

Community Health Needs Assessment Final Reports

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Introduction

Every hospital is required by the IRS to complete a community health needs assessment (CHNA) every three years, complete a report indicating the findings to be approved by the hospital board. In addition each hospital is to complete an implementation plan based on the findings from both the secondary data and the primary data. In 2015 all of the major hospitals came together to complete the CHNA survey, IU, St. Vincent, Community and St. Francis created a survey that was taken by almost 8,000 people spanning all of the counties served by the major hospitals. We then incorporated the use of the IUPUI School of Public Health graduate students to help write the individual community health needs assessments. Each hospital completed either community wide focus groups or stakeholder interviews to get primary data from individuals. That information helped us identify the top needs in the communities.

The goal of the community health needs assessment is to learn firsthand what the community feels their needs are, and allows their voices to be heard. So with the students, community leaders/stakeholders and hospitals we were able to get a very robust list from all area. For example in Marion County we had 7 focus groups, that looked at all different areas of town east, west, north and a community wide focus group. This diversity allows us to see what the perception of each area is, and how we need to address each of the concerns differently.

The first few pages will outline the top needs identified in each of the focus groups, then throughout this report you will see duplicate information that shows data for each area in the counties. Indicated in each report will show to whom the student or professional spoke with or who attended the focus group and how the list was determined.

Top needs identified

Marion county –Key informant Interview

1. Improving the Education System
2. Public Safety
3. Substance abuse and Mental health

Marion County-Julian Center

1. Education
2. Crime
3. Recreational and youth programs
4. Healthcare
5. Community livability

Marion County Burmese population

1. Child Safety
2. Access
3. Education
4. Cultural/language barrier
5. Professional training

Marion County Near Eastside

1. Addiction and drug use
2. Depression and mental health
3. Diabetes
4. Nutrition
5. Access to healthcare

Marion County BRAG

1. Curb appeal (sidewalks, signage and curb conditions)
2. Crime and safety
3. Education
4. Transportation
5. Healthcare

Marion County Safety Summit

1. Neighborhood partnership
2. Economy
3. Negative perception
4. Education

Marion County, county wide focus group

1. Communications/resources
2. Education
3. Transportation
4. Poverty
5. Built Environment

Howard County

1. Behavioral and Mental Health
2. Lifestyle
3. Access to healthcare
4. Tobacco
5. Unemployment/underemployed

Johnson County-Key informant interviews

1. Community Issues
 - a. Education reform
 - b. Food insecurity
 - c. Homelessness
 - d. Medical care for low income/uninsured families
 - e. Educational attainment
 - f. Infrastructure
 - g. Substance abuse
2. Health issues
 - a. Obesity
 - b. Substance use/abuse
 - c. Infant mortality
 - d. Childhood obesity
 - e. Diabetes
 - f. Mental health
 - g. Teen pregnancy
 - h. Pre-natal care

Hamilton County-community wide focus group

1. Mental health/behavioral health
2. Life skills and education
3. Access to healthcare
4. Transportation
5. Affordable housing/domestic violence shelter

Hancock county –key informant interviews

1. Lack of healthy food choices
2. Alcohol abuse and smoking
3. Less family time/activities for families

Marion County- Key Informants

Introduction

A community health needs assessment (CHNA) is currently being worked on by 4 major hospitals in the Marion County area. Under a collaboration with IU Health, St. Francis Alliance, and St. Vincent; Community Health Network have been conducting surveys focused on finding the most prevalent health needs of the community. With this collaboration between the hospital networks there will be more information accumulated, which will make this CHNA more complete and able to reach a wider audience, than if this assessment was taken on by one hospital network. The following sections will outline the findings of focus groups taken place in Marion County.

Data Sources

The data collection is done through primary and secondary data. The primary data is collected through focus groups, these focus groups are in a group setting. The focus groups are first made into groups of 5 people to a group and they discuss their personal health issues in the community. Once they come up with their issues they discuss as a group and come up with their groups top 5-7 health needs as a whole. Furthermore, as a whole they come up with their top 5-7 needs in the community, the qualitative as well as quantitative data is taken down. The secondary data collection occurs through online databases and resources such as: SAVI, Indicators, Community Commons, County Health Rankings, and the Centers for Disease Control and Prevention (CDC), to find out the demographic, health indexes, and health issues.

Collaborating Organizations

The collaborating organizations for the CHNA are: Community Health Network, IU Health, St. Francis Alliance, and St. Vincent. All of the hospitals have been working in Marion County to try and get the most representation for the issues that are plaguing this area of Indiana.

COMMUNITY HEALTH NEEDS ASSESSMENT

This collaboration will ultimately be responsible for any expatiated change in policy, initiatives, or funding for issues that may be needed to improve the health needs of the community.

Definition of Community Assessed

Marion County is one of the least healthy counties in Indiana in reference to health outcomes, health behaviors, and health factors. Marion County is ranked number 89 out of 92 counties in the state and has the worst social & economic factors. They are falling behind in high school graduation (10%) below the Indiana average, children in poverty (30%) is 8% higher than the Indiana average, and violent crime (1,124) this is 790 more than the Indiana averages¹. These numbers exemplify issues that we see from the secondary data that we have accumulated, however there is more secondary data that needs to be examined in order to get a fair and detailed analysis of the community. The secondary data for Marion County will be explained further in the following sections.

Secondary Data

The following is information collected using the secondary sources listed above. This information includes demographics, economic indicators, insurance coverage, county health rankings, community health status indicators, zip-code specific data, medically underserved areas and populations, and information on medical professional shortages in Marion County.

Demographics. The total population for Marion County is 912,242 as of 2013. The population breaks down to 10.8% 65 or older, 64.23% 18 to 64 and 24.99% under age 18 (SAVI, 2013). The racial demographics for Marion County are 63.4% Caucasian and 26.83% African-American. The Hispanic community makes up 9.42% of the population. A majority of the community, 87.5%, use English as their household language. 7.67% use Spanish as their

household language and 4.83% use a language other than English or Spanish in their household. (SAVI, 2013).

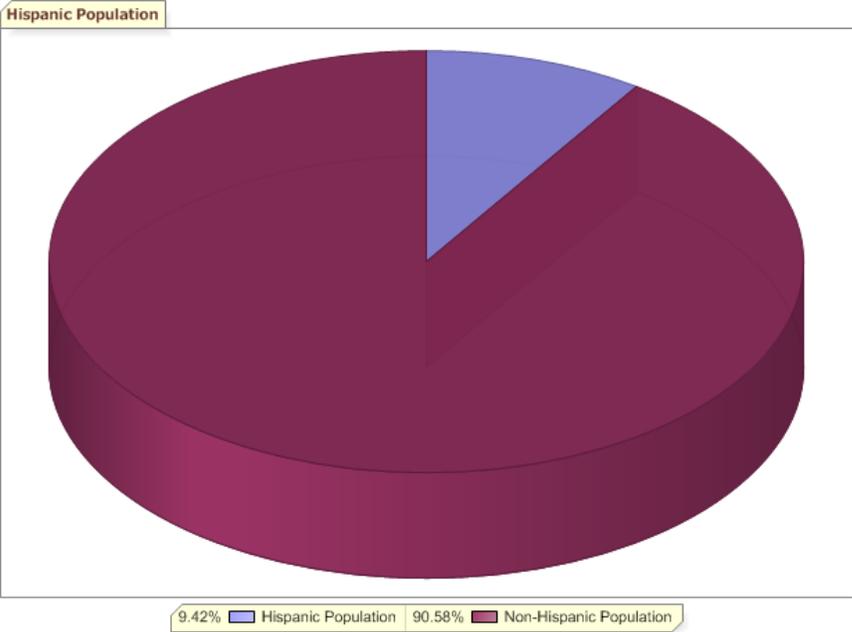


Figure 1: Hispanic Population in Marion County (SAVI, 2013)

Economic Indicators. The economy is one key factors that influence a community. Marion County has a large population of children under 18 living in poverty, 30.1%, which is higher than the 22% of children living in poverty in Indiana (Indicators, 2013 and Health Rankings, 2015). Education within Marion County is also lower than other surrounding counties and the state as a whole. The population of adults 25 and older without a high school diploma is 15.45%, 29.1% have only a high school diploma, 21.13% have some college, without a degree, 6.93% have an associate’s degree and 27.38% have a bachelor’s or higher (SAVI, 2013).

COMMUNITY HEALTH NEEDS ASSESSMENT

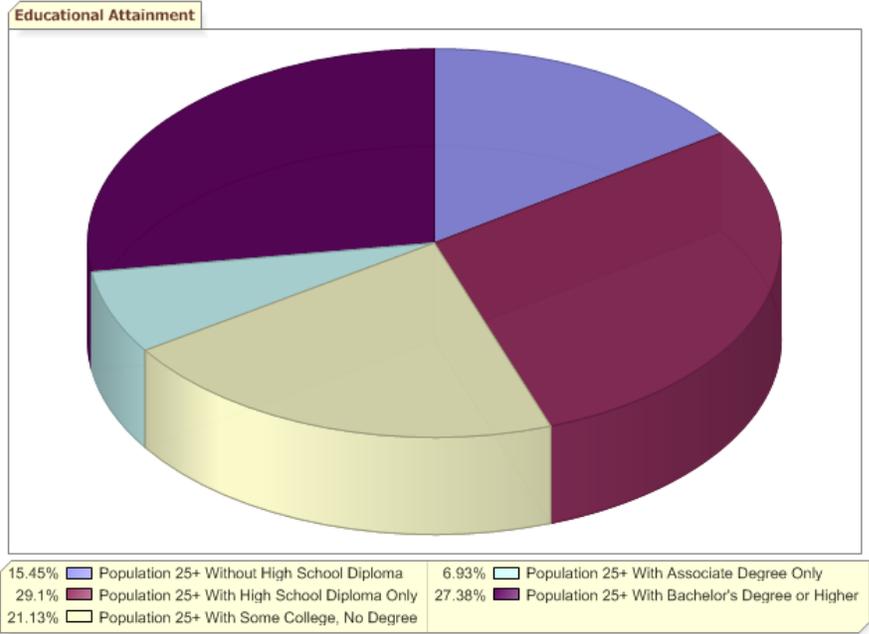


Figure 2: Educational attainment of Marion County (SAVI, 2013)

This lacking education is also a predictor of lower income. The median household income for Marion County is \$42,334, lower than all other surrounding counties, Figure 1 (SAVI, 2013). In addition, 13.87% of the homes in Marion County are vacant and another 38.03% are renter occupied units (SAVI, 2013).

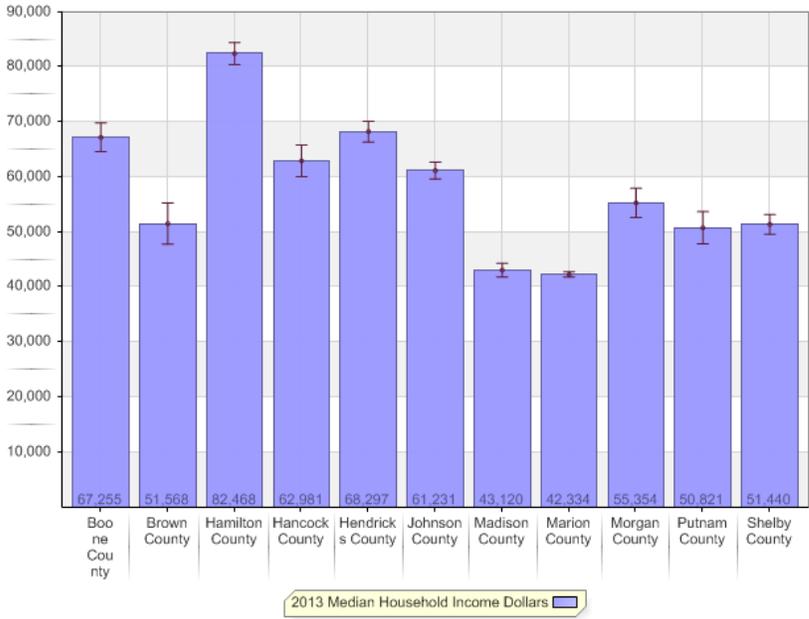


Figure 3: 2013 Median Household Income Dollars for Central Indiana counties

Insurance Coverage. The majority of Marion County residents have employer based healthcare insurance coverage, insuring 52.39% of the population. Residents under 65 who are uninsured reaches 18.85%, which is slightly higher than the state at 17% (SAVI, 2103 and Health County Rankings, 2015).

