



University Hospitals

2020-2022 Community Health Implementation Strategy

UH Conneaut Medical Center
UH Geneva Medical Center
Ashtabula County, Ohio



Table of Contents

| | |
|---|----|
| Board Adoption | 2 |
| Community Health Implementation Strategy Availability | 2 |
| Written Comments | 2 |
| Introduction | 3 |
| Hospital Mission Statement | 4 |
| Community Served by Hospitals | 4 |
| Alignment with Local and State Standards | 4 |
| Community Partners | 4 |
| 2019 Community Health Needs Assessment (CHNA) Trend Summary Table | 5 |
| Priority Health Needs | 7 |
| Strategies to Address Health Needs | 7 |
| Significant Health Needs Not Being Addressed by the Hospital | 16 |
| Community Collaborators | 16 |
| Qualifications of Consulting Company | 17 |
| Contact Information | 17 |
| Appendix A: 2019-2021 Ashtabula County Community Health Improvement Plan Strategies | 18 |

Adoption by the Board

University Hospitals adopted the UH Conneaut and Geneva Medical Centers Community Health Implementation Strategy on March 31, 2020.

Community Health Implementation Strategy Availability

The Implementation Strategy can be found on University Hospitals' website at www.UHhospitals.org/CHNA-IS or a hard copy can be mailed upon request at CommunityBenefit@UHhospitals.org.

Written Comments

Individuals are encouraged to submit written comments, questions or other feedback about the UH Conneaut-Geneva Medical Center Implementation Strategy to CommunityBenefit@UHhospitals.org. Please make sure to include the name of the UH facility that you are commenting about and, if possible, a reference to the appropriate section within the Implementation Strategy.

Introduction

In 2019, University Hospitals Conneaut Medical Center and Geneva Medical Center (the “Hospitals”) conducted a joint community health needs assessment (a “CHNA”) compliant with the requirements of Treas. Reg. §1.501(r) (“Section 501(r)”) and Ohio Revised Code (“ORC”) 3701.981. The 2019 CHNA served as the foundation for developing an Implementation Strategy (“IS”) to address those needs that, (a) the Hospitals determine they are able to meet in whole or in part; (b) are otherwise part of UH’s mission; and (c) are not met (or are not adequately met) by other programs and services in the county. The IS identifies the means through which the Hospitals plan to address a number of the needs that are consistent with the Hospitals’ charitable mission as part of their community benefit programs. Likewise, the Hospitals are addressing some of these needs simply by providing care to all, regardless of ability to pay, every day. The Hospitals anticipate that the strategies may change and therefore, a flexible approach is best suited for the development of its response to the 2019 CHNA. For example, certain community health needs may become more pronounced and require changes to the initiatives identified by the Hospitals in the IS. More specifically, since this IS was done in conjunction with the 2019-2021 Ashtabula County Community Health Improvement Plan (CHIP), other community organizations will be addressing certain needs. The full Ashtabula County CHIP can be found at <http://www.hcno.org/community-services/community-health-assessments/> and a list of the Ashtabula County CHIP strategies can be found in Appendix A of this report.

In addition, the Hospitals worked together to align both their CHNA and IS with state plans. Ohio state law (ORC 3701.981) mandates that all hospitals must collaborate with their local health departments on community health assessments (a “CHA”) and community health improvement plans (a “CHIP”). Additionally, local hospitals must align with Ohio’s State Health Assessment (a “SHA”) and State Health Improvement Plan (a “SHIP”). This requires alignment of the CHNA and IS process timeline, indicators, and strategies. This local alignment must take place by October 2020.

Note: This symbol  will be used throughout the report when a priority, indicator or strategy directly aligns with the 2017-2019 SHIP.



This aligned approach has resulted in less duplication, increased collaboration and sharing of resources. This report serves as the 2020-2022 UH Conneaut and Geneva Medical Centers Community Health Implementation Strategy which aligns with the 2019-2021 Ashtabula County Community Health Improvement Plan and meets the state of Ohio’s October 1, 2020 deadline.

Per requirements set forth in Section 501(r), a collaborating hospital facility meets the requirements for a joint implementation strategy, if the strategy (i) is clearly identified as applying to the hospital facility; (ii) clearly identifies the hospital facility’s particular role and responsibilities in taking the actions described in the implementation strategy and the resources the hospital facility plans to commit to such actions; and (iii) Includes a summary or other tool that helps the reader easily locate those portions of the joint implementation strategy that relate to the hospital facility.¹ This IS meets all these requirements and was developed to more clearly delineate the commitments made by University Hospitals to the overall community health improvement effort underway in Ashtabula County.

The Ashtabula County Health Department, on behalf of the Ashtabula County Health Needs Assessment Committee (includes UH Conneaut-Geneva Medical Centers), hired the Hospital Council of Northwest Ohio (HCNO) to conduct the community health planning process which influenced the strategies outlined in this report and the development of the aligned Ashtabula County Community Health Improvement Plan (“CHIP”). This report more clearly delineates the commitments made by UH Conneaut-Geneva Medical Centers.

¹ 501r-3(c)(4)

The Hospitals are working with other partners in Ashtabula county to address the following priorities which were identified in the 2019 UH Conneaut-Geneva Medical Centers CHNA:

1. Chronic disease 
2. Mental health and addiction 

Additionally, UH Conneaut and Geneva Medical Centers are working collaboratively with other partners to address healthcare system and access, which was identified as a cross-cutting factor undergirding both priorities.

Hospital Mission Statement

As wholly owned subsidiaries of University Hospitals, UH Conneaut and Geneva Medical Centers are committed to supporting the UH mission, “To Heal. To Teach. To Discover.” (the “Mission”), by providing a wide range of community benefits including clinical services, medical education and research. UH is an integrated delivery system and thus can provide benefits by coordinating within and among various entities (“UH System”).

Community Served by the Hospital

The community has been defined as Ashtabula County. Most (92%) of UH Conneaut Medical Center’s discharges and (74%) of UH Geneva Medical Center’s discharges were residents of Ashtabula County. In addition, University Hospitals collaborates with multiple stakeholders, most of which provide services at the county-level. For these two reasons, the county was defined as the community served by the hospital.

Alignment with Local and State Standards

Community Partners

The IS was done in collaboration with various agencies and service-providers within Ashtabula County. From June to September 2019, the Ashtabula County Health Needs Assessment Committee reviewed many data sources concerning the health and social challenges that Ashtabula County residents are facing. They determined priority issues which, if addressed, could improve future outcomes; determined gaps in current programming and policies; examined best practices and solutions; and determined specific strategies to address identified priority issues.

Ashtabula County Health Needs Assessment Committee Members:





Ashtabula County Health Department
Ashtabula City Health Department
Conneaut City Health Department
Ashtabula County Children Services
Ashtabula County Commissioners
Ashtabula County Community Action Agency
Ashtabula County Family & Children's First Council
Ashtabula County Job & Family Services
Ashtabula County Medical Center
Ashtabula County Mental Health Recovery Board
Ashtabula County Regional Home Health Services
Ashtabula County YMCA

Catholic Charities of Ashtabula County
Community Counseling Center of Ashtabula County
Country Neighbor Program
Edgewood Nazarene Church
Kent State Ashtabula
Lake Area Recovery Center
Ohio State University Extension-Ashtabula County
Signature Health/Family Planning Association of Northeast Ohio
The Center for Health Affairs
University Hospitals Conneaut Medical Center
University Hospitals Geneva Medical Center

2019 CHNA Trends Summary Table

The 2019 UH Geneva and Conneaut Medical Center CHNA is a 143-page report that consists of county-level primary and secondary data for Ashtabula County. The following data are trends from the CHNA that support the priorities and strategies found in this IS. The full CHNA report can be found at: www.UHhospitals.org/CHNA-IS.

