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: rethinking how resources are deployed; increasing partnerships; streamlining services; taking advantage of opportunities; increasing community planning and resources; increasing the return on investments; increasing community outreach; improving the utilization of resources; continuing to reduce traffic congestion; increasing awareness about available resources; and increasing affordable medical care services for under/uninsured people.

The three stakeholders that believed there were not adequate community resources to resolve the previously identified problems/issues cited: The community is changing from rural and self-reliant to more urban; inadequate communication; a lack of funding; and the need to increase volunteerism and develop an effective strategy for a growing community as the basis for their beliefs.

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

Fourteen out of the sixteen stakeholders interviewed chose to mention additional concerns and/or expound upon previously expressed concerns. (See Appendix 11 for more raw data)

- As the community becomes larger, they will be faced with more problems in all areas.
- The community needs to provide food for the hungry.
- The community needs to take a closer look at the lower class and people that are neglected.
- Retirement and healthcare are necessary for an aging Baby Boomer population. The community will need to be prepared for a bubble of healthcare needs.
- The mental health aspect within communities is very difficult to track and the community could try to create a more efficient to track such aspects.
- School funding needs to be increased.


- The community needs to be more proactive in planning for the increase in diversity and consequential language barriers instead of being reactive.
- The community needs more sidewalks so residents can walk.
- Smoking is a big issue in the community.
- The community has to be cognizant of education needs in the community and keep education as a top priority.
- The senior population needs more programs and resources.
- A Stakeholder expressed they would like to see all options of services available in the community and the costs from different insurance companies used to secure the best care for the residents.
- There needs to be more funds and assistance from churches and the community to support the homeless and/or jobless residents.
- The needs of the community are changing so the community needs to have a plan in place to address all the issues.

QUESTION #11: *Any additional comments or questions?*

Five out of the sixteen stakeholders interviewed chose to provide additional comments. Below are the additional comments made by those stakeholders:

- Find ways to drive costs down and quality up.
- Medina is a great place to live and great location. The community needs to have more of a vision and they all need to come together and agree on one vision.
- Provide adequate coverage to the underemployed.
- Need more educational classes for the residents in the community.
- Medina is a really nice place to live; the residents are happy and appreciative of what they have.

APPENDIX 1:

TRIPP UMBACH	
KEY COMMUNITY INFORMANT QUESTIONNAIRE	

Name: _____

Title: _____

Date: _____

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.

2. How long have you lived in this community?

____ Less than 5 years

____ 5 – 15 years

____ 15 or more years

3. Your position in the community:

____ Educator

____ Business Owner

____ Business Professional

____ Political Leader

____ Minister/Pastor/Reverend/Priest

____ Organization member

____ Community Leader

____ Non-Profit

____ Other

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

9. 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 2:

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.*

- | | |
|---|--------------------------|
| 1. Medina County, OH | 9. Medina County, OH |
| 2. Medina County, OH | 10. Wadsworth County, OH |
| 3. Medina City | 11. Medina County |
| 4. Highland Local (Granger, Hinckley, and Sharon) | 12. Medina, OH |
| 5. Medina | 13. Brunswick, OH |
| 6. Medina City | 14. Medina City, OH |
| 7. Medina, OH | 15. Medina, OH |
| 8. Medina County, OH | 16. Medina, OH. |

APPENDIX 3:

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

1. Lived in the community for over 15 years
2. Lived in the community for 8 years
3. Lived in the community for over 15 years
4. Does not live in the community but has worked there for 4 years
5. Lived in this community for 30 years
6. Does not live in the community but has worked there for 7 years
7. Lived in the community for 8 years
8. Lived in the community for over 15 years
9. Does not live in the community but has worked there for 7 years
10. Lived in the community for 33 years
11. Lived in the community for over 15 years
12. Lived in the community for over 15 years
13. Lived in the community for 6 years
14. Lived in the community for over 15 years
15. Lived in the community for over 15 years
16. Lived in the community for over 15 years

APPENDIX 4:

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

1. A healthy community is a place where people have access to healthcare.
2. A healthy community is a place that has a holistic approach and provides quality of life amenities (i.e., parks, recreation, and education) to the residents. It is a place that has a stable healthy economy.
3. A healthy community is a place that is vibrant, engaged and healthy.
4. A healthy community is a place that is in tune with the latest health practices. It provides basic health needs in all areas to the residents of the community.
5. A healthy community is a place that has support services (i.e., school, government, health, recreation, etc.) that all work together to provide services to the residents of the community. It is a place that

provides wellness services, adequate safety net for citizens, employment, excellent school systems and collaboration among all.

6. A healthy community is a place with low unemployment, healthcare services for the residents and a strong school system.
7. A healthy community is a place that has low community disease rates and the residents are fit, active and maintain a healthy diet.
8. A healthy community is a place where everyone has a safe and secure living environment. It is a place that provides transportation, education, accessible healthcare facilities and long-term services for the residents.
9. A healthy community is a place that supports healthy choices (i.e., physical and social). It is a place that provides the residents with healthy food choices, education, and recreational facilities.
10. A healthy community is a place where individuals have adequate health insurance, health knowledge and access to parks/recreation.
11. A healthy community is a place that has positive growth and viability in the housing market and commerce. It is a place that has proactive health and wellness services/hospital.
12. A healthy community is a place that provides services and facilities that serve the basic needs (i.e., food, healthcare, recreational facilities) of the residents in a reasonable fashion.
13. A healthy community is a place where businesses are doing well and provide recreation/wellness opportunities for the residents.
14. A healthy community is a heart healthy community. It is a place that provides residents with adequate healthcare/coverage.
15. A healthy community is a place that has good services, schools and hospitals for the residents.
16. A healthy community is a place where challenges are acknowledged and solutions are found.

APPENDIX 5:

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

1. Yes.
2. Yes.
3. Yes. Healthcare is increasing in sophistication and it is not a violent community.
4. Yes.
5. Yes, it is getting better.
6. No.
7. Yes, for the most part.
8. No, it is not.
9. Yes, but there are always places to improve on.
10. Yes and no. They have 3 hospitals and healthcare systems but there are a percentage of people who don't have insurance.
11. Yes.
12. Yes.
13. Pretty average.
14. Yes, they are healthy but still have a lot of work to do; there is a good framework in place.
15. Yes.
16. Working on it.

APPENDIX 6:

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

1. Universal healthcare.
2. It takes collaborative efforts, citizen involvement, public sector engagement, solid infrastructure, educational programs and health programs.
3. By continuing/increasing healthcare sophistication and services, continuing strong/vibrant economic development and keeping economy viable.
4. Outreach programs for students and families. Coordinate with healthy school practices: healthier lunches/snacks for students and provide physical activity programs for students.
5. A good wellness initiative in place. The community will be healthy and wealthy.
6. Have a lot of people working together; they need more agencies working together. The healthcare and financial components are not working together.
7. Provide physical fitness facilities, preventive care and healthy eating resources for the residents.
8. Increase prevention programs and focus on womb to tomb issues.
9. The community is growing fast and needs to look at the social support systems to help residents.
10. Food pantries, education on maintaining a healthy weight/lifestyle, make it a walkable community with trails that connect to parks and provide activities/programs for kids.
11. Thorough collaboration from city to city. Better as a whole.
12. Pay attention to core values and make sure needs are addressed.
13. More education/awareness on healthcare starting in the school systems. Need education on healthcare and wellness.
14. Making health a conscious topic of discussion. Sending out information on prevention/wellness.
15. Good leadership, good responsible hospital organizations and departments.
16. All spokes of the community wheel are working together (i.e., business, non-profit, state entities, and school system).

APPENDIX 7:

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

1. It will be a larger community with more non-profit agencies and medical facilities.
2. Continue on the same track: low unemployment rate, more opportunities for business growth. Expand employment and business to attract people back to the community. They need to provide strong workforce training and the growth of schools and the healthcare community.
3. Provides more light industry, growing healthcare, growing population, increased service industry and tourism.
4. A healthier community with improved awareness and prevention.
5. Working together and identifying needs and solutions for needs. Find a way to provide education and jobs.
6. Easily accessible resources for the residents, agencies need to be interrelated (e.g., resources need to be funneled through one place). The health system, school system and community all need to be involved.
7. Continue to grow primary care services for underserved and people without health insurance.
8. The community will provide healthy eating options for residents, healthcare services for the indigent and a strong education system.
9. How does infrastructure support grow? The community will have walking trails/sidewalks and green space. Need to plan for future growth and look ahead.
10. Keep an emphasis on the positive (park system and education base) and see that it continues. The

community will have good job opportunities and provide residents with more healthy food options (i.e., farmers market).

11. The community will have positive growth, a strong school system, health system, wellness programs and strong infrastructure.
12. The community will continue to establish itself as a wonderful small town with access to big city facilities.
13. A community that is healthy with bike /walking trails for the residents. A place that provides students with afterschool activities.
14. Everybody will lead a healthy lifestyle and safe life. Try to rid disease through education and show people that they can control their life. More community engagement.
15. Maintain the buildings and infrastructure of the community. The community will have better services in all areas and the city/county will have more financial resources available to maintain community repairs.
16. The community will continue to strive and meet the needs of the residents, more resources will be available for the members of the community to be involved and find solutions.

APPENDIX 8:

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?*

1. Most people are of middle income. There is not a lot of poverty in the community.
2. People have access to excellent medical facilities.
3. Continue to have a strong, solid educational system in place to continue to attract people to the area.
4. Diversity of business. There are a variety of types of industries/businesses in the community.
5. Location - on the edge of an urban and rural area.
6. Regional airport.
7. School System. The majority of students are involved in at least one extracurricular activity.
8. Access to local hospitals. High quality health system and programs.
9. Good collaborative leadership in all segments across the community.
10. Good diversity of businesses - not dependent on one industry.
11. Agencies are willing to partner (i.e., Family First Council).
12. Already have existing resources to build from.
13. Fabulous recreation center and park system.
14. There are a lot of medical resources in the community.
15. Collaboration.
16. Networking within the community.
17. Strong collaborations in the county - different agencies work together to do what is right for the community.
18. Small town attitude.
19. Excellent medical system and best doctors in the country.
20. High percentage of people who have healthcare coverage.
21. Caring leadership.
22. Positive cash flow.
23. Family values - the community has a strong sense of family.
24. Positive work ethic.

25. Wonderful parks. Need better marketing/branding so people use the parks.
26. School system. Need wellness programs in the school system.
27. Great relationship with Medina Hospital and Cleveland Clinic.
28. Great community recreation center and engaged leadership.
29. Good school systems.
30. Medina Hospital.
31. Collaboration.
32. Residents.