County Health Ranking. Marion County ranks 74th in the state for overall health outcomes. It is ranked 89th for health factors, such as adult smoking and adult obesity. It is exceptionally higher in the number of sexually transmitted infections and teen births, 1100 and 55, respectively, compared to the state, 451 and 39, respectively (County Health Rankings, 2015). Among social and economic factors, such as unemployment, children in poverty and violent crimes, Marion County is ranked last in the state, 92nd (County Health Rankings, 2015).

Community Health Status Indicators. According to the Center for Disease Control and Prevention (2015), Marion County ranks in the least favorable quartile for mortality, related to cancer, chronic kidney disease, chronic lower respiratory disease, female life expectancy and male life expectancy. For issues related to morbidity, such as adult obesity, overall adult health status, gonorrhea, older adult depression and syphilis, Marion County is ranked in the least favorable quartile. Health care access and quality are also in the last favorable quartile related to older adult preventable hospitalizations. Marion County ranks in the least favorable quartile for health behaviors related to adult physical inactivity, adult smoking and teen births. Marion County also ranks in the least favorable quartile for social factors related to children in single-parent households, inadequate social support, poverty, and violent crime. For issues related to the physical environment such as access to parks, annual average PM2.5 concentration (poor air quality) and limited access to healthy food, Marion County ranks in the least favorable quartile.

Zip Code-Level Health Access Indicators. This focus group was located at the Julian Center, in zip code 46202. This area of Marion County is located in the heart of downtown Indianapolis, but is still lacking in community resources. Data shows that high age-adjusted emergency hospitalization visits related to diabetes (38.7 per 10,000), long-term complications (19.6 per 10,000) and short-term complications (15.5 per 10,000).

Data shows high rates of emergency room visits due to respiratory diseases. Data shows high age-adjusted emergency visits for asthma (33.6 per 10,000), adult asthma (16.9 per 10,000) and pediatric asthma (81.8 per 10,000).

Another major health issue within this zip code is substance abuse. Data shows high hospitalization rates for alcohol abuse (19.3 per 10,000) in populations 18 and older (Community Health Network, 2015).

Medically Underserved Areas and Populations. The United States Department of Health and Human Services (2015) considers Marion County as a medically underserved area and population within Indiana.

Health Professional Shortage. Compared to other counties in Indiana, Marion County is doing fairly well among health professionals. There are approximately 1,254 patients for 1 primary care physician, compared to 1,518 patients for 1 primary care physician in Indiana. There are 1,273 patients for every 1 dentist in Marion County, compared to 1,973 patients for every 1 dentist in the state. Marion County is also doing better than the state in the number of mental health providers, 436 patients for every 1 provider, compared to 750 patients for every 1 provider. (County Health Rankings, 2015).

COMMUNITY HEALTH NEEDS ASSESSMENT

Other Facilities and Resources Serving the Community. There are shelters, clinics, schools, and church programs that provide services and resources to residents. A list of resources in the community include:

Food Pantry	ACTION HEALTH CENTER - WIC OFFICE	46205
	ALBERT AND SARA REUBEN SENIOR AND COMMUNITY RESOURCE CENTER	46260
	ANNA'S HOUSE	46222
	BARNES WORSHIP CENTER WEST	46224
	BETHEL AFRICAN METHODIST EPISCOPAL CHURCH	46202
	BILLIE'S FOOD PANTRY	46222
	BLACKBURN HEALTH CENTER WIC OFFICE	46208
	BOULEVARD PLACE FOOD PANTRY - SAINT VINCENT DE PAUL	46208
	BRIDGEPORT CENTRAL BAPTIST CHURCH	46231
	BRIGHTWOOD COMMUNITY CENTER	46218
	BROAD RIPPLE UNITED METHODIST CHURCH	46220
	BROOKSIDE PARK AND FAMILY CENTER	46201
	CALVARY BAPTIST CHURCH	46235
	CATHEDRAL KITCHEN	46202
	CATHOLIC CHARITIES CRISIS OFFICE	46202
	CENTER TOWNSHIP TRUSTEE, MARION COUNTY	46204
	CENTRAL CHRISTIAN CHURCH	46204
	CHAPEL HILL UNITED METHODIST CHURCH	46214
	CHAPEL ROCK CHRISTIAN CHURCH	46214
	CHRIST CHURCH APOSTOLIC	46260
	CHRIST CHURCH OF GLORY	46220
	CHRIST UNITED METHODIST CHURCH	46227
	CHRISTAMORE HOUSE FAMILY AND COMMUNITY CENTER	46222
	CHURCH OF ACTS	46237
	CITY VIEW CHRISTIAN CENTER	46208
	COMMUNITY ALLIANCE OF THE FAR EASTSIDE (CAFE)	46226
	COMMUNITY CARING AND SHARING	46241
	COMMUNITY OUTREACH MINISTRY EASTSIDE (COME)	46229
	COTTAGE CORNER WIC CLINIC	46203
	DECATUR TOWNSHIP TRUSTEE, MARION COUNTY	46221
	DELIVERANCE TEMPLE	46226
	DIVINE DIRECTION CHRISTIAN CHURCH	46205
	EAGLE CREEK ASSEMBLY OF GOD	46254
	EAGLE CREEK COMMUNITY CHURCH	46254

COMMUNITY HEALTH NEEDS ASSESSMENT

EDNA MARTIN CHRISTIAN CENTER	46218
EMMAUS LUTHERAN CHURCH FOOD PANTRY	46203
FAY BICCARD GLICK NEIGHBORHOOD CENTER AT CROOKED CREEK	46268
FIRST BAPTIST CHURCH OF INDIANAPOLIS	46240
FIRST FREE METHODIST CHURCH	46201
FLETCHER PLACE COMMUNITY CENTER	46203
FOREST MANOR HEALTH CENTER WIC OFFICE	46226
FOREST MANOR MULTI-SERVICE CENTER	46218
FOREST MANOR UNITED METHODIST CHURCH	46218
FRANKLIN TOWNSHIP TRUSTEE, MARION COUNTY	46237
GARFIELD PARK BAPTIST CHURCH	46203
GLEANERS COMMUNITY CUPBOARD	46241
GLENDALE SEVENTH-DAY ADVENTIST CHURCH	46220
GOD'S BOUNTY FOOD PANTRY	46239
GOODWIN COMMUNITY CENTER	46221
GRASSY CREEK HEALTH CENTER WIC OFFICE	46235
GREATER ONE WAY APOSTOLIC CHURCH	46218
GREATER SAINT MARK MISSIONARY BAPTIST CHURCH	46218
GREATER TRUE GOSPEL TABERNACLE	46218
HARVEST PRAYER CENTER	46254
HAWTHORNE COMMUNITY CENTER	46222
HEALTHNET BARRINGTON HEALTH & DENTAL CENTER	46203
HEATHER HILLS BAPTIST CHURCH	46229
HOLY FAMILY DAVID S. MOORE FOOD PANTRY	46203
HOLY NAME	46107
HOLY TRINITY PARISH	46222
HOOSIER VETERANS ASSISTANCE FOUNDATION (HVAF)	46204
HOPE AND HELP CENTER	46201
HOPE BAPTIST CHURCH	46214
HUNGER INC.	46227
IGLESIA DE MONTE DE SION	46222
IRVINGTON CHURCHES ADVOCACY NETWORK (ICAN) AT DOWNEY AVENUE CHRIS	46219
JOHN H. BONER COMMUNITY CENTER	46201
JR DALTON	46222
KEENAN-STAHN BOYS AND GIRLS CLUB	46203
KENNEDY KING PARK CENTER	46202
LA PLAZA WIC OFFICE	46226
LAKEVIEW CHURCH	46224
LAWRENCE TOWNSHIP TRUSTEE, MARION COUNTY	46226

COMMUNITY HEALTH NEEDS ASSESSMENT

LIFE CHURCH	46234
LIGHT OF THE WORLD CHRISTIAN CHURCH	46228
LINWOOD CHRISTIAN CHURCH	46201
LIRIOS DE LOS VALLES	46221
LORD OF THE HARVEST CHURCH	46236
MARY RIGG NEIGHBORHOOD CENTER	46221
METRO BAPTIST CENTER	46204
MID-NORTH FOOD PANTRY	46208
MOUNT ZION BAPTIST CHURCH	46208
MOVIE THEATER CHURCH	46229
MEALS ON WHEELS OF CENTRAL INDIANA	46240
NATIONAL CHRISTIAN OUTREACH, COMPASSION CENTER	46203
NATIONAL SQUARE WIC CLINIC	46227
NEHEMIAH BIBLE CHURCH	46201
NEW BETHEL MISSIONARY BAPTIST CHURCH	46202
NEW JERUSALEM MISSIONARY BAPTIST CHURCH	46218
NEW REVELATIONS CHRISTIAN CHURCH	46236
NEW WINESKIN MINISTRIES	46254
NORTH ARLINGTON HEALTH CENTER WIC OFFICE	46218
NORTH UNITED METHODIST CHURCH	46208
NORTHSIDE BAPTIST CHURCH	46220
NORTHWOOD CHRISTIAN CHURCH	46205
NU CORINTHIAN BAPTIST CHURCH - INNER CITY MINISTRY, SANCTITY OF S	46205
OLD BETHEL UNITED METHODIST CHURCH	46219
OLIVE BRANCH CHRISTIAN CHURCH	46225
PERRY TOWNSHIP TRUSTEE, MARION COUNTY	46227
PIKE TOWNSHIP TRUSTEE, MARION COUNTY	46254
PROMISE LAND CHRISTIAN COMMUNITY CHURCH	46208
PURDUE EXTENSION - MARION COUNTY	46205
RAINBOW HOUSE FOOD PANTRY (EBENEZER MISSIONARY BAPTIST CHURCH)	46202
ROBERTS PARK UNITED METHODIST CHURCH	46204
SAINT CHRISTOPHER	46224
SAINT JOHN'S EPISCOPAL CHURCH	46224
SAINT JOHN'S MISSIONARY BAPTIST CHURCH	46202
SAINT LUKE MISSIONARY BAPTIST CHURCH	46218
SAINT SIMON THE APOSTLE CATHOLIC CHURCH	46236
SAINT TIMOTHY EPISCOPAL CHURCH	46227
SAINT VINCENT DE PAUL CLIENT CHOICE FOOD PANTRY	46218
SALVATION ARMY EAGLE CREEK CORPS	46254

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	SALVATION ARMY FOUNTAIN SQUARE CORPS	46203
	SCOTT UNITED METHODIST CHURCH	46202
	SECOND HELPINGS	46202
	SERVANT'S HEART OF INDY	46203
	SHARING PLACE	46236
	SHEPHERD COMMUNITY CENTER	46201
	SHILOH MISSIONARY BAPTIST CHURCH	46226
	SOUTHEASTERN CHRISTIAN FELLOWSHIP CHURCH	46203
	SOUTHEASTERN CHURCH OF CHRIST	46203
	TABERNACLE PRESBYTERIAN CHURCH	46205
	TEAR DOWN THE WALLS	46208
	TRINITY CHRISTIAN METHODIST EPISCOPAL CHURCH	46205
	TUXEDO PARK BAPTIST CHURCH	46201
	UMOJA CHRISTIAN CHURCH	46222
	VIDA NUEVA UNITED METHODIST CHURCH - CENTRO FAMILIAR	46222
	WARREN TOWNSHIP TRUSTEE, MARION COUNTY	46219
	WASHINGTON TOWNSHIP TRUSTEE, MARION COUNTY	46220
	WAYNE TOWNSHIP TRUSTEE, MARION COUNTY	46241
	WESTMINSTER NEIGHBORHOOD MINISTRIES	46201
	WESTSIDE HEALTH CENTER WIC OFFICE	46222
	WHEELER MISSION CENTER FOR WOMEN AND CHILDREN	46201
	WHEELER MISSION SHELTER FOR MEN	46204
	AMERICAN INDIAN CENTER OF INDIANA	46201
	CONCORD NEIGHBORHOOD CENTER	46225
Employment Assistance	FLANNER HOUSE OF INDIANAPOLIS	46208
	FOREST MANOR MULTI-SERVICE CENTER	46218
	GOODWILL INDUSTRIES OF CENTRAL INDIANA	46222
	HAWTHORNE COMMUNITY CENTER	46222
	HOOSIER VETERANS ASSISTANCE FOUNDATION (HVAF)	46204
	INDIANAPOLIS MARION COUNTY HUMAN RESOURCES DIVISION	46204
	JOHN H. BONER COMMUNITY CENTER	46201
	KEYS TO WORK	46202
	MARION COUNTY PROSECUTOR'S OFFICE	46204
	MARY RIGG NEIGHBORHOOD CENTER	46221
	NATIONAL ABLE NETWORK, INDIANA HEADQUARTERS	46208
	PACE, INC. (Public Advocates in Community Re-Entry)	46218
	PUBLIC ADVOCATES IN COMMUNITY RE-ENTRY (PACE)	46218
	VOCATIONAL REHABILITATION SERVICES - AREAS 13 AND 14	46256
	VOCATIONAL REHABILITATION SERVICES - AREAS 15 AND 16	46241