Trend Summary


| Variables | Ashtabula County 2011 | Ashtabula County 2016 | Ashtabula County 2019 | Ohio 2017 | U.S. 2017 |
|--|-----------------------|-----------------------|-----------------------|------------------|------------------|
| Health Care Coverage | | | | | |
| Uninsured | 17% | 8% | 10% | 8% | 11% |
| Access and Utilization | | | | | |
| Had at least one person they thought of as their personal doctor or health care provider  | 74% | 83% | 83% | 81% | 77% |
| Visited a doctor for a routine checkup in the past year  | 48% | 64% | 69% | 72% | 70% |
| Preventive Medicine | | | | | |
| Had a pneumonia vaccination (age 65 and over) | 62% | 69% | 69% | 76% | 75% |
| Had a flu vaccine in the past year (age 65 and over) | N/A | 70% | 67% | 63% | 61% |
| Had a shingles or Zoster vaccination in lifetime | N/A | 15% | 25% | 29% | 29% |
| Women's Health | | | | | |
| Had a mammogram within the past two years (age 40 and older) | 69% | 70% | 73% | 74%* | 73%* |
| Had a Pap smear within the past three years (age 21-65) | N/A | 63% [±] | 66% | 82%* | 80%* |
| Men's Health | | | | | |
| Had a digital rectal exam within the past year | 24% | 16% | 14% | N/A | N/A |
| Oral Health | | | | | |
| Adults who had visited the dentist in the past year | 61% | 60% | 58% | 68%* | 66%* |
| Adults who had one or more permanent teeth removed | N/A | 56% | 58% | 45%* | 43%* |
| Adults 65 years and older who had all their permanent teeth removed | N/A | 17% | 12% | 17%* | 14%* |
| Health Status Perceptions | | | | | |
| Rated health as excellent or very good | 48% | 43% | 42% | 49% | 51% |
| Rated health as fair or poor | 19% | 22% | 14% | 19% | 18% |
| Rated physical health as not good on four or more days (in the past 30 days) | 25% | 31% | 24% | 23% | 22% |
| Average days that physical health not good in past month  | N/A | 5.8 | 3.8 | 4.0 [‡] | 3.7 [‡] |
| Rated mental health as not good on four or more days (in the past 30 days) | 29% | 40% | 36% | 26% | 24% |
| Average days that mental health not good in past month  | N/A | 7.0 | 6.1 | 4.3 [‡] | 3.8 [‡] |
| Poor physical or mental health kept them from doing usual activities, such as self-care, work, or recreation (on at least one day during the past 30 days) | 25% | 30% | 39% | 24% | 23% |






N/A - Not Available

*2016 BRFSS

‡2016 BRFSS data as compiled by 2019 County Health Rankings

±Pap smear was reported for women ages 19 and over

 Indicates alignment with the Ohio State Health Assessment

| Variables | Ashtabula County 2011 | Ashtabula County 2016 | Ashtabula County 2019 | Ohio 2017 | U.S. 2017 |
|---|-----------------------|-----------------------|-----------------------|-----------|-----------|
| Weight Status | | | | | |
| Obese | 32% | 43% | 42% | 34% | 31% |
| Overweight | 36% | 30% | 33% | 34% | 35% |
| Tobacco Use | | | | | |
| Current smoker (currently smoke some or all days)  | 22% | 21% | 21% | 21% | 17% |
| Former smoker (smoked 100 cigarettes in lifetime & now do not smoke) | 30% | 30% | 28% | 24% | 25% |
| Alcohol Consumption | | | | | |
| Current Drinker (drank alcohol at least once in the past month) | 51% | 49% | 74% | 54% | 55% |
| Binge drinker (defined as consuming more than four [women] or five [men] alcoholic beverages on a single occasion in the past 30 days)  | 21% | 24% | 23% | 19% | 17% |
| Drove after having perhaps too much alcohol to drink (in the past month) | N/A | N/A | 6% | 4%* | 4%* |
| Drug Use | | | | | |
| Adults who used recreational marijuana or hashish in the past 6 months | 7% | 8% | 7% | N/A | N/A |
| Adults who misused prescription drugs in the past 6 months | 8% | 4% | 3% | N/A | N/A |
| Adults who used recreational drugs in the past 6 months | 1% | 1% | 3% | N/A | N/A |
| Sexual Behavior | | | | | |
| Had more than one sexual partner in the past year | 5% | 9% | 6% | N/A | N/A |
| Mental Health | | | | | |
| Considered attempting suicide in the past year | 8% | 7% | 6% | N/A | N/A |
| Felt so sad or hopeless almost every day for two weeks or more in a row | 15% | 15% | 15% | N/A | N/A |
| Cardiovascular Disease | | | | | |
| Had angina or coronary heart disease  | N/A | 5% | 3% | 5% | 4% |
| Had a heart attack  | 7% | 5% | 5% | 6% | 4% |
| Had a stroke | 6% | 4% | 3% | 4% | 3% |
| Had high blood pressure  | 31% | 37% | 42% | 35% | 32% |
| Had high blood cholesterol | 34% | 37% | 40% | 33% | 33% |
| Had blood cholesterol checked within past 5 years | N/A | 78% | 80% | 85% | 86% |

N/A - Not available



*2016 BRFSS Data

 Indicates alignment with the Ohio State Health Assessment (SHA)

Priority Health Needs

Reminder: This symbol  will be used throughout the report when a priority, indicator or strategy directly aligns with the 2017-2019 SHIP.

Priorities:

1. Chronic disease 
2. Mental health and addiction 

Cross-Cutting Factors:

The Ohio SHIP contains strategies that are referred to as cross-cutting. This means that cross-cutting strategies have an impact on all selected priority areas. Certain priorities identified in the 2019 UH Conneaut-Geneva Medical Centers CHNA also fit within the following cross-cutting area for which the Hospitals will be implementing strategies in this plan:

1. Healthcare system and access 

Strategies to Address Health Needs

Mobilizing for Action through Planning and Partnerships (MAPP)

The planning and strategic development process was completed using the National Association of County and City Health Officials' (NACCHO) MAPP process. MAPP is a national, community-driven planning process for improving community health. This process was facilitated by HCNO in collaboration with various local agencies representing a variety of sectors. The MAPP framework includes six phases which are listed below:

1. Organizing for success and partnership development
2. Visioning
3. The four assessments
4. Identifying strategic issues
5. Formulate goals and strategies
6. Action cycle

The MAPP process includes four assessments: community themes and strengths, forces of change, local public health system assessment and the community health status assessment. These four assessments were used by the Ashtabula County Health Needs Assessment Committee to prioritize specific health issues and population groups which are the foundation of this plan. Additionally, input from the UH Conneaut and Geneva Medical Centers board of directors (August 7, 2019 meeting) was used to further determine the Hospitals' specific tactics. Lastly, the Hospitals' president approved the strategies outlined in this report.