APPENDIX 9:

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.*

1. Transportation for older adults.
2. Lack of education on how important it is to maintain health.
3. School funding issues. Budgets have been cut and don't have the resources as needed to support the quality of growth.
4. Need to strengthen workforce-training programs so businesses can hire people.
5. Accessible workforce for light industry.
6. Healthcare for aging population.
7. Lack of awareness on prevention. The community needs to be proactive instead of reactive.
8. Transportation issues.
9. Inability to work collectively across the county and see the county as a region.
10. Unemployment -- the dynamics of the community have changed.
11. Not equipped. Do not have the resources of a larger county. They still have the same needs even if they are not as big.
12. Unemployment rate, which means people do not have health insurance to seek care.
13. Lack of services for mental health population. Lack of geriatric services.
14. Transportation - limited and not user friendly.
15. Lack of transportation.
16. Multiple health systems coming into the county - how do the non-profits work together? Is it feasible?
17. Obesity is a big concern.
18. Underemployed - no health insurance or adequate food for the underemployed.
19. Special interests override.
20. Vulnerability of housing market.
21. Transportation and congestion.
22. Lack of communication between residents and city council.
23. Heart Disease.
24. Diabetes.
25. Lack of jobs.
26. Lack of school funding. Not a lot of opportunities for young kids to excel.
27. Economic challenges.
28. The community is so collaborative if one piece disappears the system would be hurt.

APPENDIX 10:

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

1. There are but people do not take advantage of the opportunities.
2. There are but need to rethink how resources are deployed. Need more partnerships and streamlining.
3. Need more community planning and resources. The community has sufficient, top-notch healthcare providers in the area. Need the best return-on-investment.
4. Yes, every initiative uses schools to assimilate information. There needs to be an at-large community outreach and can't always depend on the school system.
5. Yes, there are resources, not sure if they are adequate. They need to be improved.
6. No, there are some resources but not enough to deal with the severity of the issues.
7. There are resources but need better awareness because people don't know about them. There needs to be more free services for people without health insurance.
8. No, resources are there but there is a lack of funding/money.
9. In general there are; need to be open and reallocate services. Redirect and better utilize money.
10. Facing cutbacks and monetary resources are the biggest barriers.
11. Have the adequate resources, need a better approach.
12. Yes, have made strides to reduce traffic and congestion but still have a ways to go.
13. No, not enough adequate communication.
14. No, changing from community that was rural and self-reliant and now it has become more urban. There needs to be more volunteerism and an effective strategy for a growing community.
15. Resources are here but need to restructure. The city leaders are doing a good job at handling finances.
16. No, programs have dropped and there is a lack of funding.

APPENDIX 11:

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

1. As the community becomes larger they will be faced with more problems in all areas.
2. Need to provide food for the hungry. Need to take a closer look at lower class and the people that are neglected.
3. Baby boomer retiring and healthcare is necessary. Be prepared for a bubble of healthcare needs.
4. The mental health aspect of the community is very difficult to track; they need to do a better job at this.
5. There needs to be more school funding.
6. There are resources but need better awareness because people don't know about them. Needs to be more free services for people without health insurance.
7. No, resources are there but there is a lack of funding/money.
8. There has been an increase in diversity and some language barriers; need to plan for it instead of react to it.
9. Need more sidewalks so residents can walk. Smoking is also a big issue in the community.
10. Have to be cognizant of education needs in the community. Need to keep education top priority.
11. Senior population needs more programs/resources.

12. There are different insurance companies that provide different services to their customers. Would like to see all options/costs to get the best care for the residents.
13. Need more funds to support the homeless/jobless. Need more assistance from churches/community.
14. The needs of the community are changing and need to have a plan in place to address all the issues.

APPENDIX D:

Medina Hospital Focus Group Summary -- Adult Parents 25-40 Years Old Group

ADULT PARENTS 25-40 YEARS OLD FOCUS GROUP INPUT

Community:

Medina Hospital service area

INTRODUCTION:

The following qualitative data were gathered during a discussion group conducted with a target population of parents 25-40 years old in the Medina area. The target population was defined by an advisory committee of Medina Hospital executive leadership. Medina Hospital is a 116-bed community 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 St. Ambrose Church in Medina, OH. Each participant was provided an incentive of twenty-five dollars for participating. The discussion group was conducted using a discussion guide previously created by Tripp Umbach and reviewed by Medina Hospital executive leadership. The purpose of this discussion group was to identify community health needs and concerns affecting parents 25-40 years old (further referred to as adult parents) and their children, whom they were speaking on behalf of, in the Medina Hospital service area, as well as ways to address those concerns for both populations.

GROUP RECOMMENDATIONS:

The group provided many recommendations to address community health needs and concerns for adult parents in the Medina Hospital service area. Below is a brief summary of the recommendations:

- ***Provide a local Children's Hospital:*** Participants felt that residents would prefer to seek pediatric medical care in their community rather than outside of their community. Participants were under the impression that providing a local Children's Hospital would improve access to pediatric medical care for residents.
- ***Increase incentives for small businesses:*** Participants believed that the community could offer tax incentives to small businesses to help them compete with larger national chains. Increasing incentives for small businesses could reduce the number of vacant storefronts in the community.
- ***Increase adolescent programs:*** Participants felt that the community could offer additional programs for adolescents that are well organized and properly supervised. Participants were under the impression that increasing supervised activities for adolescent residents would prevent criminal and drug activity in the community.
- ***Increase collaboration between recreation centers:*** Participants felt that local communities (i.e., Strongsville, Parma, Brunswick and Medina Counties) could collaborate and pool their resources to increase the amount of programs they offer, as well as ensure the maintenance of local recreational facilities. Participants felt that increasing collaboration between recreation centers could increase the access that residents have to recreational activities throughout the region.

PROBLEM IDENTIFICATION:

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

1. **Pediatric health services**
2. **Community and economic development**
3. **Recreational activities**

PEDIATRIC HEALTH SERVICES:

Adult parents perceived pediatric health services provided by medical facilities (i.e., hospitals, private practitioners, etc.) in their communities to be limited in the areas of affordability, pediatric emergency medical care, and location and number of available pediatricians.

Perceived Contributing Factors:

- Participants gave the impression that some local medical facilities are not capable of providing pediatric emergency medical care. All participants take their children to a medical facility that is at least a minimum of 45 minutes away from their community.
- Several participants experienced poor outcomes when seeking emergency pediatric medical care at local facilities within their community. Some participants believed that there are a limited number of pediatricians in their community.
- Participants were under the impression that speech therapy services can be difficult to secure for many residents due to limitations of health insurance coverage, out-of-pocket fees associated with uninsured services and the limitations preschools place on daily speech therapy services provided.

Mitigating Resources:

Adult parents identified the following existing resources in their community that they felt could help improve pediatric health services:

- Help Me Grow¹ program offers services
- While some communities do not have local pediatricians, Medina County offers pediatric medical care
- Urgent care and emergency medical care is available

¹ Help Me Grow (HMG) is Ohio's birth to 3 system that provides state and federal funds to county Family and Children First Councils to be used in conjunction with state, local and other federal funds to implement and maintain a coordinated, community-based infrastructure that promotes trans-disciplinary, family-centered services for expectant parents, newborns, infants and toddlers, and their families.

Group Suggestions/Recommendations:

Adult parents offered the following as possible solutions to improve their access to pediatric health services in their community:

Provide a local Children's Hospital: Participants felt that residents would prefer to seek pediatric medical care in their community rather than outside of their community. Participants were under the impression that providing a local Children's Hospital would improve access to pediatric medical care for residents.

COMMUNITY DEVELOPMENT:

Adult parents perceived that development was limited in their communities in the areas of viability of small businesses, locally run restaurants and storefront vacancies.

Perceived Contributing Factors:

- Participants were under the impression that while some communities in the area are growing economically, other communities are not.
- Participants believed that small businesses and locally run restaurants are not able to compete with the larger national chain businesses and restaurants that have moved into the area.
- Participants perceived a lot of vacant storefronts in their communities.
- Participants believed that there are a limited number of stores that offer products appropriate for adolescents.

Mitigating Resources:

Adult parents identified the following existing resource in their community that they felt could improve community development:

- There are locally run restaurants that have remained in business

Group Suggestions/Recommendations:

Adult parents offered the following as possible solutions to help improve community development in their community:

- ***Increase incentives for small businesses:*** Participants believed that the community could offer tax incentives to small businesses to help them compete with larger national chains. Increasing incentives for small businesses could reduce the number of vacant storefronts in the community.

RECREATIONAL ACTIVITIES:

Adult parents perceived that recreation in their communities was limited in the areas of activities for adolescents, quality of recreational centers and residents' awareness.

Perceived Contributing Factors:

- Participants believed that while the existing recreation center offers programs for adolescents, there are few other programs available in their community.
- Participants were under the impression that the local YMCA closed.
- Some participants were under the impression that the recreational facilities that exist in Brunswick, OH are not well maintained.
- Participants believed that not all residents are aware of what recreational activities are available in the community.

Mitigating Resources:

Adult parents identified the following existing resources in their community that they felt could increase access to recreational activities:

- Strongsville Recreation Center offers many programs and the facility is up-to-date
- Community members, when necessary, pull together to accomplish goals
- There are positive attributes within the area (i.e., festivals and fireworks)
- Some communities have well-maintained recreational facilities
- Strongsville County offers teen dances that are well supervised

Group Suggestions/Recommendations:

Adult parents offered the following as possible solutions to increase access to recreational activities in their community:

- ***Increase adolescent programs:*** Participants felt that the community could offer additional programs for adolescents that are well-organized and properly supervised. Participants were under the impression that increasing supervised activities for adolescent residents would prevent criminal and drug activity in the community.
- ***Increase collaboration between recreation centers:*** Participants felt that local communities (i.e., Strongsville, Parma, Brunswick and Medina Counties) could collaborate and pool their resources to increase the amount of programs they offer, as well as ensure the maintenance of local recreational facilities. Participants felt increasing collaboration between recreation centers could increase the access that residents have to recreational activities throughout the region.

GENERAL FOCUS GROUP DISCUSSION GUIDE

I. GREETINGS – INTRODUCTION BY CONTACT PERSON

II. GROUP DISCUSSION FORMAT

A. INTRODUCTION

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

B. EVERYONE INTRODUCES HIM OR HERSELF

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

C. FOCUS GROUP

1. What is a healthy community?

2. Do you think your community is a healthy place – (Why? Why not? Explain ...)

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

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

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

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

Thank You!!