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	VOLUNTEERS OF AMERICA - STRIVE INDY	46202
	WORKONE EXPRESS AT COLLEGE PARK, MARION COUNTY	46278
	WORKONE WEST - MARION COUNTY	46222
Mental Health	ESKENAZI HEALTH	46202
	ACTION HEALTH CENTER - MARION COUNTY HEALTH DEPARTMENT	46205
	ADULT AND CHILD - EAST OHIO STREET	46204
	ADULT AND CHILD - MADISON AVENUE	46227
	ARCHDIOCESE OF INDIANAPOLIS	46202
	ASIAN HELP SERVICES	46205
	ASPIRE INDIANA - INDIANAPOLIS	46205
	BROOKE'S PLACE FOR GRIEVING YOUNG PEOPLE	46240
	CATHOLIC CHARITIES INDIANAPOLIS	46202
	CHILDREN'S BUREAU - NEIGHBORHOOD ALLIANCE FOR CHILD SAFETY (NACS)	46218
	CHRISTIAN THEOLOGICAL SEMINARY COUNSELING CENTER	46208
	COMMUNITY HEALTH PAVILION SHADELAND	46219
	COMMUNITY HOSPITAL NORTH BEHAVIORAL HEALTH PAVILION	46256
	CUMMINS BEHAVIORAL HEALTH SYSTEMS - INDIANAPOLIS	46241
	FAMILIES FIRST - CENTRAL OFFICE	46204
	FRANCISCAN SAINT FRANCIS - OUTPATIENT BEHAVIORAL HEALTH SERVICES	46227
	HEALTHNET BARRINGTON HEALTH AND DENTAL CENTER	46203
	HEALTHNET MARTINDALE BRIGHTWOOD HEALTH AND DENTAL CENTER	46218
	HEALTHNET SOUTHEAST HEALTH AND DENTAL CENTER	46203
	HEALTHNET SOUTHWEST HEALTH AND DENTAL CENTER	46221
	HEALTHNET WEST HEALTH CENTER	46224
	INDIANA COALITION AGAINST DOMESTIC VIOLENCE (ICADV)	46202
	INDIANA UNIVERSITY HEALTH METHODIST HOSPITAL	46202
	INDIANA WESLEYAN UNIVERSITY GRADUATE COUNSELING CLINIC	46278
	LEGACY HOUSE	46218
	LIBERTAD COUNSELING	46224
	MARY RIGG NEIGHBORHOOD CENTER	46221
	MENTAL HEALTH AMERICA OF GREATER INDIANAPOLIS	46205
	MIDTOWN COMMUNITY MENTAL HEALTH - ESKENAZI HEALTH	46202
	MIDTOWN MENTAL HEALTH - DR. JAMES J. WRIGHT CENTER	46202
	MIDTOWN MENTAL HEALTH CENTER - ESKENAZI HEALTH	46208
	MIDTOWN WESTSIDE CLINIC - ESKENAZI HEALTH	46224
	MOUNT ZION APOSTOLIC CHURCH	46218
	PEOPLE'S HEALTH CENTER	46201
	REACH FOR YOUTH - CENTER TOWNSHIP OFFICE	46205
	RICHARD L. ROUDEBUSH VETERANS AFFAIRS MEDICAL CENTER (VAMC)	46202

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RILEY HOSPITAL FOR CHILDREN AT INDIANA UNIVERSITY HEALTH	46202
SAINT VINCENT INDIANAPOLIS STRESS CENTER	46260
UNIVERSITY OF INDIANAPOLIS PSYCHOLOGICAL SERVICES CENTER	46227

These organizations provide a variety of services from education, mental health, nutrition, physical activity, housing services, health care services, dental services, and after school programs for residents.

Summary of Key Informant Interviews

Identification of Persons Providing Input. Twelve people were invited to participant in the interview on community needs. Of those, five persons responded with interest. However, due to time and further interest, only three informants were interviewed: Duane Krambeck- Principal of Christian Park Elementary School in Indianapolis Public Schools; Mary Conway, MSN, RN- Administrative Coordinator for Nursing Services in Indianapolis Public Schools; Randy Miller- Executive Director of Drug Free Marion County.

Prioritization Process and Criteria

To obtain a more complete picture of the factors that play into Marion County community’s health, input from residents, community leaders, and healthcare workers in the community were gathered via individual interviews.

Each interviewee was asked what the most pressing community and health issues were in Marion County. In order to determine what the community priorities were, all responses were collected, aggregated, and ranked. The rankings were determined based on the number of interviews in which the issue was identified as a priority.

Description of Prioritized Needs

1. Improving the Education System

This issue is being addressed, however there needs to be a strong connection between the home and school. The education system should also incorporate other services into the school, reaching a wider range of the general population, such as mental health services.

2. Public safety issues

Children are unable to walk to and from school, even within short distances because of safety concerns in their neighborhoods. The streets are crowded and narrow. The increase of violence due to an influence of drugs, such as heroin.

3. Substance Abuse and Mental Health

This is a big need because schools do not provide services and there is a lack of resources so most families go without. There is a lack of understanding what mental health is and there needs to be education on mental health before the issue can be fully addressed. For children, they may not be the substance abuser or have the mental illness, but experience the daily influence of it.

Note: Other issues were mentioned but since they were only mentioned once, they were not included in the prioritized needs. These included: healthy food options, community connectedness, decline/decay of the American family, asthma/allergies, teen pregnancy and obesity.

Electronic Community Survey Findings

A survey was administered electronically and by paper to residents in Marion County. There were two versions of the survey English and Spanish. The survey was sent to organizations within Marion County by the major hospitals participating in this Community Needs Health Assessment. Organizations were then asked to pass the survey on to other individuals in the community. These are the preliminary results from the survey. More detail regarding this survey will be added later by the hospitals participating in the Community Health Needs Assessment. Below you will find the results and figures related to each survey question for Marion County. A total of 893 (n=893) participants from Marion County have completed the

COMMUNITY HEALTH NEEDS ASSESSMENT

survey, representative of 14.66% of the survey pool.

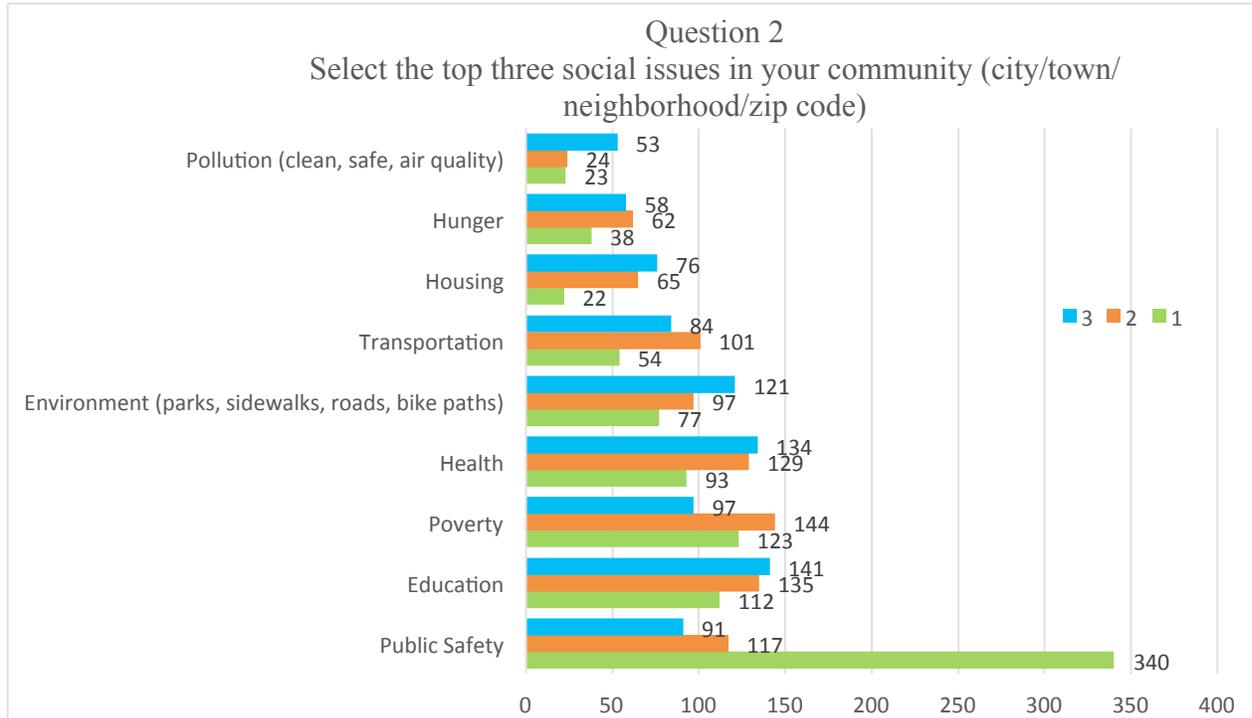


Figure 4 Survey responses to question 2 (n=892): “Select the top three social issue in your community (city/town/neighborhood/zip code).”

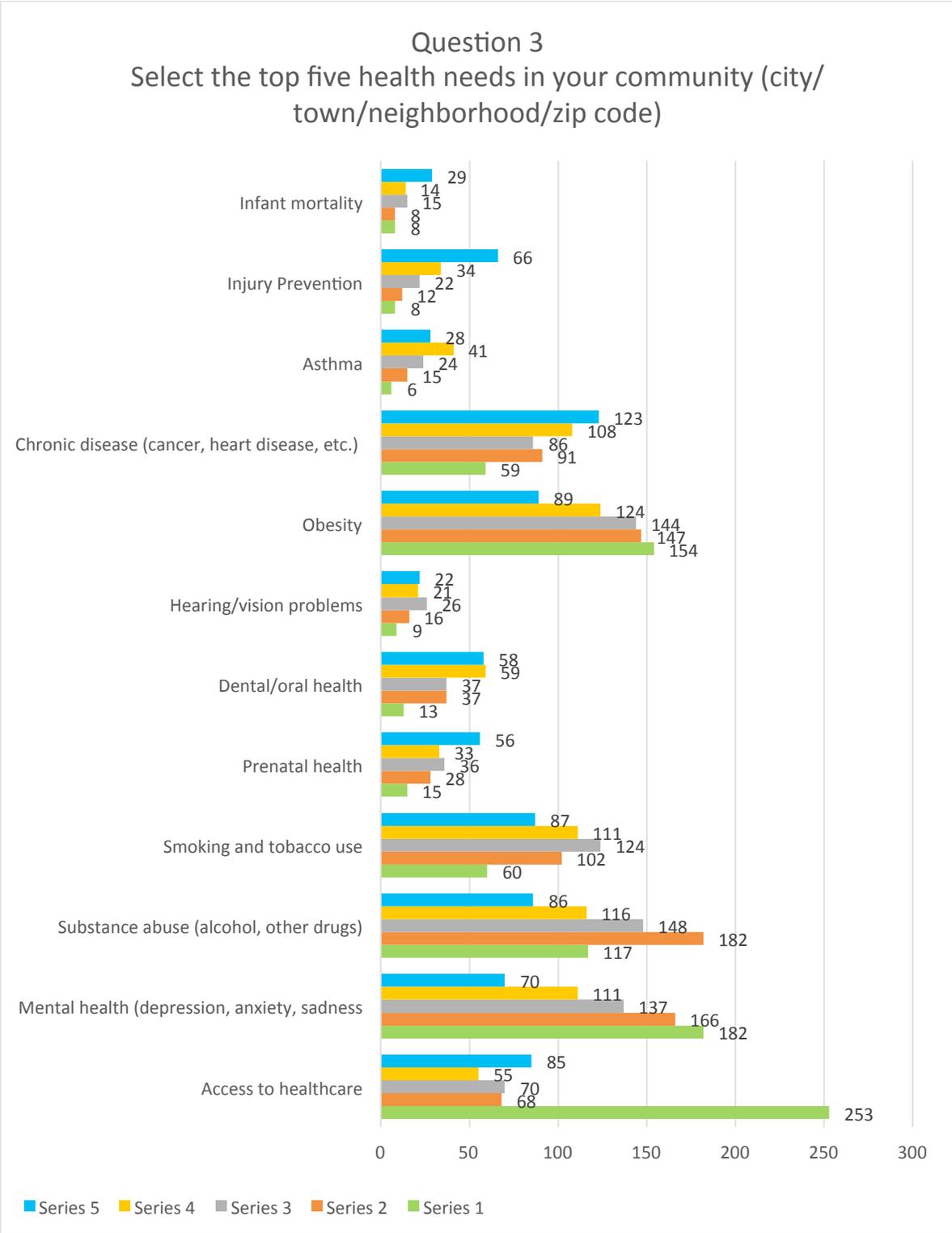


Figure 5 Survey responses to question 3 (n=892): Select the top 5 health needs in your community (city/town/neighborhood/zip code)