The strategies listed on the following pages are done in alignment with the Ashtabula County Community Health Improvement Plan. They reflect the specific strategies that UH Conneaut and Geneva Medical Centers will implement to address the identified priorities and achieve the anticipated county level outcomes. The resources being provided include staff time and expertise, health screening supplies and equipment, publicity for various events and other contributions as outlined in the following section.

University Hospitals Conneaut and Geneva Medical Centers

CHNA Priority: Mental Health and Addiction

Strategy 1: School-based alcohol/other drug prevention programs

Goal: Prevent drug dependence/abuse.

Objective: By October 1, 2022 all school districts will have at least one school-based alcohol/other drug prevention program.

Action Steps:

Year 1:

- UH Conneaut and Geneva Medical Centers will continue to dedicate staff to implement the Botvin Life Skills Training program in grades 3-10 in all Ashtabula County school districts. (Track number of participants.)
- Work with county partners to develop a marketing plan to recruit instructors and/or volunteers to assist in implementing/teaching the program. (Track number of volunteers.)

Year 2:

- Continue efforts from Year 1.
- Determine the feasibility of expanding the program to additional classrooms.
- Secure funding for program (if applicable).

Year 3:

- Continue efforts from Years 1 and 2.
- Expand program service area where necessary.

Anticipated measurable outcome(s):

- Decrease in the number of drug-related incidents at schools participating in the program (benchmark TBD).

Indicator(s) used to measure outcomes:

- Percent of persons age 12+ years who report part-year illicit drug dependence or abuse (Mental Health and Recovery Services Board survey)

Collaboration and Partnerships: Ashtabula County Mental Health and Recovery Services Board (MHR SB), Ashtabula County Prevention Coalition, Ashtabula County Suicide Prevention Coalition, Community Counseling Center, Local Civic Organizations

University Hospitals Conneaut and Geneva Medical Centers

CHNA Priority: Mental Health and Addiction 

Strategy 1: Safe disposal of prescription drugs

Goal: Decrease drug dependence or abuse.

Objective: Host at least one drug take-back day.

Action Steps:

Year 1:

- Increase awareness of prescription drug abuse and the locations of existing prescription drug collection boxes at UH Conneaut and Geneva Medical Centers by placing brochures throughout the hospitals. (Track number of locations.)
- Contact UH Conneaut & Geneva Medical Center physicians, local practitioners and pharmacies to provide information on prescription drug abuse and collection locations. (Track number of locations.)
- Work with local law enforcement to sponsor and host prescription drug take-back days. (Track number of events.)
- Promote the use of dissolvable prescription bags i.e. Deterra and Dispose Rx at every UH Conneaut & Geneva Medical Center community health event. (Track number of materials distributed and number of events.)
- Provide education regarding safe disposal at every UH Conneaut and Geneva Medical Center community health event. (Track number of events and participants.)

Year 2:

- Work with Ashtabula County partners to host at least one prescription drug take-back-day annually.
- Expand the number of local practitioners and pharmacies providing information on prescription drug abuse and collection locations in Ashtabula County.

Year 3: Continue efforts from Years 1 and 2.

*** Anticipated measurable outcome(s):**

- Reduce rate of Ashtabula County adults who misused prescription medication in the past six months (baseline: 3% in the 2019 UH Conneaut-Geneva Medical Centers CHNA).
- Reduce the age-adjusted unintentional drug overdose death rate in Ashtabula County (baseline: 28.8 per 100,000, 2012-2017, in the 2019 UH Conneaut-Geneva Medical Centers CHNA).

Indicator(s) used to measure progress:

- Percent of adults who misused prescription medication in the past 6 months (HCNO household survey)
- Drug overdose age-adjusted death rate in Ashtabula County (Ohio Public Health Data Warehouse)

Collaboration and Partnerships: Ashtabula County Mental Health Recovery Board, Substance Abuse Leadership Team (SALT), Ashtabula County Prevention Coalition, Sheriff's Department, Wal-Mart

** Outcomes are based on a variety of tactics occurring among the Ashtabula County community health improvement partners to achieve the anticipated results at the county level.*

University Hospitals Conneaut and Geneva Medical Centers

CHNA Priority: Chronic Disease

Strategy 1: Prescriptions for Physical Activity

Goal: Reduce obesity.

Objective: Implement an exercise prescription program in two additional primary care offices by October 1, 2022.

Action Steps:

Year 1:

- Determine the baseline number of health care providers and primary care physicians at UH Conneaut and UH Geneva Medical Centers that currently provide exercise prescriptions for physical activity to their patients. Other participating organizations will also do an inventory. (Establish baseline number.)
- Continue to partner with local organizations such as the YMCA, the parks and recreation district or the Metro Parks to determine referral options and provide support for the exercise prescriptions. (Track the number of committed referral partners.)

Year 2:

- Continue efforts from Year 1.
- Pilot an exercise prescription program at one additional primary care office at UH Conneaut or UH Geneva Medical Center with accompanying referral options and evaluation measures.
- With other partners, identify additional settings, such as a medical specialty office (psychiatry), schools, or local businesses to provide physical activity and exercise prescriptions.

Year 3:

- Continue efforts from Years 1 and 2.
- Implement an exercise prescription program into one additional location with accompanying referral options and evaluation measures.

*** Anticipated measurable outcome(s):**

- Reduce the Ashtabula County adult diabetes rate (baseline: 13% in the 2019 UH Conneaut-Geneva Medical Centers CHNA).
- Reduce the Ashtabula County adult obesity rate (baseline: 42% in the 2019 UH Conneaut-Geneva Medical Centers CHNA).

Indicator(s) used to measure outcomes:

- Percent of Ashtabula County adults who have been told by a health professional that they have diabetes (HCNO household survey)
- Percent of Ashtabula County adults that report Body Mass Index scores greater than or equal to 30 (HCNO household survey)
- Percent of Ashtabula County adults aged 20+ years reporting no leisure time physical activity (County Health Rankings)

Collaboration and Partnerships: YMCA, Metro Parks, Department of Parks and Recreation, Ashtabula County Health Department, Signature Health/Family Planning Association of Northeast Ohio, Intervention and Prevention of Ongoing Diseases (IPOD) committee

** Outcomes are based on a variety of tactics occurring among the Ashtabula County community health improvement partners to achieve the anticipated results at the county level.*

University Hospitals Conneaut and Geneva Medical Centers

CHNA Priority: Chronic Disease

Strategy 2: Hypertension screening and follow up

Goal: Prevent heart disease.

Objective: Provide at least two hypertension screening events annually.

Action Steps:

Year 1:

- Along with other Ashtabula County partners, UH Conneaut and Geneva Medical Centers will promote and offer free screening events within the county, such as health fairs, hospital screening events, etc. (Track number of participants, number of events, positive results and type of screenings.)
- Target screenings towards those who live in or serve economically disadvantaged populations. (Track zip codes.)