Provide them with incentive

APPENDIX E:

Medina Hospital Focus Group Summary -- Underserved/Uninsured Residents Living in Medina County Group

UNDERSERVED/UNINSURED RESIDENTS LIVING IN MEDINA COUNTY FOCUS GROUP INPUT

Community:

Medina Hospital service area

INTRODUCTION:

The following qualitative data were gathered during a discussion group conducted with a target population of individuals that are underserved/uninsured living in Medina County. The target population was defined by an advisory committee of Medina Hospital executive leadership. Medina Hospital is a 116-bed community hospital and also one of nine Cleveland Clinic community hospitals located in Northeast Ohio. The discussion group was conducted by Tripp Umbach consultants and was located at the Medina County District Library in Medina, OH. Each participant was provided an incentive of twenty-five dollars for participating. The discussion group was conducted using a discussion guide previously created by Tripp Umbach and reviewed by Medina Hospital executive leadership. The purpose of this discussion group was to identify community health needs and concerns affecting individuals that are underserved/uninsured living in the Medina Hospital service area, as well as ways to address those concerns for this specific population.

GROUP RECOMMENDATIONS:

The group provided many recommendations to address community health needs and concerns for individuals that are underserved/uninsured living in the Medina Hospital service area. Below is a brief summary of the recommendations:

- ***Provide 24-hour under/uninsured medical services:*** Participants felt that community-based organizations and local hospitals could collaborate to open a 24-hour clinic that offers under/uninsured medical care. Participants believe that providing 24-hour under/uninsured medical services would ensure that the health needs of underserved populations are being met in a way that does not strain the existing emergency medical care resources.
- ***Increase consumer control in healthcare:*** Participants believed that local medical providers could more clearly state the cost of services prior to providing medical services. Participants believe that increasing consumer control in healthcare could allow under/uninsured residents to make more informed decisions about their healthcare spending.
- ***Increase public transportation:*** Participants felt that the community could collaborate with public transit services to increase the number and frequency of bus routes. Participants believe that increasing public transportation could increase the access some residents have to employment, healthy food and medical care.

- ***Construct and maintain sidewalks:*** Participants felt that communities could construct sidewalks in areas where sidewalks are not available. Additionally, participants felt that communities could strive to better maintain the sidewalks that are available. Participants believe that constructing and maintaining sidewalks could increase handicap mobility, prevent injury and reduce the number of residents walking on the roads.
- ***Increase access to the recreational center:*** Participants felt that the community recreation center could offer low-cost day passes to residents with income below the poverty level that live outside the city limits. Participants stated currently, residents that do not live within city limits are charged a higher rate to use the recreational center. Participants believe increasing access to the recreational center could increase residents' opportunities to better healthy behaviors.
- ***Increase access to parks and outdoor facilities:*** Participants felt that the community could increase the number of parks that are available. Residents can utilize local parks, free of charge. Participants felt that residents would be more likely to utilize local parks if they were not located so far apart. Participants believe increasing access to parks and outdoor facilities could increase the amount residents utilize those facilities and opportunities to increase healthy behaviors.

PROBLEM IDENTIFICATION:

During the discussion group process, individuals that are underserved/uninsured living in Medina County discussed three community health needs and concerns in their community. These were:

1. **Primary and preventive health services**
2. **Community infrastructure**
3. **Community services**

PRIMARY AND PREVENTIVE HEALTH SERVICES:

Individuals that are underserved/uninsured living in Medina County perceived primary and preventive health services provided by medical facilities (i.e., hospitals, private practitioners, etc.) in their communities to be good but also limited in the areas of affordability, under/uninsured medical/dental care, resident awareness of available services, prevention education and resident perception of health services.

Perceived Contributing Factors:

- Participants were under the impression there are no free clinics in the area.
- Participants believed that some residents cannot always afford medications that are prescribed by their doctors.
- Participants believed that not all residents are aware of what under/uninsured services are available in the community (i.e., prescription assistance).
- Participants were under the impression that there are no under/uninsured (i.e., affordable/free) dental services available within their community.

- Participants believed that many under/uninsured residents use the emergency room to meet medical needs that may not be urgent due to a lack of health insurance coverage and the cost of medical care being unaffordable for some residents.
- Participants believed that under/uninsured residents that have medical needs may not be able to afford to meet those needs due to a lack of available income after basic necessities are paid (i.e., utilities, groceries, etc.).
- Participants were under the impression that local hospitals charge separately for ambulance services and perceived this charge to be unnecessary.
- Participants believed that there are limited preventive services (i.e., educational classes and health screenings for diabetes, blood pressure, etc.) that are offered within their community.
- Participants believed that some medical services that have been advertised as free-of-charge are not always free-of-charge due to co-pays and fees residents are asked to pay when they seek the aforementioned services.

Mitigating Resources:

Individuals that are underserved/uninsured living in Medina County identified the following existing resources in their community that they felt could help improve primary and preventive health services:

- Some prescribed medication is available for free or at low-cost
- The health department offers a low-income health clinic
- Free/low-cost medical equipment is available
- The VA offers medical care to veterans that may qualify for free/low-cost services
- Emergency medical services are available

Group Suggestions/Recommendations:

Individuals that are underserved/uninsured living in Medina County offered the following as possible solutions to improve their access to primary and preventive health services in their community:

- ***Provide 24-hour under/uninsured medical services:*** Participants felt that community-based organizations and local hospitals could collaborate to open a 24-hour clinic that offers under/uninsured medical care. Participants believe that providing 24-hour under/uninsured medical services would ensure that the health needs of underserved populations are being met in a way that does not strain the existing emergency medical care resources.
- ***Increase consumer control in healthcare:*** Participants believed that local medical providers could more clearly state the cost of services prior to providing medical services. Participants believe that increasing consumer control in healthcare could allow under/uninsured residents to make more informed decisions about their healthcare spending.

COMMUNITY INFRASTRUCTURE:

Individuals that are underserved/uninsured living in Medina County perceived that the infrastructure of their communities is limited in the areas of transportation, maintenance, housing, accessibility, employment and access to healthy produce.

Perceived Contributing Factors:

- Participants believe that public transportation is limited in their communities and there are some communities that do not have a public transit service.
- Participants were under the impression that the Paratransit bus service requires 24-hour advance scheduling and does not always stay on schedule.
- Participants believed that there are areas where sidewalks are poorly maintained or non-existent, causing residents to have to walk in the street.
- Participants believed that low-income housing options are limited and there is a lengthy waiting list to gain access to those options that are available.
- Participants were under the impression that many rental units in the community are not handicap accessible.
- Participants were under the impression there are limited employment opportunities in their communities and believe this is the result of limited transportation to areas that have more employment opportunities. Additionally, participants believed that there are limited minimum-wage employment opportunities in their community.
- Participants perceived that employment and unemployment services were limited for residents with criminal records.
- Participants believed that residents have limited access to affordable healthy food options due to grocery stores being a great distance from their neighborhoods, limited public transportation and the cost of healthy food options being unaffordable for some residents.
- Participants were under the impression that there is no local blood bank that offers money for donations, which can be a source of income for some residents.

Mitigating Resources:

Individuals that are underserved/uninsured living in Medina County identified the following existing resources in their community that they felt could improve the infrastructure of their communities:

- Public transportation is affordable
- There is assistance that helps provide transportation for job interviews
- Medina Works offers employment and unemployment assistance

Group Suggestions/Recommendations:

Individuals that are underserved/uninsured living in Medina County offered the following as possible solutions to help improve the infrastructure in their community:

- ***Increase public transportation:*** Participants felt that the community could collaborate with public transit services to increase the number and frequency of bus routes. Participants believe that increasing public transportation could increase the access some residents have to employment, healthy food and medical care.
- ***Construct and maintain sidewalks:*** Participants felt that communities could construct sidewalks in areas where sidewalks are not available. Additionally, participants felt that communities could strive to better maintain the sidewalks that are available. Participants believe that constructing and maintaining sidewalks could increase handicap mobility, prevent injury and reduce the number of residents walking on the roads.

COMMUNITY SERVICES:

Individuals that are underserved/uninsured living in Medina County indicated that while their communities have available services in some areas, many participants perceived services to be limited in the areas of recreational activities, resident awareness of available services, educational opportunities, rental assistance and behavioral health services.

Perceived Contributing Factors:

- Participants believed there are limited recreational opportunities due to the limited number of recreational facilities available, limited programs that are offered and costly fees associated with services that can be unaffordable for some residents.
- Participants were under the impression that there are few adult-supervised recreational programs available for adolescents.
- Participants believed that many residents are not aware of what programs and services are available or how to locate information about available community services.
- Participants were under the impression that the Medina VA Hospital offers limited services to veterans when compared to the VA Hospital in Cleveland.
- Participants believed that there are no organizations that offer van transportation.
- Participants perceived self-enhancing educational opportunities (i.e., cooking classes, sewing classes, etc.) are limited.
- Participants were under the impression that rental assistance is not available and one must be evicted from their apartment before housing assistance is available.
- Participants perceived that there are limited mental health outreach efforts taking place in the community.

Mitigating Resources:

Individuals that are underserved/uninsured living in Medina County identified the following existing resources in their community that they felt could increase access to community services:

- There are many services available when compared to the City of Cleveland
- Community-based organizations make referrals to other organizations if necessary to meet the needs of residents

- The United Way 211 service helps with the navigation of available services
- Churches are very involved in the community
- There is housing assistance for residents that have been evicted
- There are a variety of support groups available

Group Suggestions/Recommendations:

Individuals that are underserved/uninsured living in Medina County offered the following as possible solutions to increase access to community services in their community:

- ***Increase access to the recreational center:*** Participants felt that the community recreation center could offer low-cost day passes to residents with income below the poverty level that live outside the city limits. Participants stated currently, residents that do not live within city limits are charged a higher rate to use the recreational center. Participants believe increasing access to the recreational center could increase residents' opportunities for better healthy behaviors.
- ***Increase access to parks and outdoor facilities:*** Participants felt that the community could increase the number of parks that are available. Residents can utilize local parks, free of charge. Participants felt that residents would be more likely to utilize local parks if they were not located so far apart. Participants believe increasing access to parks and outdoor facilities could increase the amount residents utilize those facilities and opportunities to increase healthy behaviors.

APPENDIX F:

Medina Hospital Community Inventory of Community Resources

Tripp Umbach completed an inventory of community resources available in the Medina 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 Medina Hospital community (44212, 44215, 44233, 44235, 44253, 44254, 44256, 44273, 44275, 44280, 44281) more than 100 community resources were identified with the capacity to meet the three community health needs identified in the Medina Hospital CHNA. (Please refer to the Community Health Needs Assessment Report to review the detailed community needs.)