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Marion County-Julian Center

Introduction

A community health needs assessment (CHNA) is currently being worked on by 4 major hospitals in the Marion County area. Under a collaboration with IU Health, St. Francis Alliance, and St. Vincent; Community Health Network have been conducting surveys focused on finding the most prevalent health needs of the community. With this collaboration between the hospital networks there will be more information accumulated, which will make this CHNA more complete and able to reach a wider audience, than if this assessment was taken on by one hospital network. The following sections will outline the findings of focus groups taken place in Marion County.

Data Sources

The data collection is done through primary and secondary data. The primary data is collected through focus groups, these focus groups are in a group setting. The focus groups are first made into groups of 5 people to a group and they discuss their personal health issues in the community. Once they come up with their issues they discuss as a group and come up with their groups top 5-7 health needs as a whole. Furthermore, as a whole they come up with their top 5-7 needs in the community, the qualitative as well as quantitative data is taken down. The secondary data collection occurs through online databases and resources such as: SAVI, Indicators, Community Commons, County Health Rankings, and the Centers for Disease Control and Prevention (CDC), to find out the demographic, health indexes, and health issues.

Collaborating Organizations

The collaborating organizations for the CHNA are: Community Health Network, IU Health, St. Francis Alliance, and St. Vincent. All of the hospitals have been working in Marion County to try and get the most representation for the issues that are plaguing this area of Indiana.

COMMUNITY HEALTH NEEDS ASSESSMENT

This collaboration will ultimately be responsible for any expatiated change in policy, initiatives, or funding for issues that may be needed to improve the health needs of the community.

Definition of Community Assessed

Marion County is one of the least healthy counties in Indiana in reference to health outcomes, health behaviors, and health factors. Marion County is ranked number 89 out of 92 counties in the state and has the worst social & economic factors. They are falling behind in high school graduation (10%) below the Indiana average, children in poverty (30%) is 8% higher than the Indiana average, and violent crime (1,124) this is 790 more than the Indiana averages¹. These numbers exemplify issues that we see from the secondary data that we have accumulated, however there is more secondary data that needs to be examined in order to get a fair and detailed analysis of the community. The secondary data for Marion County will be explained further in the following sections.

Secondary Data

The following is information collected using the secondary sources listed above. This information includes demographics, economic indicators, insurance coverage, county health rankings, community health status indicators, zip-code specific data, medically underserved areas and populations, and information on medical professional shortages in Marion County.

Demographics. The total population for Marion County is 912,242 as of 2013. The population breaks down to 10.8% 65 or older, 64.23% 18 to 64 and 24.99% under age 18 (SAVI, 2013). The racial demographics for Marion County are 63.4% Caucasian and 26.83% African-American. The Hispanic community makes up 9.42% of the population. A majority of the community, 87.5%, use English as their household language. 7.67% use Spanish as their

household language and 4.83% use a language other than English or Spanish in their household. (SAVI, 2013).

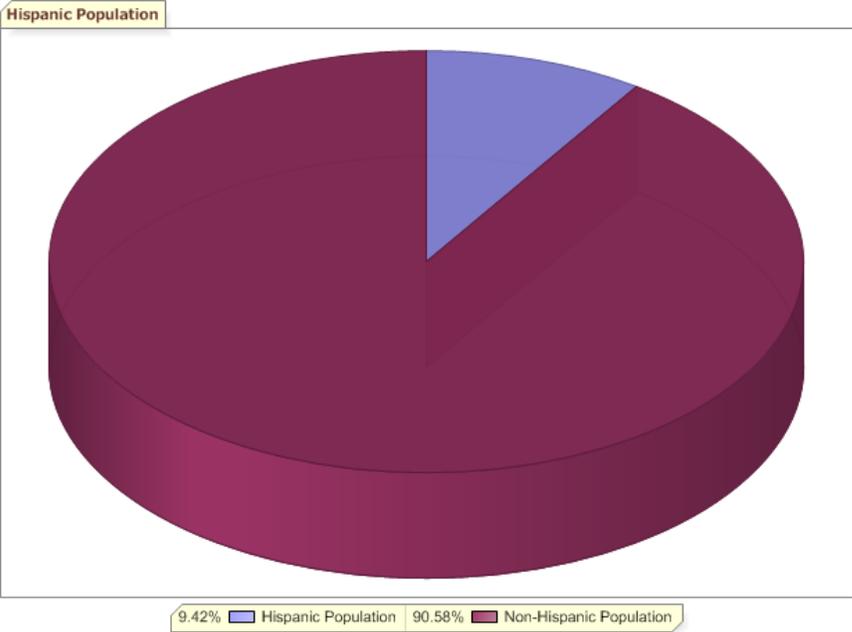


Figure 1: Hispanic Population in Marion County (SAVI, 2013)

Economic Indicators. The economy is one key factors that influence a community. Marion County has a large population of children under 18 living in poverty, 30.1%, which is higher than the 22% of children living in poverty in Indiana (Indicators, 2013 and Health Rankings, 2015). Education within Marion County is also lower than other surrounding counties and the state as a whole. The population of adults 25 and older without a high school diploma is 15.45%, 29.1% have only a high school diploma, 21.13% have some college, without a degree, 6.93% have an associate’s degree and 27.38% have a bachelor’s or higher (SAVI, 2013).

COMMUNITY HEALTH NEEDS ASSESSMENT

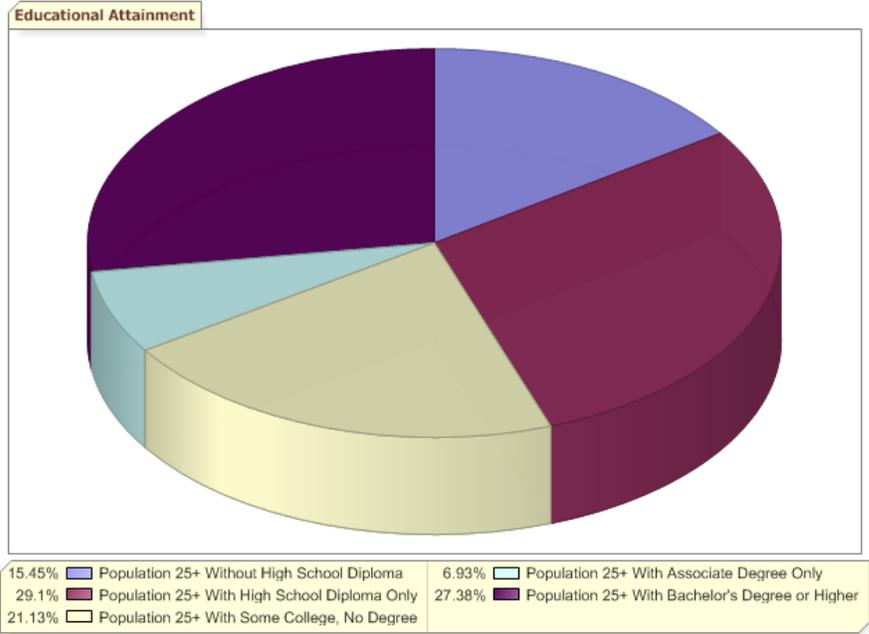


Figure 2: Educational attainment of Marion County (SAVI, 2013)

This lacking education is also a predictor of lower income. The median household income for Marion County is \$42,334, lower than all other surrounding counties, Figure 1 (SAVI, 2013). In addition, 13.87% of the homes in Marion County are vacant and another 38.03% are renter occupied units (SAVI, 2013).

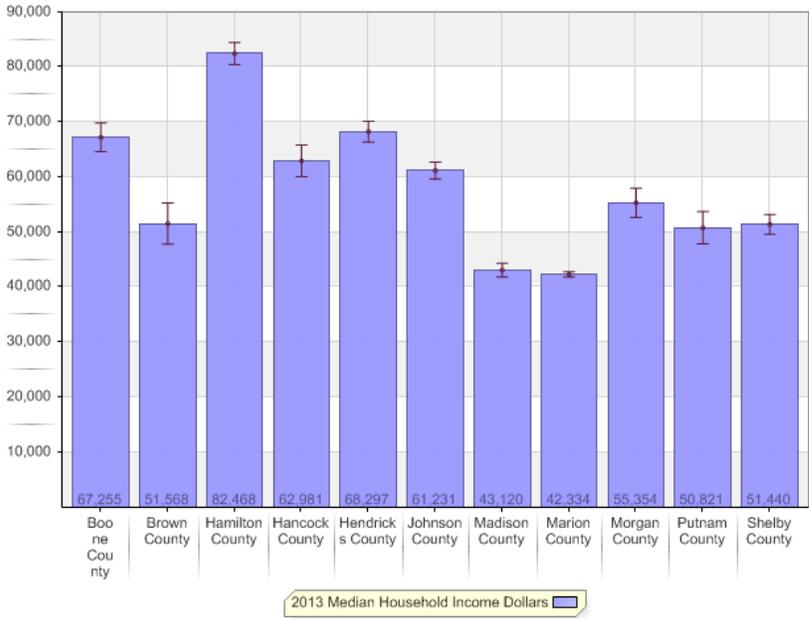


Figure 3: 2013 Median Household Income Dollars for Central Indiana counties

Insurance Coverage. The majority of Marion County residents have employer based healthcare insurance coverage, insuring 52.39% of the population. Residents under 65 who are uninsured reaches 18.85%, which is slightly higher than the state at 17% (SAVI, 2103 and Health County Rankings, 2015).

County Health Ranking. Marion County ranks 74th in the state for overall health outcomes. It is ranked 89th for health factors, such as adult smoking and adult obesity. It is exceptionally higher in the number of sexually transmitted infections and teen births, 1100 and 55, respectively, compared to the state, 451 and 39, respectively (County Health Rankings, 2015). Among social and economic factors, such as unemployment, children in poverty and violent crimes, Marion County is ranked last in the state, 92nd (County Health Rankings, 2015).

Community Health Status Indicators. According to the Center for Disease Control and Prevention (2015), Marion County ranks in the least favorable quartile for mortality, related to cancer, chronic kidney disease, chronic lower respiratory disease, female life expectancy and male life expectancy. For issues related to morbidity, such as adult obesity, overall adult health status, gonorrhea, older adult depression and syphilis, Marion County is ranked in the least favorable quartile. Health care access and quality are also in the last favorable quartile related to older adult preventable hospitalizations. Marion County ranks in the least favorable quartile for health behaviors related to adult physical inactivity, adult smoking and teen births. Marion County also ranks in the least favorable quartile for social factors related to children in single-parent households, inadequate social support, poverty, and violent crime. For issues related to the physical environment such as access to parks, annual average PM2.5 concentration (poor air quality) and limited access to healthy food, Marion County ranks in the least favorable quartile.