Year 2:

- Continue efforts from Year 1.
- Increase awareness of hypertension screening, treatment and follow up. (Track new locations and/or publicity.)
- Increase the number of locations providing free cost screening events.(Track number of locations.)

Year 3: Continue efforts of Years 1 and 2

*** Anticipated measurable outcome(s):**

- Reduce (or maintain) the percent of adults ever diagnosed with hypertension (baseline: 42% in the 2019 UH Conneaut-Geneva Medical Centers CHNA).

Indicator(s) used to measure progress:

- Percent of Ashtabula County adults ever diagnosed with hypertension (HCNO household survey)
- Incidence of high blood pressure in Ashtabula county (Ohio Hospital Association hospital discharge data)

Collaboration and Partnerships: Ashtabula County Health Department, Ashtabula County Medical Center (ACMC), fire department(s), Intervention and Prevention of Ongoing Diseases (IPOD) committee

** Outcomes are based on a variety of tactics occurring among the Ashtabula County community health improvement partners to achieve the anticipated results at the county level*

University Hospitals Conneaut and Geneva Medical Centers

CHNA Priority: Chronic Disease

Strategy 3: Diabetes prevention program (DPP) and Prediabetes screening and referral

Goal: Prevent diabetes.

Objective: Conduct one DPP class annually. Provide diabetes screening to 300 people annually.

Action Steps:

- Year 1:**
- Along with other Ashtabula County partners, UH Conneaut and Geneva Medical Centers will promote and provide free health screening events within the county, such as health fairs, hospital screening events, etc. (Track number of events, number of participants, positive results and type of screenings.)
 - UH Conneaut and Geneva Medical Centers will continue to offer the DPP.
 - Target screenings towards those who live in or serve economically disadvantaged populations. (Track participant zip codes.)

- Year 2:**
- Continue efforts from Year 1.
 - Increase awareness of diabetes screening, treatment and follow up. (Track the number of high A1C results and retention for participants in the DPP and Diabetes Education program).
 - Increase the number of locations providing free screening events. (Track new locations.)



Year 3: Continue efforts of Years 1 and 2.

- * Anticipated measurable outcome(s):**
- Reduce (or maintain) the percentage of Ashtabula County adults who have been told by a health professional that they have diabetes (baseline: 13% in the 2019 UH Conneaut-Geneva Medical Centers CHNA).
 - Reduce (or maintain) the percentage of Ashtabula County adults who have been told by a health professional that they have prediabetes (baseline: 6% in the 2019 UH Conneaut-Geneva Medical Centers CHNA).

- Indicator(s) used to measure progress:**
- Percent of Ashtabula County adults who have been told by a health professional that they have diabetes (HCNO household survey)
 - Percent of Ashtabula County adults who have been told by a health professional that they have prediabetes (HCNO household survey)

Collaboration and Partnerships: Ashtabula County Health Department, Ashtabula County Medical Center (ACMC), Signature Health/Family Planning Association of Northeast Ohio, YMCA, Ashtabula County Health Department

** Outcomes are based on a variety of tactics occurring among the Ashtabula County community health improvement partners to achieve the anticipated results at the county level.*

| |
|--|
| University Hospitals Conneaut and Geneva Medical Centers |
| CHNA Priority: Healthcare System and Access |
| Strategy 1: Improve access to comprehensive primary care  |
| Goal: Improve access to primary care. |
| Objective: By December 2022, connect 40% of Ashtabula County adults who attend monthly health screenings with a primary care provider. |
| Action Steps: |
| <p>Year 1:</p> <ul style="list-style-type: none"> • UH Conneaut and Geneva Medical Centers will continue monthly biometric screenings and refer 25% of adults who attend screenings to a primary care provider (if they do not have one). • Develop a comprehensive plan to improve access to primary care through the addition of two Advanced Practice Providers in Ashtabula and Conneaut. <p>Year 2:</p> <ul style="list-style-type: none"> • Continue monthly biometric screenings and refer 30% of adults who attend screenings with a primary care provider (if they do not have one). <p>Year 3:</p> <ul style="list-style-type: none"> • Continue monthly biometric screenings and refer 40% of adults who attend screenings with a primary care provider (if they do not have one). |
| Anticipated Measurable Outcome(s): |
| <ul style="list-style-type: none"> • Decrease the percentage of Ashtabula County adults ages 19 years and older who don't have one or more persons they think of as their personal healthcare provider (benchmark: TBD). • Decrease the percentage of persons living in Ashtabula County that had at least one person they thought of as their personal healthcare provider (baseline: 83% in the 2019 UH Conneaut-Geneva Medical Centers CHNA). |
| Indicator(s) used to measure progress: |
| <ul style="list-style-type: none"> • Percent of persons living in Ashtabula County that had at least one person they thought of as their personal healthcare provider (HCNO household survey and BRFSS)  |
| Collaboration and Partnerships: Internal UH physician services |

University Hospitals Conneaut and Geneva Medical Centers

CHNA Priority: Healthcare System and Access

Strategy 2: Screening for social determinants of health (SDOH) using a standardized tool

Goal: Improve health equity.

Objective: Implement a SDOH screening process in two different locations by October 1, 2022.

Action Steps:

Year 1:

- UH Conneaut and Geneva Medical Centers will collaborate with other Ashtabula County partners to research social determinants of health (SDOH) screenings.
- Committee will collect baseline data on the number of schools, primary care offices, federally qualified health centers, rural health clinics, home visiting programs or other entities that are screening for SDOH.
- Determine what type(s) of SDOH screening tools currently exist in the county.

Year 2:

- Committee will determine the feasibility of implementing the SDOH screening tool.
- Determine what tool should be used consistently across all organizations for measurement, evaluation and comparison purposes.

Year 3:

- Continue efforts of Year 1.
- Committee will pilot a community-wide screening tool for SDOH in at least one location with appropriate evaluation measures.

*** Anticipated measurable outcome(s):**

- Use of a standardized tool to screen for SDOH that is used by multiple partners in Ashtabula County.

Indicator(s) used to measure progress:

- Identification of the assessment tool
- Number of partners doing screenings
- Number of screenings conducted

Collaboration and Partnerships: Ashtabula County Mental Health Recovery Board, Community Counseling Center of Ashtabula County, Signature Health/Family Planning Association of Northeast Ohio, Ashtabula County Medical Center (ACMC)

** Outcomes are based on a variety of tactics occurring among the Ashtabula County community health improvement partners to achieve the anticipated results at the county level.*

University Hospitals Conneaut and Geneva Medical Centers

CHNA Priority: Healthcare System and Access

Strategy 3: Community health workers (including workers in community-based settings) to address social determinants of health

Goal: Increase access to health care in Ashtabula County.

Objective: By December 2022, expand the Hospital to Home (H2H) outreach service to include patients in the primary care setting.

Action Steps:

Year 1:

- UH Conneaut and Geneva Medical Centers will explore the feasibility of expanding the Hospital to Home (H2H) nurse outreach service for patients suffering from diabetes, chronic obstructive pulmonary disease (COPD), and congestive heart failure (CHF) to include the UH Geauga pilot referral program for Ashtabula county residents. Patients are identified through inpatient admissions.
- Increase patient acceptance rate into the program by 10% for inpatients.