An inventory of the resources in the Medina 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)

INVENTORY OF COMMUNITY RESOURCES AVAILABLE TO ADDRESS COMMUNITY HEALTH NEEDS IDENTIFIED IN THE MEDINA HOSPITAL CHNA																		
Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDER/UNINSURED	ACCESS TO AFFORDABLE HEALTHCARE AND MEDICAL SERVICES	Primary Care	Preventive Care	Medical Transportation	ACCESS TO COMMUNITY SERVICES	Outreach and Collaboration	Healthy Food Options	Youth Programs	COMMUNITY DEVELOPMENT, SPECIFICALLY EMPLOYMENT AND INFRASTRUCTURE	Employment	Transportation	Public Works
211 / FIRST CALL FOR HELP – CLEVELAND	Medina	2573 Medina Rd., Medina City, OH 44256 ~(888) 330-4211 ~www.211medina.org	More Information	No restrictions	Offers telephone information about where to access health and human service needs in Medina County. Provides information about a range of services including food, shelter, health care, substance abuse, mental health, recreation and social activities.						*	X						
CORNERSTONE WELLNESS CENTER	Medina	246 Northland Drive, Medina, OH 44256 ~(330) 722-9326 [REDACTED]	More Information	No restrictions	Provides community behavioral health education, consultations and screenings throughout the community. Works towards identifying needs of the community and strengthening community partnerships with other agencies as a means of providing preventative and educational services related to behavioral health.		*	X	X		*	X		X				
ALTERNATIVE PATHS	Medina	246 Northland Drive, Suite 200 A, Medina, OH 44256 ~(330) 725-9195 ~www.alternativepaths.org	More Information	Medina County residents	Provides community support services for adult individuals who are severely mentally disabled. Assists persons with acute or chronic severe mental illness helping to develop their autonomy without being isolated or excluded from the community. Operates suicide hotline and mental health crisis hotline.	*	*	X	X		*	X		X				
COMMUNITY ACTION WAYNE/MEDINA COUNTY	Medina	820 B West Lafayette Road, Medina, OH 44256 ~(330) 723-2229 ~www.cawm.org	More Information	Medina County Residents	Serves as the Community Action Agency for Wayne and Medina Counties. Purpose is to alleviate the effects and causes of poverty through a variety of programs that serve low-income families, children, and older adults. Generally, programs address unemployment, inadequate housing and utilities, poor nutrition, and the lack of educational opportunities in the community.	*					*	X	X	X				
NATIONAL ALLIANCE FOR MENTALLY ILL	Medina	284 Northland Drive, Medina, OH 44256 ~(330) 225-0852	More Information	Adults suffering from mental illness and their families	Offers various educational programs, classes and support materials to help a person aid their loved ones with mental illness. Organizes support groups for people who have loved ones or adult children with mental illness. Holds support group for adults who have a mood or thought disorder.						*	X						

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDER/UNINSURED	ACCESS TO AFFORDABLE HEALTHCARE AND MEDICAL SERVICES	Primary Care	Preventive Care	Medical Transportation	ACCESS TO COMMUNITY SERVICES	Outreach and Collaboration	Healthy Food Options	Youth Programs	COMMUNITY DEVELOPMENT, SPECIFICALLY EMPLOYMENT AND INFRASTRUCTURE	Employment	Transportation	Public Works
MEALS ON WHEELS - LODI VILLAGE	Medina	225 Elyria Street, Lodi, OH 44254 ~(330) 948-1222	More Information	Seniors or persons with a disability who are homebound and unable to cook for themselves who live within a one mile radius of Lodi Village.	Provides meals for people within one mile of Lodi Village.						*	X	X					
MEALS ON WHEELS - MEDINA CITY	Medina	PO Box 352, Medina, OH 44256 ~(330) 723-9699	More Information	Homebound individuals	The Meals on Wheels program is designed to make sure that homebound individuals get at least one nutritious meal a day. Most meal deliverers are trained to recognize symptoms of problems, thus meal delivery offers some reassurance that an objective third party is touching base each day. Find out about the program closest to your care receiver.						*	X	X					
MEALS ON WHEELS - SHARON CENTER	Medina	215 High Street, Wadsworth, OH 44281 ~(330) 335-6156	More Information	Adults residents of Wadsworth City or Wadsworth Twp. residents with a disability who are homebound or others in need who cannot prepare their own meals.	Provides nutritious meals to elderly or homebound adults or to those leaving hospitals who need temporary assistance. Available to residents within 2 miles of Administrative Office where meals are prepared.						*	X	X					
HABITAT FOR HUMANITY MEDINA COUNTY	Medina	PO Box 1291, Medina, OH 44258 ~(330) 722-4494	More Information	No restrictions	Builds houses with volunteers and participating low-income families and then houses are sold to the families with a no interest mortgage and for no profit. Accepted families also receive home ownership training. Accepts donations of new or gently used building supplies, tools and equipment to either sell at the ReStore or use to finish projects. Accepts volunteers to help in building projects.						*	X						
FEEDING MEDINA COUNTY	Medina	120 West Washington Street, Suite 3D, Medina, OH 44256 ~(330) 421-4816	More Information	Medina County families in need	Strives to make more food available to all of the County's Food Pantries.						*	X	X					
BATTERED WOMEN'S SHELTER OF MEDINA COUNTY	Medina	3637 Medina Road, Medina, OH 44256 ~(330) 723-9610	More Information	Women, men or children who are victims of domestic violence primarily from Medina County but will service clients outside the county if space is available.	Offers immediate shelter and several other supportive services to those experiencing domestic violence.						*	X		X				
AMERICAN RED CROSS MEDINA COUNTY CHAPTER EXPANDED TRANSPORTATION OPTIONS (ETO)	Medina	780 E. Smith Rd. Ste. A, Medina City, OH 44256 ~(330) 723-4565 ~www.medinaredcross.org	More Information	Medina County residents age 60+ or with disabilities	Provides paratransit services to qualified individuals with physical disabilities or older adults. Offers transportation to out of county medical appointments which may include but is not limited to hospitals, doctor appointments such as the Cleveland Clinic.		*		X		*	X			*		X	

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDER/UNINSURED	ACCESS TO AFFORDABLE HEALTHCARE AND MEDICAL SERVICES	Primary Care	Preventive Care	Medical Transportation	ACCESS TO COMMUNITY SERVICES	Outreach and Collaboration	Healthy Food Options	Youth Programs	COMMUNITY DEVELOPMENT, SPECIFICALLY EMPLOYMENT AND INFRASTRUCTURE	Employment	Transportation	Public Works
ASAP HOME CARE AND HOME NURSES	Medina	One Park Centre Dr. Ste. 17, Wadsworth, OH 44281 ~(330) 334-7027 ~www.asaphomecare.com	More Information	Medina County residents	Provides a variety of home health and home care services.	*	*	X	X		*		X					
BLACK RIVER / MEDINA CHURCH OF THE BRETHREN	Medina	5857 Deerview Ln., Medina City, OH 44256 ~(330) 725-6044	More Information	Based on need	Offers emergency and temporary food assistance. Provides five day supply of food. Amount of assistance given is based on individual need.						*	X	X	X				
BRIDGESHOME HEALTH CARE	Medina	110 Highland Dr., Medina City, OH 44256 ~(330) 764-1000 ~www.bridgeshome.org	More Information	Medina County residents 18+	Provides home health care for homebound patients in need of rehabilitation and recovery. Provides each patient with a medically-directed interdisciplinary team to aid in recovery. Includes injections and intravenous therapy, wound care and physical, occupational and speech therapy and offers services in medical social work.	*	*	X										
BRUNSWICK CITY OF - DIVISION OF STREETS	Medina	4095 Center Rd., Brunswick, OH 44212 ~(330) 225-9144 ~www.brunswick.oh.us	More Information	Brunswick City	Offers street services such as street and street sign maintenance, repairs of street lights and traffic signals, branch chipping and tool/equipment loan program for residents of Brunswick City.										*			X
BRUNSWICK CITY SCHOOL DISTRICT	Medina	3643 Center Rd., Brunswick, OH 44212 ~(330) 225-7731 ~www.bcsch.org	More Information	Must be a resident of Brunswick City, Brunswick Hills, or Ward 3 of Hinkley Twp. enrolled in the Brunswick City School District	Provides general guidance counseling services, including personal student counseling services and career counseling.						*	X	X	X	*	X		
BRUNSWICK COMMUNITY LIBRARY	Medina	3649 Center Rd., Brunswick City, OH 44212 ~(330) 273-4150 ~www.mcdl.info	More Information	No restrictions	Offers a full service information facility for children, teens, and adults. Special programs on a wide variety of topics for all ages. Public computers with Internet access available to patrons. Offers networking opportunities and supportive education services for individuals						*	X		X	*	X		
BRUNSWICK COMMUNITY RECREATION AND FITNESS CENTER	Medina	3637 Center Rd., Brunswick, OH 44212 ~(330) 273-8000 ~www.brunswick.oh.us/ Parks-and-Rec	More Information	Targeted to residents of Brunswick	Offers fitness programs, sporting events, swimming, concerts and community events. Offers youth programs. Operates and maintains all city parks in Brunswick City and Brunswick Hills Twp. and offers variety of recreational facilities and activities. Cooling Center onsite.		*		X		*	X	X	X	*			X

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BRUNSWICK FOOD PANTRY	Medina	2888 Nationwide Pkwy., Brunswick City, OH 44212 ~(330) 225-4966	More Information	Resident of Brunswick City, Brunswick Hills, Valley City or Hinckley Twp.	Provides food to those in need.						*		X					
BRUNSWICK TRANSIT ALTERNATIVE	Medina	4095 Center Rd., Brunswick, OH 44212 ~(330) 725-9670 ~ www.brunswick.oh.us/Service-and-Streets/BTA.html	More Information	Serves Brunswick City and parts of Brunswick Hills Twp.	Provides bus transit services to Brunswick City and Parts of Brunswick Hills. Operates two loop routes but will try to accommodate for special transportation outside of normal service area for dialysis or other medical appointments.		*			X					*		X	
BRUNSWICK UNITED METHODIST CHURCH	Medina	1395 Pearl Rd., Brunswick, OH 44212 ~(330) 225-3179 ~www.brunswickumc.org	More Information	Resident of Brunswick City, Brunswick Hills, Valley City or Hinckley Twp.	Provides worship services and food pantry.						*	X	X	X				
BUCKEYE LOCAL SCHOOL DISTRICT	Medina	3044 Columbia Rd., York Twp., OH 44256 ~(330) 722-8257 ~www.buckeye.k12.oh.us	More Information	Serves Buckeye Local School District including Liverpool Twp., Litchfield Twp., York Twp. and parts of Medina City Serves ages 3-22 years old or grades pre-kindergarten through twelfth	Provides general counseling services to students of Buckeye Local School System. Offers career guidance and counseling as well as guidance counseling to prepare students for future careers after graduation. Provides public education for grades Pre-K through 12 grade or 22 years of age. Offers state school lunch programs, busing services for students, gifted and special education classes and guidance and career counseling for students.						*	X	X	X	*	X	X	
CATHOLIC CHARITIES COMMUNITY SERVICES - MEDINA	Medina	740 E. Washington St. Ste. E-4, Medina City, OH 44256 ~(330) 723-9615 ~clevelandcatholiccharities.org	More Information	Medina County residents	Provides counseling services to guide clients in problem solving to become participating members of the community. Offers services for families, children, married couples, parents and spousal abusers. Works towards prevention of family breakdown and domestic violence as well as relieving marital problems. Works with families on parent-child relationships, treatment of personality disorders as well as emotional and mental illness.						*	X		X				
CHATHAM TOWNSHIP OF- ROADS DEPARTMENT	Medina	6539 Avon Lake Rd., Chatham Twp., OH 44256 ~(330) 667-2924 ~www.chathamtownshipohio.org/roads.htm	More Information	Serves Chatham Twp.	Operates City Garage and provides maintenance of all roads, traffic and street lights, street signs and offers graffiti removal.										*			X
CHURCH AT STONY HILL	Medina	2756 Stony Hill Rd., Granger Twp., OH 44256 ~(330) 239-9858	More Information	No restrictions	Offers weekly church services and food pantry.						*	X	X					
CHURCH AT THE LAKE UNITED METHODIST	Medina	7824 Lake Rd., Chippewa Lake, OH 44215 ~(330) 769-2288 ~ www.churchatthelake.com	More Information	Serves people in the following zip codes, 44215, 44254 and 44273	Offers emergency food to people in need. Proof of income; Photo I.D. such as a state I.D. or driver's license is required.													