Zip Code-Level Health Access Indicators. This focus group was located at the Julian Center, in zip code 46202. This area of Marion County is located in the heart of downtown Indianapolis, but is still lacking in community resources. Data shows that high age-adjusted emergency hospitalization visits related to diabetes (38.7 per 10,000), long-term complications (19.6 per 10,000) and short-term complications (15.5 per 10,000).

Data shows high rates of emergency room visits due to respiratory diseases. Data shows high age-adjusted emergency visits for asthma (33.6 per 10,000), adult asthma (16.9 per 10,000) and pediatric asthma (81.8 per 10,000).

Another major health issue within this zip code is substance abuse. Data shows high hospitalization rates for alcohol abuse (19.3 per 10,000) in populations 18 and older (Community Health Network, 2015).

Medically Underserved Areas and Populations. The United States Department of Health and Human Services (2015) considers Marion County as a medically underserved area and population within Indiana.

Health Professional Shortage. Compared to other counties in Indiana, Marion County is doing fairly well among health professionals. There are approximately 1,254 patients for 1 primary care physician, compared to 1,518 patients for 1 primary care physician in Indiana. There are 1,273 patients for every 1 dentist in Marion County, compared to 1,973 patients for every 1 dentist in the state. Marion County is also doing better than the state in the number of mental health providers, 436 patients for every 1 provider, compared to 750 patients for every 1 provider. (County Health Rankings, 2015).

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Other Facilities and Resources Serving the Community. There are shelters, clinics, schools, and church programs that provide services and resources to residents. A list of resources in the community include:

Food Pantry	ACTION HEALTH CENTER - WIC OFFICE	46205
	ALBERT AND SARA REUBEN SENIOR AND COMMUNITY RESOURCE CENTER	46260
	ANNA'S HOUSE	46222
	BARNES WORSHIP CENTER WEST	46224
	BETHEL AFRICAN METHODIST EPISCOPAL CHURCH	46202
	BILLIE'S FOOD PANTRY	46222
	BLACKBURN HEALTH CENTER WIC OFFICE	46208
	BOULEVARD PLACE FOOD PANTRY - SAINT VINCENT DE PAUL	46208
	BRIDGEPORT CENTRAL BAPTIST CHURCH	46231
	BRIGHTWOOD COMMUNITY CENTER	46218
	BROAD RIPPLE UNITED METHODIST CHURCH	46220
	BROOKSIDE PARK AND FAMILY CENTER	46201
	CALVARY BAPTIST CHURCH	46235
	CATHEDRAL KITCHEN	46202
	CATHOLIC CHARITIES CRISIS OFFICE	46202
	CENTER TOWNSHIP TRUSTEE, MARION COUNTY	46204
	CENTRAL CHRISTIAN CHURCH	46204
	CHAPEL HILL UNITED METHODIST CHURCH	46214
	CHAPEL ROCK CHRISTIAN CHURCH	46214
	CHRIST CHURCH APOSTOLIC	46260
	CHRIST CHURCH OF GLORY	46220
	CHRIST UNITED METHODIST CHURCH	46227
	CHRISTAMORE HOUSE FAMILY AND COMMUNITY CENTER	46222
	CHURCH OF ACTS	46237
	CITY VIEW CHRISTIAN CENTER	46208
	COMMUNITY ALLIANCE OF THE FAR EASTSIDE (CAFE)	46226
	COMMUNITY CARING AND SHARING	46241
	COMMUNITY OUTREACH MINISTRY EASTSIDE (COME)	46229
	COTTAGE CORNER WIC CLINIC	46203
	DECATUR TOWNSHIP TRUSTEE, MARION COUNTY	46221
	DELIVERANCE TEMPLE	46226
	DIVINE DIRECTION CHRISTIAN CHURCH	46205
	EAGLE CREEK ASSEMBLY OF GOD	46254
	EAGLE CREEK COMMUNITY CHURCH	46254

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EDNA MARTIN CHRISTIAN CENTER	46218
EMMAUS LUTHERAN CHURCH FOOD PANTRY	46203
FAY BICCARD GLICK NEIGHBORHOOD CENTER AT CROOKED CREEK	46268
FIRST BAPTIST CHURCH OF INDIANAPOLIS	46240
FIRST FREE METHODIST CHURCH	46201
FLETCHER PLACE COMMUNITY CENTER	46203
FOREST MANOR HEALTH CENTER WIC OFFICE	46226
FOREST MANOR MULTI-SERVICE CENTER	46218
FOREST MANOR UNITED METHODIST CHURCH	46218
FRANKLIN TOWNSHIP TRUSTEE, MARION COUNTY	46237
GARFIELD PARK BAPTIST CHURCH	46203
GLEANERS COMMUNITY CUPBOARD	46241
GLENDALE SEVENTH-DAY ADVENTIST CHURCH	46220
GOD'S BOUNTY FOOD PANTRY	46239
GOODWIN COMMUNITY CENTER	46221
GRASSY CREEK HEALTH CENTER WIC OFFICE	46235
GREATER ONE WAY APOSTOLIC CHURCH	46218
GREATER SAINT MARK MISSIONARY BAPTIST CHURCH	46218
GREATER TRUE GOSPEL TABERNACLE	46218
HARVEST PRAYER CENTER	46254
HAWTHORNE COMMUNITY CENTER	46222
HEALTHNET BARRINGTON HEALTH & DENTAL CENTER	46203
HEATHER HILLS BAPTIST CHURCH	46229
HOLY FAMILY DAVID S. MOORE FOOD PANTRY	46203
HOLY NAME	46107
HOLY TRINITY PARISH	46222
HOOSIER VETERANS ASSISTANCE FOUNDATION (HVAF)	46204
HOPE AND HELP CENTER	46201
HOPE BAPTIST CHURCH	46214
HUNGER INC.	46227
IGLESIA DE MONTE DE SION	46222
IRVINGTON CHURCHES ADVOCACY NETWORK (ICAN) AT DOWNEY AVENUE CHRIS	46219
JOHN H. BONER COMMUNITY CENTER	46201
JR DALTON	46222
KEENAN-STAHN BOYS AND GIRLS CLUB	46203
KENNEDY KING PARK CENTER	46202
LA PLAZA WIC OFFICE	46226
LAKEVIEW CHURCH	46224
LAWRENCE TOWNSHIP TRUSTEE, MARION COUNTY	46226

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LIFE CHURCH	46234
LIGHT OF THE WORLD CHRISTIAN CHURCH	46228
LINWOOD CHRISTIAN CHURCH	46201
LIRIOS DE LOS VALLES	46221
LORD OF THE HARVEST CHURCH	46236
MARY RIGG NEIGHBORHOOD CENTER	46221
METRO BAPTIST CENTER	46204
MID-NORTH FOOD PANTRY	46208
MOUNT ZION BAPTIST CHURCH	46208
MOVIE THEATER CHURCH	46229
MEALS ON WHEELS OF CENTRAL INDIANA	46240
NATIONAL CHRISTIAN OUTREACH, COMPASSION CENTER	46203
NATIONAL SQUARE WIC CLINIC	46227
NEHEMIAH BIBLE CHURCH	46201
NEW BETHEL MISSIONARY BAPTIST CHURCH	46202
NEW JERUSALEM MISSIONARY BAPTIST CHURCH	46218
NEW REVELATIONS CHRISTIAN CHURCH	46236
NEW WINESKIN MINISTRIES	46254
NORTH ARLINGTON HEALTH CENTER WIC OFFICE	46218
NORTH UNITED METHODIST CHURCH	46208
NORTHSIDE BAPTIST CHURCH	46220
NORTHWOOD CHRISTIAN CHURCH	46205
NU CORINTHIAN BAPTIST CHURCH - INNER CITY MINISTRY, SANCTITY OF S	46205
OLD BETHEL UNITED METHODIST CHURCH	46219
OLIVE BRANCH CHRISTIAN CHURCH	46225
PERRY TOWNSHIP TRUSTEE, MARION COUNTY	46227
PIKE TOWNSHIP TRUSTEE, MARION COUNTY	46254
PROMISE LAND CHRISTIAN COMMUNITY CHURCH	46208
PURDUE EXTENSION - MARION COUNTY	46205
RAINBOW HOUSE FOOD PANTRY (EBENEZER MISSIONARY BAPTIST CHURCH)	46202
ROBERTS PARK UNITED METHODIST CHURCH	46204
SAINT CHRISTOPHER	46224
SAINT JOHN'S EPISCOPAL CHURCH	46224
SAINT JOHN'S MISSIONARY BAPTIST CHURCH	46202
SAINT LUKE MISSIONARY BAPTIST CHURCH	46218
SAINT SIMON THE APOSTLE CATHOLIC CHURCH	46236
SAINT TIMOTHY EPISCOPAL CHURCH	46227
SAINT VINCENT DE PAUL CLIENT CHOICE FOOD PANTRY	46218
SALVATION ARMY EAGLE CREEK CORPS	46254

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	SALVATION ARMY FOUNTAIN SQUARE CORPS	46203
	SCOTT UNITED METHODIST CHURCH	46202
	SECOND HELPINGS	46202
	SERVANT'S HEART OF INDY	46203
	SHARING PLACE	46236
	SHEPHERD COMMUNITY CENTER	46201
	SHILOH MISSIONARY BAPTIST CHURCH	46226
	SOUTHEASTERN CHRISTIAN FELLOWSHIP CHURCH	46203
	SOUTHEASTERN CHURCH OF CHRIST	46203
	TABERNACLE PRESBYTERIAN CHURCH	46205
	TEAR DOWN THE WALLS	46208
	TRINITY CHRISTIAN METHODIST EPISCOPAL CHURCH	46205
	TUXEDO PARK BAPTIST CHURCH	46201
	UMOJA CHRISTIAN CHURCH	46222
	VIDA NUEVA UNITED METHODIST CHURCH - CENTRO FAMILIAR	46222
	WARREN TOWNSHIP TRUSTEE, MARION COUNTY	46219
	WASHINGTON TOWNSHIP TRUSTEE, MARION COUNTY	46220
	WAYNE TOWNSHIP TRUSTEE, MARION COUNTY	46241
	WESTMINSTER NEIGHBORHOOD MINISTRIES	46201
	WESTSIDE HEALTH CENTER WIC OFFICE	46222
	WHEELER MISSION CENTER FOR WOMEN AND CHILDREN	46201
	WHEELER MISSION SHELTER FOR MEN	46204
	AMERICAN INDIAN CENTER OF INDIANA	46201
	CONCORD NEIGHBORHOOD CENTER	46225
Employment Assistance	FLANNER HOUSE OF INDIANAPOLIS	46208
	FOREST MANOR MULTI-SERVICE CENTER	46218
	GOODWILL INDUSTRIES OF CENTRAL INDIANA	46222
	HAWTHORNE COMMUNITY CENTER	46222
	HOOSIER VETERANS ASSISTANCE FOUNDATION (HVAF)	46204
	INDIANAPOLIS MARION COUNTY HUMAN RESOURCES DIVISION	46204
	JOHN H. BONER COMMUNITY CENTER	46201
	KEYS TO WORK	46202
	MARION COUNTY PROSECUTOR'S OFFICE	46204
	MARY RIGG NEIGHBORHOOD CENTER	46221
	NATIONAL ABLE NETWORK, INDIANA HEADQUARTERS	46208
	PACE, INC. (Public Advocates in Community Re-Entry)	46218
	PUBLIC ADVOCATES IN COMMUNITY RE-ENTRY (PACE)	46218
	VOCATIONAL REHABILITATION SERVICES - AREAS 13 AND 14	46256
	VOCATIONAL REHABILITATION SERVICES - AREAS 15 AND 16	46241