Year 2:

- Expand the service to include two primary care practices to aid in patient education regarding wellness screenings and management of co-morbidities to include COPD, CHF, diabetes and uncontrolled high blood pressure.
- Increase patient acceptance rate by 7% for inpatients.

Year 3:

- Expand H2H service to include two primary care practices.
- Increase patient acceptance rate by 5% for inpatients.

Anticipated measurable outcome(s):

- Reduction in readmission for participants.
- Increase in the percentage of patients participating in program (baseline: 50% in 2019).
- Improved patient experience.

Indicator(s) used to measure progress:

- Increase provider availability of community health workers: ratio of population to community health workers (UH internal records)
- Performance improvement data (UH internal records)
- Patient experience survey (UH internal records)

Collaboration and Partnerships: Internal UH physician services

Significant Health Needs Not Being Addressed by the Hospital

UH Conneaut and Geneva Medical Centers are implementing strategies in collaboration with other partners in Ashtabula County for both priorities identified in the 2019 UH Conneaut-Geneva Medical Centers CHNA, as well as healthcare system and access, a cross-cutting factor undergirding both priorities.

However the following strategies will not be directly addressed by the Hospitals as part of their Community Health Implementation Strategy because other county partners have agreed to take the lead based on their core expertise, prior experience and/or availability of existing resources (see full list of Ashtabula County's strategies in Appendix A). Additionally, some strategies are not included in this IS because they do not meet the IRS definition of a non-profit hospital "community benefit" but are still addressed by the UH System. More specifically, they are required or expected of all hospitals based on licensure or accreditation, are a routine standard of clinical care or primarily benefit the organization rather than the community. This includes things such as offering vaccines, linking patients to tobacco cessation services and having a smoke-free workplace policy. Lastly community outreach staff from UH Conneaut and UH Geneva Medical Center remain engaged as thought-leaders on all the strategies as needed.

Chronic disease

- Implementation of a healthy choices campaign
- School-based nutrition education programs and nutrition and physical activity interventions in preschool /child care
- Physically active classrooms

Mental health and addiction

- Naloxone access
- Local suicide prevention coalitions to support implementation of evidence-based strategies (Ohio Suicide Prevention Foundation)
- Trauma-informed care
- School-based social and emotional instruction

Cross-cutting factors

- Links to cessation support
- Community-wide physical activity campaign (including green space and parks)
- Intervention and Prevention of Ongoing Diseases (IPOD) resource guide
- County-wide vaccination campaign

Community Collaborators

This IS was commissioned by University Hospitals in collaboration with the 2019-2021 Ashtabula County Community Health Improvement Plan process and the associated county partners; see Community Health Needs Assessment Committee listed on page 4 of this report.

Qualifications of Consulting Company

The community health improvement process was facilitated by Tessa Elliott, Community Health Improvement Coordinator at the Hospital Council of Northwest Ohio (HCNO). HCNO is a 501(c)(3) non-profit regional hospital association founded in 1972 that represents and advocates on behalf of its member hospitals and health systems and provides collaborative opportunities to enhance the health status of the citizens of Northwest Ohio. HCNO is respected as a neutral forum for community health improvement. HCNO has a track record of addressing health issues and health disparities collaboratively throughout northwest Ohio, and the state. Local and regional initiatives include: county-wide health assessments, community health improvement planning, strategic planning, disaster preparedness planning, Northwest Ohio Regional Trauma Registry, Healthcare Heroes Recognition Program and the Northwest Ohio Pathways HUB.

The Community Health Improvement division of HCNO has been conducting community health assessments (CHAs), community health improvement plans (CHIPs), and facilitating outcome focused multi-sectorial collaborations since 1999. HCNO has completed more than 90 CHAs in 44 counties. The model used by HCNO can be replicated in any type of county and therefore has been successful at the local and regional level, as well as for urban, suburban and rural communities.

The HCNO Community Health Improvement Division has six full time staff members with Master's Degrees in Public Health (MPH), who are dedicated solely to CHAs, CHIPs and other community health improvement initiatives. HCNO also works regularly with professors at the University of Toledo, along with multiple graduate assistants to form a very experienced and accomplished team. The HCNO team has presented at multiple national, state and local conferences including the Centers for Disease Control and Prevention's Behavioral Risk Factor Surveillance System (BRFSS) conference, the Association of Community Health Improvement (ACHI) national conference, the Ohio Hospital Association (OHA) state conference, the Ohio Association of Health Commissioners (AOHC) and others.

The aligned 2020-2022 UH Conneaut and Geneva Medical Center IS was compiled and written by Danielle Price, Director, Community Health Engagement in the department of Government and Community Relations at University Hospitals. She oversees state and federal community benefit compliance for all UH medical centers. Ms. Price has a Bachelor's degree from the Wharton School of Business, University of Pennsylvania and a Master of Science in Social Administration (MSSA) degree from the Mandel School of Applied Social Science at Case Western Reserve University.

Contact

For more information about the Implementation Plan, please contact:

Danielle Price
Director, Community Health Engagement
Government & Community Relations
University Hospitals
11100 Euclid Avenue, MPV 6003
Cleveland, Ohio 44106
216.844.2391
Danielle.Price3@UHhospitals.org

Priority #1: Mental Health and Addiction

Strategy 2: Safe disposal of prescription drugs

Goal: Decrease drug dependence or abuse.

Objective: Host at least one prescription drug take-back day annually.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/ Agency |
|---|-----------------|---------------------|--|---|
| <p>Year 1: Increase awareness of prescription drug abuse and the locations of existing prescription drug collection boxes. Encourage local practitioners and pharmacies to provide information on prescription drug abuse and collection locations.</p> <p>Work with local law enforcement to sponsor and host prescription drug take-back days.</p> <p>Promote the use of dissolvable prescription bags (i.e. Deterra) and Dispose Rx. Provide education regarding safe disposal.</p> | October 1, 2020 | Adult, youth | Prescription medication abuse: Percent of adults who misused prescription medication in the past 6 months (baseline: 3%, 2019 CHA) | <p>Ashtabula County Mental Health Recovery Board</p> <p>Substance Abuse Leadership Team (SALT)</p> <p>Ashtabula County Prevention Coalition</p> |
| <p>Year 2: Host at least one prescription drug take-back-day annually.</p> <p>Expand the number of local practitioners and pharmacies providing information on prescription drug abuse and collection locations.</p> | October 1, 2021 | | | |
| <p>Year 3: Continue efforts from years 1 and 2.</p> | October 1, 2022 | | | |

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Not SHIP Identified

Resources to address strategy: University Hospitals (UH), Sheriff Department, Wal-Mart

Priority #1: Mental Health and Addiction

Strategy 3: Local suicide prevention coalitions to support implementation of evidence-based strategies (Ohio Suicide Prevention Foundation)

Goal: Increase awareness of suicide.