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CLOVERLEAF COMMUNITY RECREATION CENTER	Medina	8525 Friendsville Rd., Lodi, OH 44254 ~(330) 948-1323 ~www.cls.k12.oh.us/rec	More Information	No restrictions	Provides public fitness facility, community education classes, physical fitness courses and team sports activities or instruction. Offers personal enrichment courses such as babysitting classes and arts and crafts.		*		X		*	X	X	X				X
CLOVERLEAF LOCAL SCHOOL DISTRICT	Medina	8525 Friendsville Rd., Lodi Village, OH 44254 ~(330) 948-2500 ~www.cls.k12.oh.us	More Information	No restrictions	Provides public education including special education programs, gifted education, student busing services, state school lunch programs and guidance counseling services. Offers personal enrichment classes for adults and youth including adult GED classes.		*		X		*	X	X	X				
COMMUNITY CAREGIVERS OF MEDINA COUNTY	Medina	230 Quadral Dr. Ste. D, Wadsworth, OH 44281 ~(330) 725-9800 ~www.commcareinc.org	More Information	No restrictions	Provides medical social work, medication reminders, personal care, companionship, pet care, and homemaker assistance such as light housekeeping, meal preparation and shopping/errand assistance. Also offers in home hospice services.	*	*	X	X		*		X					
COMMUNITY SERVICES CENTER	Medina	655 N Broadway, Medina City, OH 44256 ~(330) 725-4690	More Information	Medina County residents	Provides primary assistance, including food, clothing, bedding and basic household items. Additionally offers financial assistance for rent/mortgage, utility disconnects, and prescriptions. Operates food pantry.						*	X	X	X				
CONNECTION CHURCH	Medina	2524 Medina Rd., Ste. 300, Medina, OH 44256 ~(330) 461-3964 ~www.connectionchurch.org	More Information	Serves people in need while supplies are available	Offers worship services, special community outreach projects, and a monthly food pantry.						*	X	X	X				
FAITH IN ACTION	Medina	780 Smith Rd. Ste. A, Medina, OH 44256 ~(330) 952-0342 ~www.fiamedina.org	More Information	Medina County Seniors 60+ and Adults 18+ with a disability that prevents them from driving	Offers senior ride and medical transportation programs for seniors and the disabled within Medina County, and paratransit service from Medina to medical appointments in the outlying counties. Also provides in-home assistance with paperwork and light housekeeping.		*		X						*		X	
GOODWILL INDUSTRIES OF AKRON - MEDINA	Medina	3500 Medina Rd., Medina City, OH 44256 ~(330) 722-0503 ~www.goodwillakron.org	More Information	Medina County residents who have disabilities or other barriers to employment	Provides assessment, employment readiness, skill training, placement and support services for individuals facing barriers to employment because of physical, mental or socially induced disabilities. Offers Vocational Training programs. Offers Goodwill store vouchers for clothing, linens, furniture and kitchenware to qualified individuals.										*	X		

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDER/UNINSURED	ACCESS TO AFFORDABLE HEALTHCARE AND MEDICAL SERVICES	Primary Care	Preventive Care	Medical Transportation	ACCESS TO COMMUNITY SERVICES	Outreach and Collaboration	Healthy Food Options	Youth Programs	COMMUNITY DEVELOPMENT, SPECIFICALLY EMPLOYMENT AND INFRASTRUCTURE	Employment	Transportation	Public Works
GOODWILL INDUSTRIES OF AKRON AT MEDINA COUNTY DISTRICT LIBRARY	Medina	210 S Broadway St. Community Room B, Medina, OH 44256 ~(330) 441-1393 ~www.goodwillakron.org	More Information	No restrictions	Provides opportunities for job seekers to network and gain insight into job seeking techniques.										*	X		
GOODWILL THRIFT STORE - BRUNSWICK	Medina	1733 Pearl Rd. #101A, Brunswick City, OH 44212 ~(330) 441-1393 ~www.goodwillakron.org	More Information	No restrictions	Provides opportunities for job seekers to network and gain insight into job seeking techniques.										*	X		
GRACE BAPTIST CHURCH	Medina	3289 Laurel Rd., Brunswick, OH 44212 ~(330) 225-4366 ~www.gbcheartline.org/	More Information	Seniors 60+	Provides worship services and runs a congregate meal program for older adults.						*	X	X	X				
GRANGER TOWNSHIP OF - SERVICE DEPARTMENT	Medina	3717 Ridge Rd., Granger Twp., OH 44256 ~(330) 239-3611 ~www.grangertwp.org/roads/index.html	More Information	Serves Granger Twp.	Provides street maintenance for Granger Twp.										*			X
HANDS FOUNDATION	Medina	PO Box 868, Brunswick City, OH 44212 ~(330) 722-7950	More Information	Medina County Senior residents	Serves to improve the quality of life for Medina County Seniors by coordinating, collaborating and assisting other local agencies and organizations in the community. Offers undesignated financial assistance for older adults who are struggling financially.						*	X						
HARRISVILLE TOWNSHIP OF-TOWNSHIP GARAGE	Medina	104 Railroad St., Harrisville Twp., OH 44254 ~(330) 948-1003 ~www.harrisvilletwp.com	More Information	Serves Harrisville Twp.	Provides street maintenance for Harrisville Twp. including maintenance or repair of all street lights, street signs and townships roads. Provides snow removal of township roads.										*			X
HEARTSPACE UNITED CHURCH OF CHRIST	Medina	4356 Center Rd., Brunswick, OH 44212 ~(330) 225-8813 ~www.heartspaceucc.org	More Information	No restrictions	Provides worship services. Offers monthly hot meal program and food pantry. Accepts donations of items to be distributed in pantry.						*	X	X	X				
HIGHLAND LOCAL SCHOOL DISTRICT	Medina	3880 Ridge Rd., Medina City, OH 44256 ~(330) 239-1901 ~www.highlandschools.org	More Information	Residents aged 3-22 or grades Pre-K thru 12 living in parts of Hinkley Twp., Granger Twp. and Sharon Twp.	Offers public education including special education or gifted courses, student busing, state school lunch programs and guidance counseling. Issues work permits to qualified students. Provides Resource Center computer lab and community education programs for personal enrichment including computer courses and arts and crafts.						*	X	X	X	*	X	X	

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDER/UNINSURED	ACCESS TO AFFORDABLE HEALTHCARE AND MEDICAL SERVICES	Primary Care	Preventive Care	Medical Transportation	ACCESS TO COMMUNITY SERVICES	Outreach and Collaboration	Healthy Food Options	Youth Programs	COMMUNITY DEVELOPMENT, SPECIFICALLY EMPLOYMENT AND INFRASTRUCTURE	Employment	Transportation	Public Works
HINCKLEY TOWNSHIP OF - SERVICE DEPARTMENT	Medina	1616 Ridge Rd., Hinckley Twp., OH 44233 ~(330) 278-4181 ~www.hinckleytp.org/service/	More Information	Serves Hinckley Twp.	Offers general street maintenance for Hinckley Twp. including street sign and light maintenance. Provides snow removal of township streets.										*			X
HOLY MARTYRS MINISTRY OF ASSISTANCE	Medina	3100 S. Weymouth Rd., Medina Twp., OH 44256 ~(330) 635-4989 ~www.holymartyrs.net	More Information	Medina County residents with low income	Offers worship services, weekly food pantry and emergency financial assistance.						*	X	X	X				
HOSPICE OF MEDINA COUNTY	Medina	797 N. Court St., Medina City, OH 44256-1749 ~(330) 722-4771 ~www.hospiceofmedina.org	More Information	No restrictions	Provides supportive care through a medically directed, interdisciplinary team regardless of income. Serves the terminally ill and their families throughout the dying process in accord with their wishes and directives. Offers several support groups services for the bereaved as well as Hospice services including medical social work, massage therapy, and Hospice care. Offers in-patient symptom management services.	*	*	X			*	X		X				
KIDNEY FOUNDATION OF MEDINA COUNTY	Medina	232 Northland Dr., Medina City, OH 44256 ~(330) 350-6430 ~www.mckf.org	More Information	Medina County residents	Provides assistance and education to persons with kidney disease and their families. Offers a nonprescription diabetic supply bank. Helps arrange transportation for persons attending dialysis centers by scheduling taxi services or local transit services.		*	X			*	X			*		X	
LAFAYETTE TOWNSHIP OF - SERVICE DEPARTMENT	Medina	6776 Wedgewood Rd., Medina, OH 44256 ~(330) 725-3233 Voice ~www.lafayettetownship.com/Services.html	More Information	Services only township roads in Lafayette Twp. Does not service county roads	Provides maintenance for all township roads and ditches. Provides snow removal of township roads.										*			X