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	VOLUNTEERS OF AMERICA - STRIVE INDY	46202
	WORKONE EXPRESS AT COLLEGE PARK, MARION COUNTY	46278
	WORKONE WEST - MARION COUNTY	46222
Mental Health	ESKENAZI HEALTH	46202
	ACTION HEALTH CENTER - MARION COUNTY HEALTH DEPARTMENT	46205
	ADULT AND CHILD - EAST OHIO STREET	46204
	ADULT AND CHILD - MADISON AVENUE	46227
	ARCHDIOCESE OF INDIANAPOLIS	46202
	ASIAN HELP SERVICES	46205
	ASPIRE INDIANA - INDIANAPOLIS	46205
	BROOKE'S PLACE FOR GRIEVING YOUNG PEOPLE	46240
	CATHOLIC CHARITIES INDIANAPOLIS	46202
	CHILDREN'S BUREAU - NEIGHBORHOOD ALLIANCE FOR CHILD SAFETY (NACS)	46218
	CHRISTIAN THEOLOGICAL SEMINARY COUNSELING CENTER	46208
	COMMUNITY HEALTH PAVILION SHADELAND	46219
	COMMUNITY HOSPITAL NORTH BEHAVIORAL HEALTH PAVILION	46256
	CUMMINS BEHAVIORAL HEALTH SYSTEMS - INDIANAPOLIS	46241
	FAMILIES FIRST - CENTRAL OFFICE	46204
	FRANCISCAN SAINT FRANCIS - OUTPATIENT BEHAVIORAL HEALTH SERVICES	46227
	HEALTHNET BARRINGTON HEALTH AND DENTAL CENTER	46203
	HEALTHNET MARTINDALE BRIGHTWOOD HEALTH AND DENTAL CENTER	46218
	HEALTHNET SOUTHEAST HEALTH AND DENTAL CENTER	46203
	HEALTHNET SOUTHWEST HEALTH AND DENTAL CENTER	46221
	HEALTHNET WEST HEALTH CENTER	46224
	INDIANA COALITION AGAINST DOMESTIC VIOLENCE (ICADV)	46202
	INDIANA UNIVERSITY HEALTH METHODIST HOSPITAL	46202
	INDIANA WESLEYAN UNIVERSITY GRADUATE COUNSELING CLINIC	46278
	LEGACY HOUSE	46218
	LIBERTAD COUNSELING	46224
	MARY RIGG NEIGHBORHOOD CENTER	46221
	MENTAL HEALTH AMERICA OF GREATER INDIANAPOLIS	46205
	MIDTOWN COMMUNITY MENTAL HEALTH - ESKENAZI HEALTH	46202
	MIDTOWN MENTAL HEALTH - DR. JAMES J. WRIGHT CENTER	46202
	MIDTOWN MENTAL HEALTH CENTER - ESKENAZI HEALTH	46208
	MIDTOWN WESTSIDE CLINIC - ESKENAZI HEALTH	46224
	MOUNT ZION APOSTOLIC CHURCH	46218
	PEOPLE'S HEALTH CENTER	46201
	REACH FOR YOUTH - CENTER TOWNSHIP OFFICE	46205
	RICHARD L. ROUDEBUSH VETERANS AFFAIRS MEDICAL CENTER (VAMC)	46202

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RILEY HOSPITAL FOR CHILDREN AT INDIANA UNIVERSITY HEALTH	46202
SAINT VINCENT INDIANAPOLIS STRESS CENTER	46260
UNIVERSITY OF INDIANAPOLIS PSYCHOLOGICAL SERVICES CENTER	46227

These organizations provide a variety of services from education, mental health, nutrition, physical activity, housing services, health care services, dental services, and after school programs for residents.

Focus Group Findings

A focus group was held on Thursday, June 11, 2015 from 11:30am to 1:30pm at The Julian Center in downtown Indianapolis. The following is a detailed description of the event and the topics discussed during the event.

Identification of Participants. The focus group was comprised of 34 citizens of Marion County. Many of the participants worked with an organization and/or were current or former residents of the Julian Center. The following is a list comprised of the represented organizations at the focus group: Domestic Violence Network (3), Families First, Coburn Place (5), Father and Families, Substance Abuse Counselor, Marion County Prosecutors Office, The Julian Center (7), and survivors of violence (15). The demographics for this focus group were: 31 women, 3 men.

Prioritization Process and Criteria. Facilitators instructed participants to sit at one of three tables in the room. Dan Hodgkins and Ann Yeakle, both from Community Health Network, introduced themselves and set some ground rules for the focus group. These ground rules included, no media/photography, being respectful of situations and discussions made during the time there, and appropriate humor. Within each table, the attendees were asked to introduce themselves to the table and to share the organizations they were with, if they felt comfortable. First, participants were asked to individually write down the top ten concerns for the community

COMMUNITY HEALTH NEEDS ASSESSMENT

on Post-it notes. Then facilitators assigned each table with the task of identifying the top five concerns for the community through table discussion about the participants' top eight individual concerns. This discussion lasted approximately 30-35 minutes and topic tallies were aided by a facilitator, who did not participate in the discussion. The facilitator at each table shared the top five concerns of the table's discussions with the rest of the room. Each facilitator presented their group's top five concerns and the groups discussed any additional concerns they had about the community. Jake Hartmeister from Indiana University, Laynie Mason from Marian University and Zach Lotfalian from Indiana University tallied and grouped closely related issues to finalize a list of the top five concerns for the community after the meeting.

Description of Prioritized Needs. The top five priority concerns for the community were identified and grouped as A) education, B) crime, C) recreational and youth programs, D) healthcare, E) community livability.

Education- This category was very broad and included: latent education for self-awareness, self-worth and self-esteem beginning at a young age in schools, healthy relationships and conflict resolution in schools, job training for adults, domestic violence education, domestic violence training for first responders, and sexual assault education.

Crime- This focused on crime prevention and safety in neighborhoods.

Recreational and youth programs- This topic included a lot of issues such as affordable summer programs, affordable after school programs, safe parks and places for children to play, and community connectedness.

Healthcare- This topic included mental health/substance abuse, insufficient services, navigating the healthcare system, senior care, access to emergency services, prenatal and maternal care and affordability.

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Community Livability- This is an overarching topic of what it is to live in a livable community and what it is lacking. Transportation-to and from jobs, school, grocery stores, appointments, health care facilities. Jobs with livable wages. Housing-safe, affordable, transitional. Food-access to healthy foods, removal of food deserts, food insecurity. The overall message from this focus group was that these items cannot be prioritized over one another because they correlate. Without the five concerns mentioned, people will never be able to escape poverty, they will never learn what healthy relationships are or how to have them, and there will never a sense of community or livability if these issues are not addressed.

Electronic Community Survey Findings

A survey was administered electronically and by paper to residents in Marion County. There were two versions of the survey English and Spanish. The survey was sent to organizations within Marion County by the major hospitals participating in this Community Needs Health Assessment. Organizations were then asked to pass the survey on to other individuals in the community. These are the preliminary results from the survey. More detail regarding this survey will be added later by the hospitals participating in the Community Health Needs Assessment. Below you will find the results and figures related to each survey question for Marion County. A total of 893 (n=893) participants from Marion County have completed the

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survey, representative of 14.66% of the survey pool.

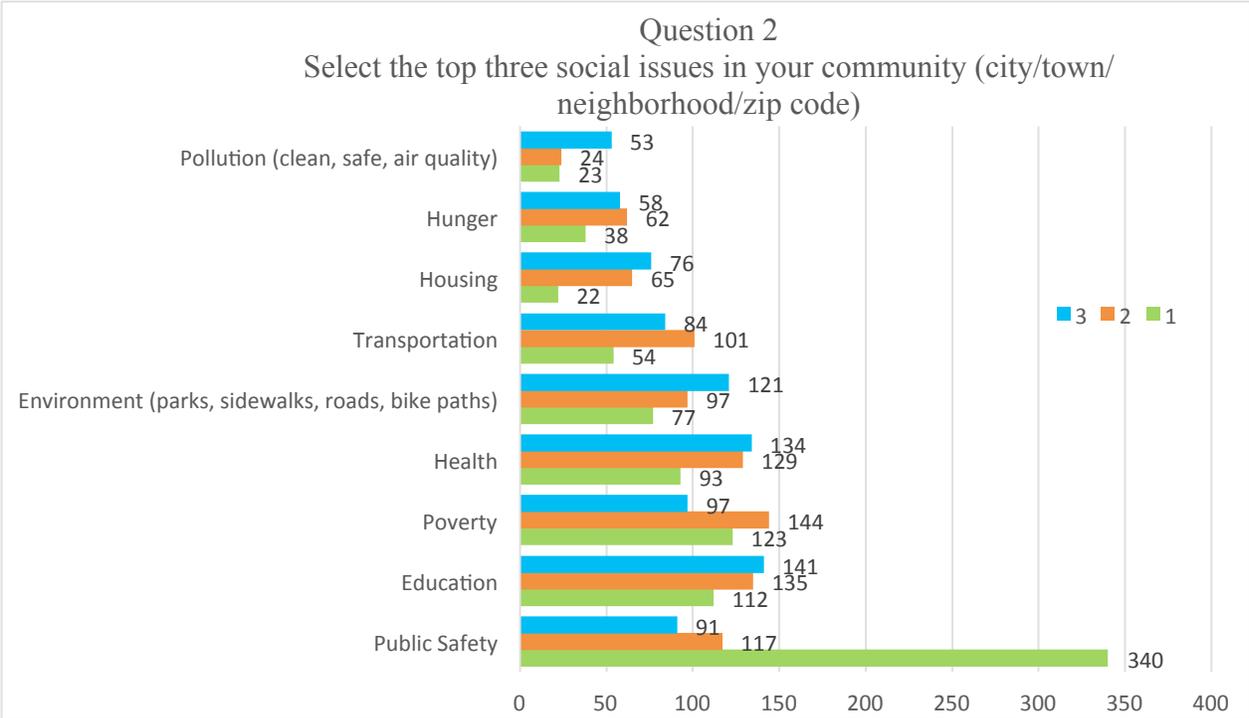


Figure 4 Survey responses to question 2 (n=892): “Select the top three social issue in your community (city/town/neighborhood/zip code).”

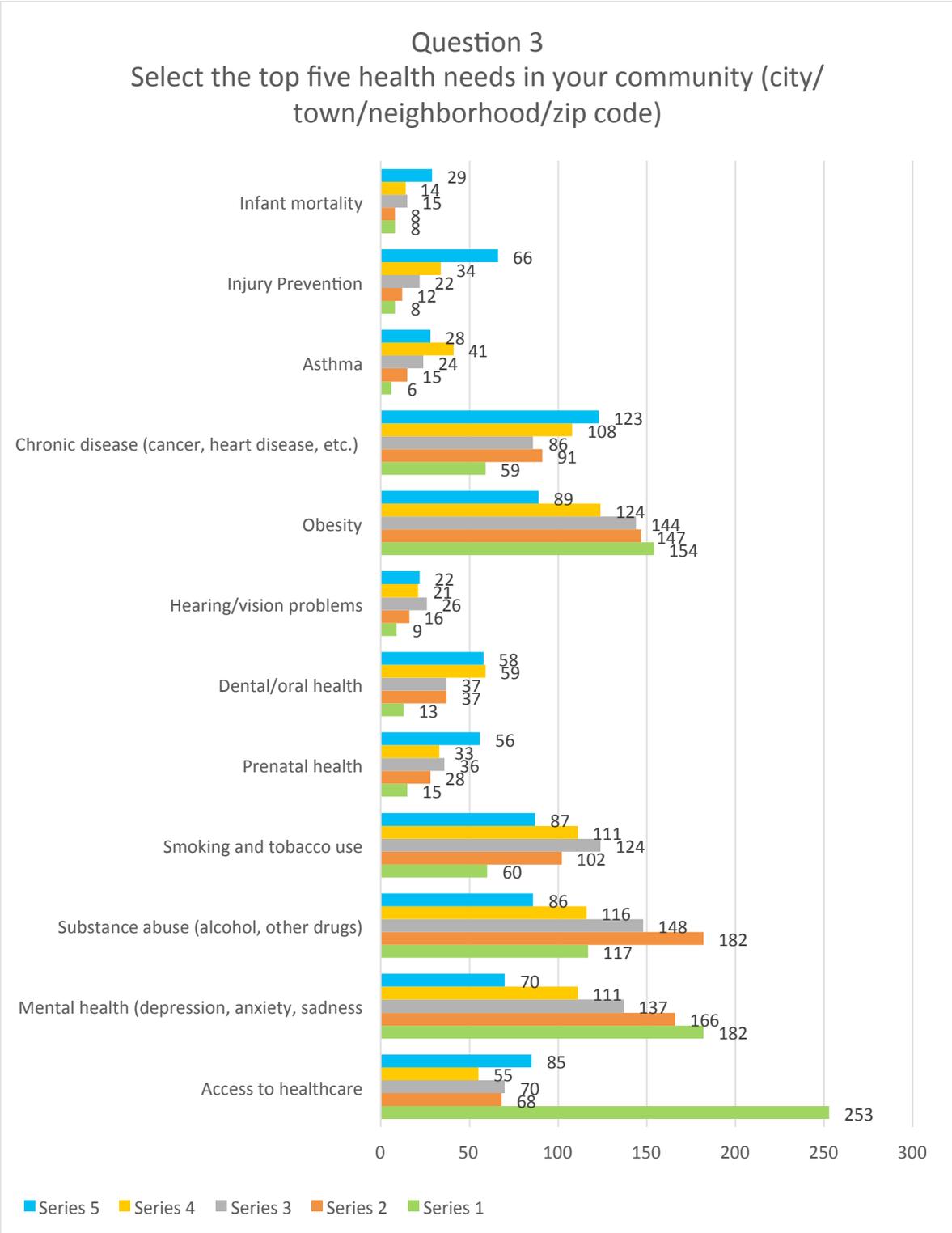


Figure 5 Survey responses to question 3 (n=892): Select the top 5 health needs in your community (city/town/neighborhood/zip code)

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Marion County-Burmese population

Introduction

The primary source of data collection for the CHNA was the community meeting that took place February 24, 2015, and the windshield survey conducted.