Objective: Provide at least three Gatekeeper trainings annually.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/ Agency |
|---|-----------------|---------------------|--|---|
| <p>Year 1: Obtain baseline data on the number of Mental Health First Aid and Question Persuade Refer (QPR) Gatekeeper trainings (for the community) that have taken place in Ashtabula County.</p> <p>Market the trainings to teachers, local churches, schools, rotary clubs, college students, etc.</p> <p>Provide at least three Gatekeeper trainings.</p> <p>Develop an anti-stigma campaign.</p> <p>Continue to utilize LOSS Teams (Local Outreach of Suicide Survivor) to provide postvention for individuals affected by the loss of a loved one through suicide.</p> <p>Sustain local protocol to track suicide completion statistics to use data to inform local prevention efforts.</p> <p>Continue to promote local community events that aim to reduce stigma. Increase efforts of Suicide Prevention Coalition.</p> <p>Promote and raise awareness of the Crisis Text Line (Text 4hope to 741741) throughout the county. Work with school administrators, guidance counselors, churches, and other community organizations to promote the Crisis Text Line.</p> <p>Continue to screen for depression using the Patient Health Questionnaire (PHQ-9), or another screening tool.</p> | October 1, 2020 | Adult, youth | <p>Suicide deaths: Number of age adjusted deaths due to suicide per 100,000 populations (baseline: 22.7 for Ashtabula County, 2015-2017, ODH Data Warehouse)</p> <p>Suicide ideation (adult): Percent of adults who report that they ever seriously considered attempting suicide within the past 12 months (baseline: 6%, 2019 CHA)</p> | <p>Ashtabula County Mental Health Recovery Board</p> <p>Ashtabula County Suicide Prevention Coalition</p> |
| <p>Year 2: Continue efforts from year 1.</p> <p>Implement an anti-stigma campaign.</p> <p>Provide at least three additional trainings.</p> <p>Continue to market the Gatekeeper trainings.</p> <p>Continue to promote and monitor the use of the Crisis Text Line.</p> | October 1, 2021 | | | |

Priority #1: Mental Health and Addiction

Strategy 4: Trauma Informed Care

Goal: Improve mental health outcomes.

Objective: Facilitate an assessment on awareness and understanding of trauma-informed health care at least once a year.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/ Agency |
|---|-----------------|---------------------|---|--|
| <p>Year 1: Continue to administer trainings to increase education, understanding and awareness of the following:</p> <ul style="list-style-type: none"> Trauma informed care Toxic stress Adverse Childhood Experiences (ACEs) and what the ACE scores mean <p>Market trainings to all sectors of society including churches, schools, civic clubs, law enforcement, businesses, employers, chambers of commerce, local government, etc.</p> | October 1, 2020 | Adult, youth | <p>Suicide deaths: Number of age adjusted deaths due to suicide per 100,000 populations (baseline: 22.7 for Ashtabula County, 2015-2017, ODH Data Warehouse)</p> <p>Suicide ideation (adult): Percent of adults who report that they ever seriously considered attempting suicide within the past 12 months (baseline: 6%, 2019 CHA)</p> <p>Community connectedness indicators via 2019 CHA (Baseline: TBD)</p> | <p>Ashtabula County Mental Health Recovery Board</p> <p>Community Counseling Center of Ashtabula County/Family and Children First Council (FCFC)</p> <p>Catholic Charities of Ashtabula County</p> |
| <p>Year 2: Continue efforts from year 1.</p> <p>Research existing trauma screening tools.</p> <p>Determine the feasibility of implementing a trauma screening tool for social service agencies and/or faith-based organizations who work with at-risk adults and youth.</p> <p>Market and educate organizations on the importance of the trauma screening tool.</p> <p>Develop a 1-page handout defining trauma and where to find help. Distribute to at-risk populations.</p> <p>Determine interest and potential organizations to implement the trauma screening tool. Provide technical assistance where necessary.</p> | October 1, 2021 | | | |
| <p>Year 3: Continue efforts from years 1 and 2.</p> <p>Implement the trauma screening tool.</p> | October 1, 2022 | | | |

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Not SHIP Identified

Resources to address strategy: Juvenile Court, Ashtabula County Mental Health and Recovery Board, Community Counseling Center of Ashtabula County, Catholic Charities of Ashtabula County

Priority #1: Mental Health and Addiction

Strategy 5: School-based alcohol/other drug prevention programs

Goal: Prevent drug dependence/abuse.

Objective: By October 1, 2022 all school districts will have at least one school-based alcohol/other drug prevention program.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/Agency |
|---|-----------------|---------------------|--|--|
| <p>Year 1: Continue to implement the BOTVIN Life Skills Training program in grades 3-10 in all Ashtabula County school districts.</p> <p>Develop a marketing plan to recruit instructors and/or volunteers to assist in implementing/teaching the program.</p> | October 1, 2020 | Youth | Drug dependence or abuse: Percent of persons age 12+ who report part-year illicit drug dependence or abuse | <p>Ashtabula County Mental Health Recovery Board</p> <p>University Hospitals Conneaut and Geneva Medical Centers</p> |
| <p>Year 2: Continue efforts from years 1.</p> <p>Determine the feasibility of expanding the program to additional classrooms.</p> <p>Secure funding for program (if applicable).</p> | October 1, 2021 | | | |
| <p>Year 3: Continue efforts from years 1 and 2.</p> <p>Expand program service area where necessary.</p> | October 1, 2022 | | | |

Type of Strategy:

- | | |
|--|--|
| <input type="radio"/> Social determinants of health | <input type="radio"/> Healthcare system and access |
| <input checked="" type="radio"/> Public health system, prevention and health behaviors | <input type="radio"/> Not SHIP Identified |

Strategy identified as likely to decrease disparities?

- Yes No Not SHIP Identified

Resources to address strategy: Ashtabula County Mental Health and Recovery Services Board, Ashtabula County Prevention Coalition, Ashtabula County Suicide Prevention Coalition, Community Counseling Center, Local Civic Organizations, UH Conneaut and Geneva medical centers

Priority #2: Chronic Disease

Strategic Plan of Action

To work toward improving chronic disease, the following strategies are recommended:

| Priority #2: Chronic Disease | | | | |
|--|-----------------|---------------------|--|---|
| Strategy 1: Prescriptions for physical activity | | | | |
| Goal: Reduce obesity. | | | | |
| Objective: Implement an exercise prescription program into two additional primary care offices by October 1, 2022. | | | | |
| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/Agency |
| <p>Year 1: Determine the baseline number of health care providers and primary care physicians that currently provide prescriptions for physical activity and exercise (exercise prescriptions) to their patients.</p> <p>Continue to partner with local organizations such as the YMCA, the parks and recreation district or the Metroparks to determine referral options and provide support for the exercise prescriptions.</p> | October 1, 2020 | Adult | <p>Diabetes: Percent of adults who have been told by a health professional that they have diabetes (Baseline: 13%, 2019 CHA)</p> <p>Obesity: Percent of adults that report BMI greater than or equal to 30 (Baseline: 42%. 2019 CHA)</p> | <p>University Hospitals Conneaut and Geneva Medical Centers</p> <p>Ashtabula County Medical Center (ACMC)</p> |
| <p>Year 2: Continue efforts from year 1. Pilot an exercise prescription program into one additional primary care office with accompanying referral options and evaluation measures.</p> <p>Identify another setting, such as a medical specialty office (psychiatry), schools, or local businesses to provide physical activity and exercise prescriptions.</p> | October 1, 2021 | | | |
| <p>Year 3: Continue efforts from years 1 and 2.</p> <p>Implement an exercise prescription program into one additional location with accompanying referral options and evaluation measures.</p> | October 1, 2022 | | | |
| <p>Type of Strategy:</p> <p> <input type="radio"/> Social determinants of health <input checked="" type="radio"/> Healthcare system and access <input type="radio"/> Public health system, prevention and health behaviors <input type="radio"/> Not SHIP Identified </p> | | | | |
| <p>Strategy identified as likely to decrease disparities?</p> <p> <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not SHIP Identified </p> | | | | |
| <p>Resources to address strategy: YMCA, Metroparks, Department of Parks and Recreation, Ashtabula County Health Department, Signature Health/Family Planning Association of Northeast Ohio, IPOD resource guide, maternal health resource guide</p> | | | | |

Priority #2: Chronic Disease

Strategy 2: Hypertension screening and follow up

Goal: Prevent heart disease.