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	<div> <div>AFFORDABLE HEALTHCARE FOR UNDER/UNINSURED</div> <div>ACCESS TO AFFORDABLE HEALTHCARE AND MEDICAL SERVICES</div> <div>Primary Care</div> <div>Preventive Care</div> <div>Medical Transportation</div> <div>ACCESS TO COMMUNITY SERVICES</div> <div>Outreach and Collaboration</div> <div>Healthy Food Options</div> <div>Youth Programs</div> <div>COMMUNITY DEVELOPMENT, SPECIFICALLY EMPLOYMENT AND INFRASTRUCTURE</div> <div>Employment</div> <div>Transportation</div> <div>Public Works</div> </div>
LITCHFIELD TOWNSHIP OF - MAINTENANCE DEPARTMENT	Medina	9256 Norwalk Rd., Litchfield Twp., OH 44253 ~(330) 722-7966	More Information	Serves residents of Litchfield Township	Maintains and repairs township roads including pavement repair and maintenance, snow plowing, roadside mowing, brush removal, ditching and road signs.	
LIVERPOOL TOWNSHIP OF - MAINTENANCE GARAGE	Medina	6700 Center Rd., Valley City, OH 44280 ~(330) 483-4747	More Information	Serves Liverpool Township and Valley City	Provides street maintenance for all township roads. Handles maintenance of all street signs, street lights, snow removal and graffiti removal.	
LIVING HOPE CHURCH	Medina	6288 Wooster Pike Rd., Medina, OH 44256 ~(330) 725-7730 ~www.livinghopemedina.com	More Information	Serves people in need with household income below 150% of the federal poverty level	Provides worship services and offers monthly food pantry. Accepts monetary and food donations to be used in pantry. Additionally serves as a site for Angel Food Ministries.	
LODI COMMUNITY HOSPITAL	No restrictions	225 Elyria St., Lodi, OH 44254 ~(330) 948-1222 ~www.lodihospital.com	More Information	No restrictions	Provides primary, preventive and urgent medical care, as well as individual patient education and counseling on nutrition.	
LODI GOOD SAMARITANS	Medina	104 Medina St., Lodi Village, OH 44254 ~(330) 948-1834	More Information	No restrictions	Provides basic needs assistance to people in need including a food pantry, utility bill payment assistance, rent assistance and general clothing.	
MATTHEW 25 COALITION	Medina	Confidential Address ~(330) 948-1222 ext. 39271	More Information	Residents of 44215, 44217, 44235, 44251, 44253, 44254, 44273, 44275	Provides residents with emergency financial assistance including utilities bill payments, gasoline, and prescriptions. Can provide hotel vouchers for transients when funds are available. Client must have already utilized all other sources of funding for gasoline assistance. Client can only receive a maximum of \$300 total per family in assistance. Need is based upon individual evaluations. No income restrictions.	
MEDINA CITY OF - SERVICE DEPARTMENT	Medina	132 N. Elmwood Ave., Medina City, OH 44256 ~(330) 722-8861 ~www.medinaoh.org	More Information	Residents of 44256	Provides street maintenance and repair including line striping. Takes complaints and requests for services or repairs including street sign or traffic light repair, leaf collection and snow and ice removal. Leaf pick-up scheduled regularly per each city quadrant.	

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MEDINA CITY SCHOOL DISTRICT	Medina	140 W. Washington St., Medina City, OH 44256 ~(330) 636-3090 ~www.medinacityschooldistrict.org	More Information	Serves majority of Medina City, Medina Twp. and parts of Montville Twp.	Offers academic and personal student counseling services including career objective counseling for students within the public school system. Offers public schooling for kindergarten through high school including special education and gifted programs, school lunch programs, student busing services and ESL classes.						*	X	X	X	*	X	X	
MEDINA COUNTY ALCOHOL AND DRUG ADDICTION AND MENTAL HEALTH BOARD	Medina	246 Northland Dr., Medina City, OH 44256 ~(330) 723-9642	More Information	Medina County residents	Plans, coordinates, funds and monitors public mental health, alcohol and drug addiction services for Medina County residents. Ensures care for the needs of severely mentally disabled adults and emotionally disturbed children. Allocates funds received from Federal, State and local sources to appropriate agencies. Monitors, evaluates, identifies and fills gaps in these services.	*	*	X	X		*	X	X	X				
MEDINA COUNTY BOARD OF DEVELOPMENTAL DISABILITIES	Medina	4691 Windfall Rd., Granger Twp., OH 44256 ~(330) 725-7751 ~www.mcbdd.org	More Information	Medina County residents with developmental disabilities and their families	Provides, case management, transportation, educational programs, residential assistance, physical, occupational and speech therapy, employment training/placement and recreational programming.						*			X	*	X		
MEDINA COUNTY CAREER CENTER	Medina	1101 W. Liberty St., Medina Twp., OH 44256 ~(330) 725-8461 ~www.mccc-jvdsd.org	More Information	No restrictions	Provides career technical education for high school juniors and seniors. Offers the Adult and Continuing Education Division that provides education and training courses. Additionally provides Adult Basic Literacy Education (ABLE) and GED programs at several local sites including the Medina County Career Center. Provides monthly GED testing site. Offers counseling in financial aid, job seeking skills, job placement and career assessments. Additionally offers various computer and software classes and seminars. Medina Business Institute Division offers specialized programs for business and industries who would like supplemental training for employees.						*		X		*	X		

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDER/UNINSURED	ACCESS TO AFFORDABLE HEALTHCARE AND MEDICAL SERVICES	Primary Care	Preventive Care	Medical Transportation	ACCESS TO COMMUNITY SERVICES	Outreach and Collaboration	Healthy Food Options	Youth Programs	COMMUNITY DEVELOPMENT, SPECIFICALLY EMPLOYMENT AND INFRASTRUCTURE	Employment	Transportation	Public Works
MEDINA COUNTY DISTRICT LIBRARY	Medina	210 S Broadway, Medina City, OH 44256 ~(330) 725-0588 ~www.mcdl.info	More Information	No restrictions	Operates a six-branch county-wide public library system. Provides a full service information facility for children, teens, and adults. Special programs are run year round, including classes in a wide variety of topics for all ages. Provides regular story times for children. Public computers with Internet access available to patrons. Operates outreach department and Bookmobile services for the public.						*	X		X				
MEDINA COUNTY FAMILY FIRST COUNCIL	Medina	232 Northland Dr., Medina City, OH 44256 ~(330) 764-8580 ~www.familyfirstmedina.org	More Information	Medina County Residents	Serves as a facilitator of preventative, comprehensive, community based family services for residents of all ages.	*	*	X	X		*	X	X	X	*	X		
MEDINA COUNTY HEALTH DEPARTMENT	Medina	4800 Ledgewood Dr., Medina Twp., OH 44256 ~(330) 723-9688 ~ www.medinahealth.org	More Information	Medina County Residents	Provides non-emergency primary and preventive care to residents of all ages including women's health care. Offers the Women, Infants and Children's nutrition program (WIC), dental clinics, health education, car seat safety checks.	*	*	X	X		*		X	X				
MEDINA COUNTY HEALTH DEPARTMENT AT LODI RESOURCE CENTER	Medina	119 Bank St., Lodi, OH 44254 ~(330) 723-9688 ~www.medinahealth.org	More Information	Medina County Residents	Offers childhood and adolescent immunizations. Provides all required vaccinations for children and teens. No one will be denied immunization due to inability to pay.	*	*		X		*			X				
MEDINA COUNTY HEALTH DEPARTMENT AT SPENCER TOWN HALL	Medina	112 N Main St., Spencer, OH 44275 ~(330) 723-9688 ~www.medinahealth.org	More Information	Medina County Residents	Offers childhood and adolescent immunizations. Provides all required vaccinations for children and teens. No one will be denied immunization due to inability to pay.	*	*		X		*			X				
MEDINA COUNTY HEALTH DEPARTMENT AT SUMMA WADSWORTH RITTMAN HOSPITAL FOUNDER'S HALL	Medina	195 Wadsworth Rd., Wadsworth, OH 44281 ~(330) 723-9688 ~www.medinahealth.org	More Information	Medina County Residents	Offers childhood and adolescent immunizations. Provides all required vaccinations for children and teens. No one will be denied immunization due to inability to pay.	*	*		X		*			X				
MEDINA COUNTY JOB AND FAMILY SERVICES	Medina	232 Northland Dr., Medina City, OH 44256 ~(330) 722-9300 ~ www.mcjfs.us	More Information	Medina County Residents	Provides three divisions of services to people of Medina County. Provides protective and supportive services to families with children and elderly through Children Services and Social Services divisions. Provides food assistance, cash assistance, medical assistance and emergency assistance through the Eligibility Division. Offers	*	*	X	X	X	*	X	X	X	*	X	X	

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDER/UNINSURED	ACCESS TO AFFORDABLE HEALTHCARE AND MEDICAL SERVICES	Primary Care	Preventive Care	Medical Transportation	ACCESS TO COMMUNITY SERVICES	Outreach and Collaboration	Healthy Food Options	Youth Programs	COMMUNITY DEVELOPMENT, SPECIFICALLY EMPLOYMENT AND INFRASTRUCTURE	Employment	Transportation	Public Works
MEDINA COUNTY OFFICE FOR OLDER ADULTS	Medina	246 Northland Dr. Ste. G-20, Medina City, OH 44256 ~(330) 723-9514 ~www.co.medina.oh.us/ooa/office.htm	More Information	Medina County residents age 60+	Provides in-home and community based services, including home-delivered and congregate meals, and a variety of cultural, recreational and educational programs. Functions as an Aging and Disability Resources Center (ADRC), offering information and assistance, options counseling and benefits screening for older adults and adults with disabilities.	*	*		X	X	*	X	X		*		X	
MEDINA COUNTY OFFICE FOR OLDER ADULTS AT BRUNSWICK RECREATION CENTER	Medina	3637 Center Rd., Brunswick, OH 44212 ~(330) 723-9514 ~www.co.medina.oh.us/ooa/office.htm	More Information	Medina County residents age 60+	Provides regular congregate meals for older adults.						*	X	X					
MEDINA COUNTY OFFICE FOR OLDER ADULTS AT GLORIA GLENS TOWN HALL	Medina	7966 Lake Rd., Chippewa Lake, OH 44215 ~(330) 723-9514 ~www.co.medina.oh.us/ooa/office.htm	More Information	Medina County residents age 60+	Provides regular congregate meals for older adults.						*		X					
MEDINA COUNTY OFFICE FOR OLDER ADULTS AT WADSWORTH CENTER FOR OLDER ADULTS	Medina	138 High St., Wadsworth, OH 44281 ~(330) 723-9514 ~www.co.medina.oh.us/ooa/office.htm	More Information	Medina County residents age 60+	Provides regular congregate meals for older adults. Provides a community center for older adults. Offers various services and recreational activities including social events, nutritional classes, exercise classes, crafts and group activities. Also organizes travel outings. Provides blood pressure screenings for residents age 50+ with priority given to residents of Wadsworth City.		*		X		*	X	X					
MEDINA COUNTY PARK DISTRICT	Medina	6364 Deerview Lane, Medina, Ohio 44256 ~(330) 722-9364 ~www.medinacountyparks.com/index.html	More Information	No restrictions	The Medina County Park District seeks to enhance the quality of all life through education, conservation and the protection of natural resources.						*	X		X	*			X
MEDINA COUNTY PUBLIC TRANSIT	Medina	3334 Myers Rd., Medina City, OH 44256 ~(330) 723-9670	More Information	Medina County residents age 60+ or with disabilities. No restrictions for bus loop.	Takes reservations for both public and specialized curb-to-curb local transportation service between any origin and destination within Medina County. Offers regularly scheduled public transportation on their Loop route. Offers scheduled connections to RTA Bus at Laurel Square Plaza. Must meet certain eligibility requirements to receive a free fare.		*			X					*		X	