Data Sources

While there were a number of participants present, the leading participating organization was Franciscan St. Francis Health, due to its position as the meeting facilitator. The stakeholders/meeting participants are identified below:

Stakeholders/ Meeting Participants

Baxter Branch, YMCA	Perry Township Schools
Nursing Supervisor	Franciscan St. Francis Health
Unit Manager, Post Partum	Community Health Network
Health Navigator	Exodus Refugee Immigration, Inc.
Nurse	Marion County Public Health Department
Medical Social Worker	St. Francis Family Medicine Center
Supervisor of Resettlement Services	Catholic Charities Indianapolis
Marketing and Community Relations Manager	Exodus Refugee Immigration, Inc.
Resettlement Coordinator	Franciscan St. Francis Health
Dietician	Exodus Refugee Immigration, Inc.
Indianapolis Marion County Public Library-Southport Branch	Coram CVS
Outreach Coordinator	Library Director
Patient Education Coordinator	MDwise, INC
Service Excellence Manager	Franciscan St. Francis Health
Regional Director of Marketing	Franciscan St. Francis Health
Director	Cardon and Associates, Inc.
Director	Burmese American Community Institute
OB Nurse Navigator	Center for Interfaith Cooperation
Director	Franciscan St. Francis Health

Table 1: Stockholder/Meeting Participants

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Definition of Community Assessed

The community assigned to this project was Marion County and the specific community within Marion County the project focused on was the Burmese population. In order to understand some of the obstacles faced by this population it is essential to acquire background information of their home country. Generally, people from Burma are referred to as “Burmans,” but to keep consistency throughout the project, they were referred to as “Burmese.” Additionally, referring to the country as “Burma” can also be disputed because some have been calling it Myanmar since 1989. However, those who do not recognize the legitimacy of the ruling military dispute the name change, therefore it will be referred to as Burma in this report (Bridging Refugee Youth & Children’s Services, 2010).

There are over 130 cultural groups in Burma (Bridging Refugee Youth & Children’s Services, 2010). Burmese make up the majority with 68% and 42% are the other ethnic groups such as the Chin, Kachin, Karen, Mon, Rakhine, Shan, and Wa (Bridging Refugee Youth & Children’s Services, 2010). Its geographic location bordering Bangladesh, India, China, and Thailand, explains why it is so culturally diverse. Burma is divided into seven states and seven regions that are largely ethnic based. Most Burmese live in rural villages. Burma is a politically unstable country and this affect can be seen through its economy and commercial activities. Burma has been under military rule since 1962 and is the source of an alarming refugee crisis (Ranard, 2012).

In 1885 England colonized all of the Burmese territory (Ranard, 2012). This colonization created further ethnic divisions in the country. For example, a central part of colonist rule was creating clear lines between the geographic regions of the country. The British divided those living in the central plains and ethnic minorities in the hills (Ranard, 2012). Missionaries were also a presence in the earlier part of the country. They encouraged schools and hospitals to be built in the hills and encouraged many to convert to Christianity (Ranard, 2012).

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When colonialism left the country, it also left a legacy of social issues. The social issues were magnified by the time World War II began. Minority groups such as the Karen and Chin remained loyal to the British while other sects such as the Burman Independence army joined with imperial Japan. (EthnoMed, 2010). In 1949 the Karen insurgency began and the country went through decades more of military regimes. In the 1990s the country came to a cease fire but the decades of fighting created poor economic infrastructure and human rights abuses continue to take place (EthnoMed, 2010).

The cultural factors are important to highlight because they give context to the issues identified later in the paper. Friendship is an important cultural value among Burmese. Friendships are thought of as close relationships where there is an expectation private thoughts and feelings will be shared (IOM Bangkok, 2005). If it is not, that can be cause for the demise of the friendship. There is a trait that others have come to recognize with Burmese people called *ah-nar-de*. It is the feeling of not wanting to impose on others (IOM Bangkok, 2005). In the Burmese household, the husband is considered the spiritual leader and women are expected to do the housework. However, once a family moves the U.S. these roles change and both parents begin to provide for the family (Ethno Med).

There are over 11,500 Burmese Refugees in the city of Indianapolis as of August 1, 2014 (Baci, 2014). Many refugees come to Indiana in an effort to escape political and religious persecution. Some have spent years in refugee camps without structured education and opportunities for employment. There are two primary locations in the city for resettlement. The first is the south side of Indianapolis and the second Burmese community is in the Nora area. The major ethnic group on the south side of Indianapolis is Chin, while the north side is composed primarily of Karen.

Indianapolis is also the location of secondary migration, where individuals come from a previously settled place other than their home country. Of the many reasons Burmese refugees settle in Indianapolis the top three are: 1) low cost of living; 2) largest Burmese community; and 3) more job opportunities that require little English proficiency (Health and Hospital Corporation, 2012).

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Secondary Data

The secondary sources primarily used for the remainder of this report are:

- SAVI
- HRSA
- Indiana State Department of Health
- Indiana Indicators
- CDC

County Health Rankings

Marion County ranks 78th for health outcomes and 86th for health factors (University of Wisconsin Population Health Institute, 2015). Health outcomes measure length and quality of life. Examples of health outcomes are premature death, low birth weight, and poor physical or mental health days. Health factors are what influences the health of a county. There are four types measured including: health, behaviors, clinical care, social and economic, and physical environment.

Demographics

The demographics below are based on 2012 SAVI findings:

Population Demographic

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Median Age	33.9 (N/A)
Population Under Age 5	68, 480 (N/A)
Population Age 5 to 9	61, 902 (6.84%)
Population Age 10 to 14	60, 430 (6.68%)
Population Age 15 to 19	61, 109 (6.76%)
Population Age 18 and Over	677, 481 (74.9%)
Population Age 20 to 24	68, 364 (7.56%)
Population Age 21 and Over	639, 139 (70.7%)
Population Age 25 to 34	145, 744 (16.1%)
Population Age 35 to 44	119, 350 (13.2%)
Population Age 45 to 54	126, 221 (14%)
Population Age 60 to 64	53, 690 (5.94%)
Population Age 62 and over	42, 408 (4.69%)
Population Age 65 to 74	119, 845 (13.2%)
Population Age 75 to 84	51,145 (5.65%)
Population Age 85 and Over	32, 290 (3.57%)
Population under age 18	13, 402 (1.48%)
Population age 18-64	580, 644 (N/A)
Population age 65 and over	96, 837 (10.7%)
Median Age	33.9 (N/A)
Population Under Age 5	68, 480 (N/A)
Population Age 5 to 9	61, 902 (6.84%)
Population Age 10 to 14	60, 430 (6.68%)
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Population under age 18	13, 402 (1.48%)
Population age 18-64	580, 644 (N/A)
Population age 65 and over	96, 837 (10.7%)

Table 2: Population Demographics. Retrieved from: SAVI, 2012

Language Proficiency

Household Language other than English or Spanish	16, 601 (4.62%)
Household Language of English	316, 152 (88%)

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Household Language of Spanish	26, 685 (7.42%)
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Table 3: Language Proficiency. Retrieved from SAVI, 2012

Race Ethnicity

Minority Population	364, 478 (N/A)
Hispanic Population	83,186 (9.2%)
Non-Hispanic Population	821, 349 (90.8%)
African American Population	239, 965 (26.5%)
American Indian Population	2,274 (0.251%)
Asian Population	18, 219 (2.01%)
Caucasian Population	580, 773 (64.2%)
Hawaiian/ Pacific Islander Population	129 (0.014%)
Multiple Race Population	25, 377 (2.81%)
Other Race Population	37, 798 (4.18%)

Table 4: Race Ethnicity. Retrieved from SAVI, 2012

Economic Indicators

Population in the Labor Force, Including Armed Forces	481, 283 (N/A)
Population not in the labor force	220, 522 (31.4%)
Population with blue collar	169, 314 (N/A)
Population with white collar	257, 412 (N/A)
Households with Income Less than \$10,000	31, 796 (8.85%)
Households with income \$50,000 to \$74, 999	63, 124 (17.6%)
Families in Poverty	31, 774 (15%)
Population Age 5 and under living in Poverty	26, 112 (33.1%)
Population Age 6 to 17 Living in Poverty	38, 392 (26.9%)

Table 5: Economic Indicators Retrieved from SAVI, 2012

Insurance Coverage

Total	902, 000 (14%)	50, 674, 000 (17%)
Under Age 65	898, 000 (16%)	49, 998, 000 (19%)
Under Age 18	141, 000 (9%)	7, 513, 000 (10%)
Age 65+	5,000 (0.6%)	676, 000 (1.8%)

Table 6: Insurance Coverage Retrieved from: Indiana State Department of Health for the State of Indiana, 2011

Community Health Status Indicators

According to the CDC, Marion County does better than its peers in its adult binge drinking behaviors and drinking water violations. However, in a number of other categories it is considered worse.

The other categories are:

Health Status Indicator

Cancer deaths	Adult smoking	Teen births	F/ life expectancy
Adult Obesity	Poverty	Older adult depression	M/ life expectancy

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Older adult preventable hospitalizations	Limited Access to healthy food	Adult overall health status	Chronic kidney disease deaths
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Table 7: Health Status Indicator Retrieved from: CDC Community Health Status Indicators, 2015

Zip Code-Level Health Access Indicators

Table 8

Access to Health Care Services & Public Health Capacity

Adults 18-64 who lack health insurance	24.0%
Children under 18 who lack health insurance	7.0%
Adults who could not see a doctor in last 12 months due to cost	15.9%
Primary Care Physicians to population ration	614.0
Local Health Department Staffers to population ratio	1, 291.0

Note. From Marion County Indicators, 2013

Health Professional Shortage Areas

- Dental Care
- Mental Health
- Primary Care Physicians

Medically Underserved Areas (MUA) and Populations

Using the HRSA shortage areas portal, the MUA for Dental Care is the low-income population near the north side of Indianapolis and the low-income population in the Highland Brookside area. In the category of mental health the MUA is the low-income population on the northeast side of Indianapolis. Lastly, in the category of primary care physicians the MUA is the Forest Manor area (HRSA, 2015).

Description of Other Facilities and Resources within the Community

There are a number of health care facilities in the area including hospitals, surgery centers, clinics, and emergency care centers. There are also a number of churches and parks. The areas that can be potential health issues are the number of fast food restaurants. Better nutrition was a topic that was identified during the brainstorm but was not considered a pressing issue.

Focus Group Findings

The 5 most pressing health issues based on the group’s activities and thoughts shared are:

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- Child Safety
- Access
- Education
- Cultural/Language Barrier
- Professional Training

Child Safety- There should be an overview on areas such as appropriate uses for car seats, the benefits of vaccines, nutrition, and prenatal care involving the overuse of formula.

Access to Care- More seminars need to be provided in order to help the community learn more about the American System.

Education- More workshops, newsletters, and mentors for the community are desired in order to help the Burmese adapt to this new environment.