Objective: Provide at least two free/reduced cost hypertension screening events annually.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/Agency |
|---|-----------------|---------------------|--|---|
| <p>Year 1: Determine the baseline number of healthcare providers that currently screen for hypertension and regularly follow up with patients diagnosed with hypertension.</p> <p>Increase provider education on hypertension screening, treatment, and the importance of routine follow up with patients diagnosed with hypertension.</p> <p>Promote free/reduced cost screening events within the county, such as health fairs, hospital screening events, etc. Target screenings towards those who live in or serve economically disadvantaged populations.</p> <p>Ensure screening events are listed in the IPOD resource guide.</p> | October 1, 2020 | Adult | Hypertension: Percent of adults ever diagnosed with hypertension (Baseline: 42%, 2019 CHA) | <p>Intervention and Prevention of Ongoing Diseases (IPOD) Committee</p> <p>University Hospitals Conneaut and Geneva Medical Centers</p> <p>Ashtabula County Health Department</p> |
| <p>Year 2: Continue efforts from year 1.</p> <p>Increase awareness of hypertension screening, treatment, and follow up.</p> <p>Increase the number of locations providing free/reduced cost screening events.</p> | October 1, 2021 | | | |
| <p>Year 3: Continue efforts of years 1 and 2.</p> | October 1, 2022 | | | |

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Not SHIP Identified

Resources to address strategy: UH Conneaut and Geneva medical centers, Ashtabula County Health Department, Ashtabula County Medical Center (ACMC), fire department(s)

Priority #2: Chronic Disease

Strategy 3: Diabetes Prevention Program (DPP) and Prediabetes screening and referral

Goal: Prevent diabetes.

Objective: By October 1, 2022, increase prediabetes referrals 5% from baseline.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/Agency |
|---|-----------------|---------------------|--|---|
| <p>Year 1: Determine the baseline number of organizations in the county that currently screen for prediabetes and refer patients to intensive behavioral counseling interventions, such as the Diabetes Prevention Program (DPP), to promote a healthful diet and physical activity.</p> <p>Raise awareness of prediabetes screening, identification and referral through dissemination of the Prediabetes Risk Assessment (or a similar assessment) and/or the Prevent Diabetes STAT Toolkit.</p> <p>Promote and market free/reduced cost screening events within the county (ex: health fairs, hospital screening events, etc.).</p> <p>Ensure screening events are listed in the IPOD resource guide.</p> | October 1, 2020 | Adult, youth | <p>Diabetes: Percent of adults who have been told by a health professional that they have diabetes (Baseline: 13%, 2019 CHA)</p> <p>Prediabetes: Percent of adults who have been told by a health professional that they have prediabetes (Baseline: 6%, 2019 CHA)</p> | <p>University Hospitals Conneaut and Geneva Medical Centers</p> <p>Ashtabula County Medical Center (ACMC)</p> |
| <p>Year 2: Increase awareness of prediabetes screening, identification and referral.</p> <p>Increase the number of individuals within Ashtabula County that are screened for diabetes.</p> <p>Provide diabetes prevention education to teens. Expand programming to additional schools.</p> <p>If needed, increase the number of organizations that screen for prediabetes.</p> | October 1, 2021 | | | |
| <p>Year 3: Continue efforts of years 1 and 2.</p> <p>Increase the number of healthcare providers that currently screen and refer patients for prediabetes by 5% from baseline.</p> | October 1, 2022 | | | |

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Not SHIP Identified

Resources to address strategy: Signature Health/Family Planning Association of Northeast Ohio, YMCA, Ashtabula County Health Department

Priority #2: Chronic Disease

Strategy 4: Implement a healthy choices campaign

Goal: Increase fruit and vegetable consumption.

Objective: By October 1, 2022, Ashtabula County will implement at least 2 healthy food initiatives in local food pantries or farmers markets.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/Agency |
|--|-----------------|---------------------|---|--|
| <p>Year 1: Raise awareness of the available food pantries and farmers markets within the county (locations, offerings, etc.). Continue to distribute information on where to obtain fresh fruit and vegetables. Update the IPOD resource guide annually.</p> <p>Promote local businesses, restaurants, etc. who use locally grown food. Consider adding an icon or symbol to promote those locations</p> <p>Develop a unified healthy choices campaign. Work to promote healthy living by creating shared messages among organizations to distribute to the county. Include print and social media. Include items such as reading food labels, etc.</p> | October 1, 2020 | Adult, youth | <p>Fruit consumption: Percent of adults who report consuming 0 servings of fruit per day (Baseline: 16%, 2019 CHA)</p> <p>Vegetable consumption: Percent of adults who report consuming 0 servings of vegetables per day (Baseline: 5%, 2019 CHA)</p> | Intervention and Prevention of Ongoing Diseases (IPOD) Committee |
| <p>Year 2: Continue efforts of year 1.</p> <p>Increase awareness and dissemination of the healthy choices campaign.</p> <p>Determine feasibility of implementing any of the following in local food pantries or farmers markets:</p> <ul style="list-style-type: none"> • Cooking demonstrations/classes • Recipe tastings • Produce display stands • Nutrition, diabetes and other health education classes • Health care support services | October 1, 2021 | | | |
| <p>Year 3: Continue efforts of year 2.</p> <p>Implement at least 2 items above within local food pantries or farmers markets.</p> | October 1, 2022 | | | |

Type of Strategy:

- | | |
|--|--|
| <input type="radio"/> Social determinants of health | <input type="radio"/> Healthcare system and access |
| <input checked="" type="radio"/> Public health system, prevention and health behaviors | <input checked="" type="radio"/> Not SHIP Identified |

Strategy identified as likely to decrease disparities?

- Yes No Not SHIP Identified

Resources to address strategy: Ohio State University Ashtabula County Cooperative Extension Service, Ashtabula County Community Action Agencies, Ashtabula County Health Department, JFS

Priority #2: Chronic Disease

Strategy 5: School-based nutrition education programs and nutrition and physical activity interventions in preschool/child care

Goal: Increase fruit and vegetable consumption.