Organization/Provider	Counties Served	Contact Information	Internet Information	Population Served	Services Provided	AFFORDABLE HEALTHCARE FOR UNDER/UNINSURED	ACCESS TO AFFORDABLE HEALTHCARE AND MEDICAL SERVICES	Primary Care	Preventive Care	Medical Transportation	ACCESS TO COMMUNITY SERVICES	Outreach and Collaboration	Healthy Food Options	Youth Programs	COMMUNITY DEVELOPMENT, SPECIFICALLY EMPLOYMENT AND INFRASTRUCTURE	Employment	Transportation	Public Works
MEDINA COUNTY SCHOOLS' EDUCATIONAL SERVICE CENTER	Medina	124 W. Washington St., Medina City, OH 44256 ~(330) 723-6393 ~www.medina-esc.org	More Information	Medina County residents	Provides special education programs and special projects by contract to school districts within Medina County. Provides special administrative and service responsibilities, offers transition work study program, offers computer and other staff development courses and manage an alternative high school program. Develops curriculum for all Medina County school districts.						*			X	*	X		
MEDINA CREATIVE ACCESSIBILITY	Medina	2110 Hathaway Dr., Brunswick City, OH 44212 ~(330) 220-2112 ~www.medinacreativehousing.com	More Information	Adults in Medina County with developmental disabilities	Provides life skills training and vocational training for adults with developmental disabilities. Additionally will provide this training on-site to special needs classrooms within in the county. Also offer services for providers.						*	X			*	X		
MEDINA FOOD CO-OP	Medina	Confidential Address, Medina City, OH 44256 ~(330) 722-0080 ~medinafood.googlepages.com	More Information	No restrictions; Must be on-time with payments	Provides a volunteer-run food cooperative in Medina that offers various specialty organic, eco-friendly health foods and products including health, beauty and cleaning products.						*		X					
MEDINA HEALTH MINISTRY OUTPATIENT CLINIC - GENERAL MEDICINE	Medina	970 E. Washington St., Medina, OH 44256 ~(330) 764-9300	More Information	Residents 18+, employed, income below 200% of federal poverty level, with no medical insurance	Offers general medical care. Care includes general medical examination but does not include pap smears or other gynecological services. Does not provide blood screenings and generally can not take emergencies.	*	*	X	X									
MEDINA HOSPITAL	No restrictions	1000 E. Washington St., Medina City, OH 44256 ~(330) 725-1000 ~www.medinahospital.org	More Information	No restrictions	Provides primary, preventive and urgent medical care, as well as individual patient education and counseling on nutrition. Provides health information to the public.	*	*	X	X		*	X	X	X				
MEDINA HOSPITAL BRUNSWICK MEDICAL CARE CENTER	Medina	3724 Center Rd., Brunswick City, OH 44212 ~(330) 220-2504 ~ www.medinahospital.org	More Information	No restrictions	Provides emergency room services and urgent care.	*	*	X			*			X				

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MEDINA TOWNSHIP OF - ROADS DEPARTMENT	Medina	3718 Weymouth Rd., Medina Twp., OH 44256 ~(330) 764-8767 ~www.medinatownship.com	More Information	Serves Medina Twp.	Provides maintenance of all township roads and street signs within Medina Twp. Handles graffiti removal of public properties in the township as well as snow removal.										*	X		
MEDINAWORKS	Medina	3721 Pearl Rd., Medina City, OH 44256 ~(330) 723-9675 ~www.medinacountyworks.com	More Information	Medina County residents	Provides various programs and services for job seekers and employers in Medina County area.										*	X		
MONTVILLE TOWNSHIP OF - (MEDINA COUNTY) MAINTENANCE DEPARTMENT	Medina	6665 Wadsworth Rd., Medina, OH 44256 ~(330) 725-0273 ~www.montvilletwp.org/maint.html	More Information	Serves Montville Twp.	Provides general maintenance of all township roads and street signs in Montville Twp.										*			X
NEW VISION ASSEMBLY CHURCH	Medina	146 Marks Rd., Valley City, OH 44280 ~(330) 242-3520	More Information	Medina County residents	Provides worship services and food pantry.						*	X	X	X				
NEXT STEP	Medina	3711 Pearl Rd., Medina, OH 44256 ~(330) 725-2919 ~www.jobstop.org	More Information	Youth age 14-21	Offers education and workforce development services to help youth who are seeking employment. Offers GED preparation courses for teens and young adults.						*			X	*	X		
OAKS FAMILY CARE CENTER	No restrictions	4196 Center Rd., Brunswick, OH 44212 ~(330) 220-7777 ~www.oaks-family-care.org	More Information	No restrictions	Provides education and emotional support to families with pregnancy, lifestyle and welfare issues. Offers workshops, seminars, support services, mentoring, group and one-on-one counseling.						*	X	X	X				
OAKS FAMILY CARE CENTER - LODI	No restrictions	119 Bank St., Lodi, OH 44254 ~(330) 948-7777 ~www.oaks-family-care.org	More Information	No restrictions	Provides education and emotional support to families with pregnancy, lifestyle and welfare issues. Offers workshops, seminars, support services, mentoring, group and one-on-one counseling.						*	X	X	X				

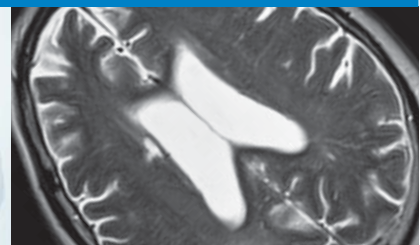
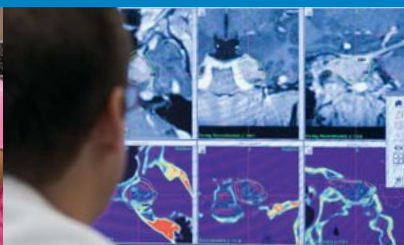
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OHIO STATE UNIVERSITY EXTENSION - MEDINA COUNTY	Medina	120 W. Washington St. Ste. 1L, Medina City, OH 44256 ~(330) 725-4911 ~www.medicina.osu.edu	More Information	Adults 18+, some programs target food stamp recipients	Offers research-based information and programs to meet the needs of Medina County residents. Offers programming related to health and nutrition, money management, parenting, lawn and garden, ponds, crops, livestock, business and economics. Additionally administers the 4-H Youth Development program for county.		*		X		*	X	X	X				
OUR LADY HELP OF CHRISTIANS	Medina	9608 Norwalk Rd., Litchfield, OH 44253 ~(330) 722-1180 ~www.olhc-parish.com	More Information	Must be a resident of Chippewa Lake Village, Chippewa on the Lake, Creston Village, Litchfield Twp., Lodi Village, Seville Village, Spencer Twp., Spencer Village, Grafton and Wellington	Provides worship services. Offers food pantry.						*	X	X	X				
OUR SAVIOUR LUTHERAN CHURCH (HINCKLEY)	Medina	1605 Center Rd., Hinckley, OH 44233 ~(330) 278-4114 ~www.oslc-hinckley.com	More Information	No restrictions	Provides worship services and offers daily walk-in food pantry to people in need.						*	X	X	X				
PLANNED PARENTHOOD OF NORTHEAST OHIO - MEDINA HEALTH CENTER	No restrictions	4018 Medina Rd., Ste. C, Medina Twp., OH 44256 ~(330) 723-1300 ~www.plannedparenthood.org/cleveland	More Information	Most services are offered to females only, some services for men and children	Offers birth control education and services. Provides all available methods of contraception including emergency contraception. Offers screening for a variety of conditions, treatment and education. Provides vaccinations against human papilloma virus (HPV), the virus that causes cervical cancer. General preventive health care is also offered. Not all services are available at all health centers. Does not fill outside prescriptions, but does issue and fill prescriptions by organization's providers. Can help with patient	*	*	X	X		*	X		X				
SALVATION ARMY - BRUNSWICK	Medina	2888 Nationwide Pkwy., Brunswick, OH 44212 ~(330) 273-9176	More Information	Serves needy residents who live in Brunswick City, Brunswick Hills, Valley City or Hinckley	Provides emergency financial assistance in rent assistance, utility bill payments and prescriptions when funds are available. Utility bill payment assistance available for electric and gas bills. Refers transients in need of emergency lodging to the Brunswick Police Department.						*	X	X	X				
SALVATION ARMY - SEVILLE UNIT	Medina	22 E. Main St., Seville, OH 44273 ~(330) 769-2435	More Information	Residents of Seville Village, Westfield Center and Westfield Twp..	Provides emergency vouchers to people who need help paying for gasoline expenses, prescriptions, medical bills or utility bill payments. Serves low-income families. Assistance available one time per household per fiscal year.						*	X	X	X				

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SALVATION ARMY - WADSWORTH	Medina	527 College St. Wadsworth City, OH 44281 ~(330) 335-2327 ~www.salvationarmywadsworth.org	More Information	Residents of Wadsworth City, Wadsworth Twp.. or Sharon Center	Provides basic needs assistance including food pantry, soup kitchen, utility bill payment assistance, rental and mortgage assistance, school supplies for children and prescription expense assistance. Offers holiday assistance including Coats for Kids, Christmas food baskets and toys for children under 18. Provides different education and youth programs.	*	*				*	X	X	X				
SALVATION ARMY CORPS COMMUNITY CENTER - MEDINA	Medina	425 West Liberty St., Medina City, OH 44256 ~(330) 722-6488 ~www.salvationarmy.org	More Information	Residents of Medina, Chippewa, Litchfield and Spencer	Provides social services and youth programs as well as emergency assistance. Some services may vary throughout the year due to available funds and donations.						*	X	X	X				
SHC / THE ARC	Medina	4283 Paradise Rd. Seville, OH 44273 ~(330) 722-1900 ~www.shc-medina.org	More Information	Medina County residents with mental and physical disabilities	Provides advocacy, community support, education, recreation, transportation subsidy and residential services. Provides materials, equipment loan, catalogs and toy lending library through the Resource Center. Serves as Medina County Chapter of The Arc.						*	X		X	*		X	
SOUTHWEST GENERAL HEALTH CENTER - BRUNSWICK MEDICAL CENTER	No restrictions	4065 Center Rd, Brunswick, OH 44212 ~(330) 558-0150 ~www.swgeneral.com	More Information	No restrictions	Provides general medical care including pediatrics, general physical examinations. Also provides women's health services.	*	*	X	X		*	X		X				
SPENCER VILLAGE OF - BOARD OF PUBLIC AFFAIRS	Medina	109 N. Main St., Spencer Village, OH 44275 ~(330) 648-2907	More Information	Serves Village of Spencer	Provides repair and maintenance of village streets, signs and traffic lighting.										*			X
ST. FRANCIS XAVIER CATHOLIC CHURCH	Medina	606 E. Washington St., Medina City, OH 44256 ~(330) 725-4968 ~www.stfrancisxavier.info	More Information	Residents of Medina City	Provides assistance for people in need from Medina City.						*	X	X	X				
ST. MARK LUTHERAN CHURCH	Medina	1330 N. Carpenter Rd., Brunswick, OH 44212 ~(330) 225-3110 ~www.stmarkbrunswick.org	More Information	Residents of Brunswick City and Brunswick Hills Twp.	Provides worship services and offers food pantry to people in need in the Brunswick Area.						*	X	X	X				
ST. MARTIN'S CATHOLIC CHURCH	Medina	1800 Station Rd., Valley City, OH 44280 ~(330) 483-3808 ~www.stmartincv.org	More Information	Serves parts of Valley City and Liverpool area	Offers worship services and an emergency food pantry to people not receiving food assistance from any other agencies or have run out of food stamps. Tries not to overlap service areas of other local pantries. Only available once per month per family.						*	X	X	X				

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ST. PAUL'S EPISCOPAL CHURCH (MEDINA)	Medina	317 E. Liberty St., Medina City, OH 44256 ~(330) 725-4131 ~www.stpauls-medina.org	More Information	Medina County residents	Provides worship service and food pantry through the Free Farmer's Market of Medina County.						*	X	X	X				
SUMMA WADSWORTH-RITTMAN HOSPITAL	No restrictions	195 Wadsworth Rd., Wadsworth, OH 44281 ~(330) 331-1000 ~www.summahealth.org/wadsworth	More Information	No restrictions	Provides primary and preventive medical care. Provides speech therapy. Provides referrals to assistance agencies for patients. Provides a Diabetes support group.	*	*	X	X		*	X	X	X				
UNITED WAY OF MEDINA COUNTY	Medina	2573 Medina Rd., Medina City, OH 44256 ~(330) 725-3926 ~www.unitedwaymedina.org	More Information	Medina County residents	Operates as a private sector agency that builds partnerships, conducts research into community needs, engages in fund raising, and budgets, plans, and allocates funds to various health and human service providers. Develops partnerships with agencies, businesses, government, foundations and others to improve services to the community and increase awareness of these services. Operates the Volunteer Center which connects volunteers to area organizations. Provides information about and referrals to health and human services in Medina County.						*	X						
UNIVERSITY HOSPITALS MEDINA HEALTH CENTER	Medina	4001 Carrick Dr. Medina, OH 44256 ~(330) 721-8577 ~uhhospitals.org	More Information	No restrictions	Offers medical services such as general medical health care, physical examinations, and care for illnesses. Persons receiving medical services become primary care clients of this center.	*	*	X	X									
UNIVERSITY HOSPITALS SHARON HEALTH CENTER	Medina	5133 Ridge Rd., Wadsworth, OH 44281 ~(866) 844-2273 ~uhhospitals.org	More Information	No restrictions	Offers medical services such as general medical health care, physical examinations, and care for illnesses. Persons receiving medical services become primary care clients of this center.	*	*	X	X									
VICTORY BAPTIST CHURCH	Medina	8343 Harris Rd., Lodi, OH 44254 ~(330) 948-8851 ~www.experiencevictory.com	More Information	No restrictions	Provides non-perishable food items by appointment to people in need. Provides up to a week's supply of food if available.						*	X	X	X				
WADSWORTH CITY OF - STREET DEPARTMENT	Medina	311 Broad St., Wadsworth City, OH 44281 ~(330) 335-2842 ~www.wadsworthcity.com/depts/streets/	More Information	Serves Wadsworth City	Provides general street maintenance of all street signs and city streets.										*			X
WADSWORTH CITY SCHOOL DISTRICT	Medina	360 College St., Wadsworth City, OH 44281 ~(330) 336-3571 ~www.wadsworth.k12.oh.us	More Information	Serves students who are residents of Wadsworth City, Wadsworth Twp. and parts of Guilford Twp. and Montville Twp. ages 3-22 years old or grades Pre-K thru 12	Offers public education for students in the Wadsworth City School District. Provides state lunch program, student transportation services and work permits for eligible students. Offers general guidance and career counseling, gifted and advanced placement courses and special education programs, placement and assessment.						*	X	X	X	*	X	X	

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WESTFIELD TOWNSHIP OF - ROADS DEPARTMENT	Medina	6699 Buffham Rd., Seville Village, OH 44273 ~(330) 350-1375 ~www.westfieldtownship.org	More Information	Serves Westfield Twp..	Handles maintenance for all township roads including snow removal, mowing, general road or pavement repair. Repairs street signs and street lights for township.										*			X
YORK TOWNSHIP OF - TOWNSHIP HALL	Medina	6609 Norwalk Rd., York Twp., OH 44256 ~(330) 722-0185 ~www.yorktwp.org	More Information	Serves York Twp..	Take reports or requests for maintenance of street signs, street lights and other street maintenance of township roads. All other maintenance requests are handled at the county level. Contracts services out to deal with street maintenance issues within township.										*			X
YORK UNITED METHODIST CHURCH	Medina	6566 Norwalk Rd., York Twp., OH 44256 ~(330) 725-8147 ~www.yorkumc.org	More Information	No restrictions	Provides a food pantry to people in need. Additionally provides worship services.						*	X	X	X				





**Medina Hospital
1000 E. Washington Street
Medina, Ohio 44256**

**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:
Medina Hospital # 34-0733166**

**Date Approved by
Authorized Governing Body: September 9, 2013**

**Authorized Governing Body: The 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 MEDINA 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. Description of Hospital

Medina Hospital, a Cleveland Clinic hospital, is a 150 staffed bed acute care facility offering advanced medical and surgical care, sophisticated technology, research and education. The hospital has specialties in cancer, cardiology, diabetes, neurology, orthopedics, pediatrics, pulmonary care, rehabilitation and women's health. Medina has a comprehensive Family Birthing Center with neonatology, is a Primary Stroke Center and has an Emergency Department.

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, including Medina Hospital, provided \$754 and \$693 million, respectively, in benefits to the communities they serve. The community benefit that Cleveland Clinic provides includes patient care provided on a charitable basis, research, education, Medicaid shortfall, subsidized health services and outreach programs. Cleveland Clinic's community benefit reports are available on our website at clevelandclinic.org/communitybenefit.

B. Hospital Mission

Medina Hospital was founded in 1944 to provide health care services to its community. Medina 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 Medina Hospital community is defined as the geographic area comprising 80% of inpatient volume. The Medina Hospital community consists of 11 zip codes in Medina County: 44254, 44235, 44215, 44256, 44281, 44212, 44275, 44233, 44273, 44253 and 44280.

III. How Implementation Strategy was Developed

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

Each year, senior leadership at Medina 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

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

C. Knowledge: Actively support the efforts of researchers to discover knowledge and educators to train the next generation of health care professionals and build an engaged workforce

V. Summary of the Community Health Needs Identified

Secondary data, key stakeholder interviews and focus group input were reviewed to identify and analyze the needs raised by each source. The top health needs of the Medina Hospital community are those that are supported both by secondary data and addressed by key stakeholders and focus groups.

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

A. Chronic Disease and Health Conditions

1. Heart Related Diseases
2. Cancer
3. Diabetes
4. Low Birth Weight

B. Wellness

C. Access to Health Services

D. Research

E. Education

F. Access to Community Services

G. Economic and Community Development

VI. Needs Hospital Will Address

A. Chronic Disease and Health Conditions:

1. Heart Related Diseases

Medina Hospital provides cardiac services, is a certified Stroke Center and has a Congestive Heart Failure Clinic. The hospital provides a wide range of clinical and wellness services to treat chronic heart-related diseases, including stroke, congestive heart failure and hypertension.

2. Cancer

Medina Hospital is certified by the American College of Surgeons Commission on Cancer and uses advanced diagnostic equipment, skilled physicians and experienced staff to provide cancer treatment, rehabilitation and support services for patients and families.

3. Diabetes

Medina Hospital's Health & Wellness Education program provides outpatient care and community wellness education programs to patients and community members on diabetes and disease management. The hospital also treats patients suffering from diabetes and any diabetic complications on an inpatient and outpatient basis.

4. Low Birth Weight

Medina Hospital offers clinical, wellness and education services relating to pediatric and women's health. The hospital provides a comprehensive Family Birthing Center supported by staff neonatologists. Medina Hospital works with Hillcrest Hospital, another Cleveland Clinic hospital, to treat pediatric patients in need of more specialized care, including care affiliated with low birth weight babies.

B. Wellness

Medina Hospital offers outreach programs and community health talks focused on educating the community on healthy behavior choices including exercise, healthcare navigation, stress management, nutrition, and smoking cessation to promote health and wellness, increase access to healthcare resources, and reduce disease burden. In addition, Medina Hospital collaborates with local schools and businesses to implement programs to decrease childhood and adult obesity.

C. Access to Health Services

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

Medina 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.

Medina Hospital has rolled out a split-flow model for its Emergency Department shortening the time to physicians and overall length of stay and placing patients in areas devoted to their unique needs to improve patient satisfaction and outcomes.

D. Research

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

E. Education

Medina Hospital provides physician, nurse and allied health residency and other education opportunities and is affiliated with nursing and allied health schools. The hospital also provides community education programs on a variety of topics including wellness, parenting, nutrition and safety.

VII. Needs Hospital Will Not Address

Medina Hospital cannot directly address certain community health needs identified in the CHNA that do not relate directly to Medina Hospital's mission to deliver health care. These are needs that governmental or other nonprofit agencies have the more appropriate expertise and resources necessary to address. Although Medina Hospital cannot address these needs directly, it can and does support governmental and other agencies to help with these needs.

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

Medina 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 Medina Hospital. Therefore, the hospital will not address this need in its implementation strategy.

Although it cannot directly address this need, Medina 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, readily accessible transportation and grocery stores, and better employment, was identified as a need in the CHNA.

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

In addition, Medina Hospital employs over 954 physicians and other caregivers and provides an overall economic benefit to the community.