Objective: By October 1, 2022, all Ashtabula County schools and pre-schools will have at least one nutrition education and/or nutrition/physical activity intervention.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/Agency |
|---|-----------------|---------------------|--|---|
| <p>Year 1: Assess what nutrition education programs and/or nutrition and physical activity interventions are available in Ashtabula County for youth.</p> <p>Determine which schools and pre-schools are currently utilizing the Serving Up MyPlate frame work and the VeggieU program.</p> <p>Expand current programming to additional districts and grade levels.</p> <p>Evaluate effectiveness of the program(s) annually.</p> <p>Continue to promote and market the 5-4-3-2-1-GO message throughout the county.</p> <p>Continue to collect body mass index (BMI) of youth in the county.</p> <p>Determine additional locations to collect or obtain youth BMI data. Consider immunization/vaccination appointments, well child visits, EHR/EMR, etc.</p> | October 1, 2020 | Youth | <p>Fruit consumption: Percent of youth who report consuming 0 servings of fruit per day</p> <p>Vegetable consumption: Percent of youth who report consuming 0 servings of vegetables per day</p> | <p>Ohio State University Cooperative Extension – Ashtabula County</p> <p>Ashtabula County Health Department</p> |
| Year 2: Continue efforts from year 1. | October 1, 2021 | | | |
| Year 3: Expand program service area where necessary. | October 1, 2022 | | | |
| Continue efforts from years 1 and 2. | | | | |

Type of Strategy:

- Social determinants of health
- Public health system, prevention and health behaviors
- Healthcare system and access
- Not SHIP Identified

Strategy identified as likely to decrease disparities?

- Yes
- No
- Not SHIP Identified

Resources to address strategy: UH Conneaut and Geneva medical centers, Ashtabula County Medical Center (ACMC)

Priority #2: Chronic Disease

Strategy 6: Physically active classrooms

Goal: Increase physical activity.

Objective: By October 1, 2022 at least two school districts will integrate physically active classrooms into their curriculum.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/Agency |
|---|-----------------|---------------------|---|--|
| <p>Year 1: Research physically active classrooms. Determine if any schools currently implement physically active classrooms within their curriculum. Evaluate the frequency and effectiveness of the implementation of physically active classrooms.</p> <p>Meet with district superintendents to encourage the implementation of physically active classrooms in their schools. Recruit at least one school district to integrate physically active classrooms into their curriculum.</p> <p>Consider the following programs/strategies to implement as part of a physically active classroom:</p> <ul style="list-style-type: none"> • Take 10! • Instant Recess • Power Up for 30 • Go Noodle | October 1, 2020 | Youth | Physical inactivity: Percent of youth who did not participate in at least 60 minutes of physical activity | Ohio State University Cooperative Extension – Ashtabula County |
| <p>Year 2: Recruit at least one additional school district to adopt physically active classrooms into their curriculum.</p> | October 1, 2021 | | | |
| <p>Year 3: Continue efforts from years 1 and 2.</p> | October 1, 2022 | | | |

Type of Strategy:

- | | |
|--|--|
| <input type="radio"/> Social determinants of health | <input type="radio"/> Healthcare system and access |
| <input checked="" type="radio"/> Public health system, prevention and health behaviors | <input type="radio"/> Not SHIP Identified |

Strategy identified as likely to decrease disparities?

- Yes No Not SHIP Identified

Resources to address strategy: Ashtabula County schools, Ashtabula County Health Department Maternal and Child Health grant

Strategy 6: Intervention and Prevention of Ongoing Diseases (IPOD) resource guide

Goal: Increase awareness of programs and resources available in Ashtabula County.

Objective: The IPOD resource guide will be updated annually.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/Agency |
|---|-----------------|---------------------|--|--|
| <p>Year 1: Update the Intervention and Prevention of Ongoing Disease (IPOD) resource guide on programs and resources available in Ashtabula County. Keep the IPOD resource guide updated on an annual basis.</p> <p>Market the resource guide with community members, health care providers, primary care physicians, etc.</p> <p>Encourage agencies to post the resource guide on their websites.</p> <p>Provide at least one county wide symposium/health fair on a chronic disease topic for the general public. Attain media coverage.</p> | October 1, 2020 | Adult | Indicator to measure impact of strategy not identified | Intervention and Prevention of Ongoing Diseases (IPOD) Committee |
| Year 2: Continue efforts from year 1. | October 1, 2021 | | | |
| Year 3: Continue efforts from years 1 and 2. | October 1, 2022 | | | |
| <p>Type of Strategy:</p> <p> <input type="radio"/> Social determinants of health <input type="radio"/> Healthcare system and access <input type="radio"/> Public health system, prevention and health behaviors <input checked="" type="radio"/> Not SHIP Identified </p> | | | | |
| <p>Priority area(s) the strategy addresses:</p> <p> <input type="radio"/> Mental Health and Addiction <input type="radio"/> Chronic Disease <input checked="" type="radio"/> Not SHIP Identified </p> | | | | |
| <p>Strategy identified as likely to decrease disparities?</p> <p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Not SHIP Identified </p> | | | | |
| <p>Resources to address strategy: Intervention and Prevention of Ongoing Diseases (IPOD) Committee</p> | | | | |

Strategy 8: Screening for social determinants of health (SDOH) using a standardized tool

Goal: Improve health equity.

Objective: Implement a SDOH screening in two different locations by October 1, 2022.

| Action Step | Timeline | Priority Population | Indicator(s) to measure impact of strategy: | Lead Contact/Agency |
|---|-----------------|---------------------|--|--|
| <p>Year 1: Collaborate with organizations to research social determinants of health (SDOH) screenings.</p> <p>Collect baseline data on the number of schools, primary care offices, FQHC's, programs such as home visiting programs, or other entities that are screening for SDOH.</p> <p>Determine what type(s) of SDOH screening tools currently exist in the county.</p> | October 1, 2020 | Adult | Indicator to measure impact of strategy not identified | Ashtabula County Mental Health Recovery Board |
| <p>Year 2: Determine the feasibility of implementing the SDOH screening tool.</p> <p>Determine what tool should be used consistently across all organizations for measurement, evaluation and comparison purposes.</p> | October 1, 2021 | | | Community Counseling Center of Ashtabula County |
| <p>Year 3: Continue efforts of year 1. Pilot a community-wide screening tool for SDOH in at least one location with appropriate evaluation measures.</p> | October 1, 2022 | | | Signature Health/Family Planning Association of Northeast Ohio University Hospitals Conneaut and Geneva Medical Centers Ashtabula County Medical Center (ACMC) |

Type of Strategy:

- | | |
|---|--|
| <input type="radio"/> Social determinants of health | <input type="radio"/> Healthcare system and access |
| <input type="radio"/> Public health system, prevention and health behaviors | <input checked="" type="radio"/> Not SHIP Identified |

Priority area(s) the strategy addresses:

- | | | |
|---|---------------------------------------|--|
| <input type="radio"/> Mental Health and Addiction | <input type="radio"/> Chronic Disease | <input checked="" type="radio"/> Not SHIP Identified |
|---|---------------------------------------|--|

Strategy identified as likely to decrease disparities?

- | | | |
|---------------------------|--------------------------|--|
| <input type="radio"/> Yes | <input type="radio"/> No | <input checked="" type="radio"/> Not SHIP Identified |
|---------------------------|--------------------------|--|

Resources to address strategy: Ashtabula County Mental Health Recovery Board, Community Counseling Center of Ashtabula County, Signature Health/Family Planning Association of Northeast Ohio, UH Conneaut and Geneva medical centers, Ashtabula County Medical Center (ACMC)