Cultural- A standardized cultural assessment tool should be created. State, local, and regional conferences would be a great way to start networking with providers on how this can be implemented. Additionally, there are big issues with interpreters and coverage of Medicaid reimbursement. Hospitals front the cost or just do not provide it. Penalties are nonexistent because there are no consequences for not participating.

Professional Training- There needs to be an element of cultural competence among those that are providing the healthcare to this community.

As the results show, a large part of the issues in the priority areas have roots in the lack of access to care and the barriers associated with it. Professional training is a high priority because it is important to understanding the population seeking care and how best to provide health services. The language and cultural barrier also present a challenge both for the Burmese and health care providers. The immediate needs of the population may not be assessed because of cultural characteristics such as modesty and politeness. For example, within the Burmese culture restraining from asking questions is a way of showing respect and not imposing on others.

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Additionally, the lack of child safety and parental supervision in different situations such as waiting for the school bus was discussed from the perspective of a cultural difference that just needs to be learned. A more active role of educating Burmese refugees on the various parts of the American health care system would be beneficial to their adjustment in the U.S. The next steps will be the development of a task force to start the implementation process.

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Marion County- Near Eastside

Data Sources

The following are the secondary data sources used to collect health information on Marion County and more specifically the Near Eastside community. Sources include, SAVI, Near Eastside Community Organization, Franciscan Alliance, Marion County Public Health Department, United States Department of Health and Human Services, University of Wisconsin Population Health Institute, and Robert Wood Johnson Foundation and the Centers for Disease Control and Prevention. Information obtained from these data sources can be found in the following sections of this paper.

Collaborating Organizations

This Community Needs Health Assessment is a collaboration between four major hospitals in Indiana. These hospital corporations include, Community Health, Franciscan Alliance, Indiana University Health, and St. Vincent.

Definition of Community Assessed

The community of interest for the health assessment was the Near Eastside. The boundaries of the Near Eastside community are “Massachusetts Avenue, 21st street, the Conrail tracks to the south, Emerson Avenue to the East, and I-65 to the west” (NESCO, 2013). The Near Eastside is home to over 20 different neighborhoods. This community is located east of downtown Indianapolis (SAVI, 2015).

Secondary Data

The following is information collected using the sources listed above. This information includes demographics, economic indicators, insurance coverage, county health rankings, community health status indicators, zip-code specific data, medically underserved areas and populations, and information on medical professional shortages in Marion County and the Near Eastside.

Demographics. The total population of the Near Eastside Neighborhood is 28,820 as of 2012. The population on the Near Eastside is 65.55% 18 to 64 year olds, 27.73% individuals under the age of 18, and 6.71% individuals 65 years old and over. The racial makeup is majority White (63.93%) and Black (27.85%). Regarding the Hispanic population, 12.09% of the population identifies as Hispanic. This percentage is higher than the percentage of Hispanic population in Marion County, which is 9.2%. The majority of the community use English as their household language (91.58%), however 7.22% speaks Spanish in their home (SAVI, 2014).

Economic Indicators. There are a plethora of indicators that can determine the economy of a community. Some of those include educational attainment, employment rates, and income. Poverty is a major indicator of the economy in a community. Of individuals living on the Near Eastside 41.9% of the population is living in poverty and 58.1% of the population has an income at or above the poverty level.

The educational attainment for adults on the Near Eastside is low compared to Marion County as a whole. Of individuals living on the Near Eastside, 30% have no High School Diploma, 34% have a High School Diploma, 17% have some college experience, 10% have a Bachelor's degree and 4% have a Bachelor's degree or higher. Of individuals living in Marion County, only 16% have no High School Diploma and more individuals have received higher

education. Not surprisingly with the lower educational attainment, the median family income on the Near Eastside is also significantly lower than the median family income in Marion County. On the Near Eastside the median family income is \$32,934. Marion County's median family income is \$54,442.

Along with a low median family income, there is also a large amount of homes in foreclosure on the Near Eastside. The Near Eastside has had the highest foreclosure rate in Marion County from 2007 to 2011. The foreclosure rate on the Near Eastside is double the national foreclosure rate, with 11% of mortgages in foreclosure on the Near Eastside and 5.5% nationwide. Of the foreclosures in Marion County, 10% are on located on the Near Eastside.

The unemployment rate on the Near Eastside is high compared to the overall unemployment rate in Marion County. In 2009, 16.49% of individuals living on the Near Eastside were unemployed. This rate has gone up and in 2012, 19.9% of individuals living on the Near Eastside were unemployed. The percentage of individuals unemployed in Marion County was 7.68% in 2012 (SAVI, 2015).

Insurance Coverage. A majority of individuals living on the Near Eastside have public health insurance or no health insurance. Of individuals living on the Near Eastside 10,710 have private health insurance, 14,619 have public health insurance and 8,028 have no insurance (Franciscan Alliance, 2015).

County Health Ranking. When looking at the Near Eastside health in regards to the county in which it is located, Marion County is ranked number 78 out of 92 in health outcomes and number 86 out of 92 in overall health factors. Compared to other counties in Indiana Marion County is a lower ranked county (University of Wisconsin Population Health Institute, 2015).

Community Health Status Indicators. According to the Centers for Disease Control and Prevention (2015), Marion County is doing poorly when it comes to Community Health Status Indicators. Marion County was in the least favorable quartile for mortality related to cancer deaths, chronic kidney disease deaths, chronic lower respiratory deaths, female life expectancy, and male life expectancy. Marion County was in the least favorable quartile for morbidity related to adult obesity, adult overall health status, gonorrhea, older adult depression, and syphilis. Health care access and social factors were also in the least favorable quartile related to adult smoking, adult inactivity, and teen births. Lastly, social factors such as children in single-parent households, inadequate social support, poverty, violent crime, access to parks, and limited access to healthy food were ranked in the least favorable quartile.

Zip Code-Level Health Access Indicators. More specifically within the Near Eastside, the St. Franciscan Alliance is concerned with the zip code 46201. This zip code is where there are not a lot of community resources available and is home to a transient population. Data from 46201 shows that there are high age-adjusted emergency room visit rates in regards to diabetes (67.60 per 10,000 people) long-term complications of diabetes (21.60 per 10,000 people) and uncontrolled diabetes (4.5 per 10,000 people).

Data also shows that there are high rates of emergency room visits due to respiratory diseases. Age-adjusted emergency room visit rates due to adult asthma are 124.1 per 10,000 people. Age-adjusted rates due to emergency room visits for asthma (136 per 10,000), Chronic Obstructive Pulmonary Disease (78.7 per 10,000), and pediatric asthma (170 per 10,000) are also high.

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Substance abuse also appears to be a major health issue for this zip code. There are high rates of emergency room visits (123.5 per 10,000) and hospitalizations (15.3 per 10,000) due to alcohol abuse (Franciscan Alliance, 2015).

Medically Underserved Areas and Populations. The United States Department of Health and Human Services (2015) considers the Near Eastside Community as a medically underserved area and population within Indiana and Marion County.

Health Professional Shortage. Compared to other counties in Indiana, Marion County is doing fairly with the number of health care professional that work within the county. However, the Marion County Community Health Assessment indicates that Marion County is an underserved area when it comes to mental health services (Marion County Health Department, 2014). When looking specifically at the Near Eastside, there is not a primary health care professional or mental health professional shortage. However, there is a shortage of dental care professionals within the community (U.S. Department of Health and Human Services, 2015).

Description of Other Facilities and Resources within the Community. Beyond information collected using secondary data sources, a windshield survey was conducted to map assets within the community. This windshield survey focused on the southern portion of the Near Eastside Community. The area surveyed was 16th street to the north, Washington Street to the south, North Emerson Avenue to the east and North Rural Street to the west. This survey was conducted on February 25th, 2015 from 12pm to 2pm.

The windshield survey indicated there were a lot of social and health services located within the community to address some of the health issues individuals are facing. Most of the resources and services in the community are located on the northern part of the community (10th

street). There are shelters, clinics, schools, and church programs that provide services and resources to residents on the Near Eastside.

A list of resources in the community include, the John H. Boner Center, Chase Near Eastside Legacy Center, Immigrant Welcome Center, Green Door Community Services, Outreach Inc., Wheeler Mission Ministries, Good News Ministries, Lutheran Child and Family Services, Lyn House Ministries, Eskenazi Health Linwood, HealthNet People's Health Clinic and Dental Center, and Good Samaritan Health Center. These organizations provide a variety of services from education, mental health, nutrition, physical activity, housing services, health care services, dental services, and after school programs for residents on the Near Eastside.

Section 6

Focus Group Findings

A focus group was held on February 25, 2015 from 3pm to 5pm at Englewood Church on the Near Eastside. The purpose of this focus group was to gather more information regarding the top priority health issues on the Near Eastside. The following is a detailed description of the event and topics discussed during this event.

Identification of Persons Providing Input. The focus group was made up of 19 stakeholders from the Near Eastside community. Most of the individuals present at the focus group worked at an organization located in the community, were with the police department, or from a local Indianapolis University. The following is a list of all of the organizations present at the focus group: Marian University, Holy Cross Church, Purdue Extension-Marion County, Englewood Christian Church, Saint Philip Neri Catholic Church, John H. Boner Community Center, Chase Near Eastside Legacy Center, Englewood Community Development Corporation, St. Francis, St. Vincent DePaul, and Indianapolis Metropolitan Police Department-East District.

Prioritization Process and Criteria. During the focus group stakeholders were first asked to review health statistics related to the Near Eastside community. After the statistics were reviewed, the whole focus group did a large brainstorming activity. During this activity stakeholders were asked to identify why the health statistics were so poor for this community. From the brainstorming activity, stakeholders then voted on the top five broad health priorities. Topics that were identified as social determinants were not considered for the top health priorities. Once the top five health priorities were voted on, the stakeholders were asked to split into five groups based on the health priorities identified. Stakeholders were then asked to answer the question of “what should we do about it?” More specifically they were asked, “what are the biggest needs in that topic?”, “what are some potential interventions for those needs?” and “who in the community works on this issue and might help?”

Description of Prioritized Needs. The top five health topics identified during the focus group were addiction and drug use, depression and mental health, diabetes, nutrition, and access to health care. For addiction and drug use stakeholders were concerned with tobacco, alcohol, synthetic drugs, heroin, cocaine and crack. Potential interventions discussed for this topic included, helping increase access to jobs and housing. The people who could help with drug use and addiction included the police department, church programs and local organizations. The major problem identified with this health topic, was the lack of interconnectedness between all services and resources on the Near Eastside.

The next health issue was mental health and depression. Stakeholders identified access to resources, arrests in connection to mental health problems, and reentry of individuals with mental health problems as the priority areas. Potential interventions identified were peer to peer support groups and increasing follow-up contact with reentry individuals. Resources identified

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were Adult and Child, shelters on the Near Eastside, Horizon House, Continuum of Care, John H. Boner Center, Englewood Church Partners in Housing.

Diabetes was also identified as a health topic of interest and priority issues for this topic included prevention through fitness, nutrition, and education. Potential intervention strategies includes Garden on the Go, YMCA diabetes prevention program, community gardens, and community cooking classes. The organizations that could help with this health issue included, the Chase Near Eastside Legacy Center, YMCA, CICOA Aging and In-Home Solutions, neighborhood fellowship churches, and Parish Nurses. The major issue identified was the lack of interconnectedness between resources and services on the Near Eastside.

For nutrition similar to diabetes stakeholders identified access, education and behavior changes as the major priority areas. Interventions included urban farm programs, master gardener programs, and farmers markets. Organization identified that could help with the priority issues included Chase Near Eastside Legacy Center, Purdue Extension, Garden on the Go, Marion County Public Health Department, Indiana University Health, and Indy Hunger Network.

Lastly, the priority issues for access to health care included transportation and language barriers. Stakeholders discussed interventions related to providing bus passes, having volunteers drive and translate for patients. The organizations that were identified to help with this issue included Good Samaritan Health Clinic, Raphael Health Center, People's Health and Dental Center, John H. Boner Center, Chase Near Eastside Legacy Center, and Purdue Extension.

The major theme throughout the focus group was interconnectedness. Stakeholders repeatedly emphasized the importance of ensuring that community organizations are working together. They believe they can serve more individuals on the Near Eastside in a more effective way if they do a better job working together and sharing resources with one another.

Electronic Community Survey Findings

A survey was administered electronically and by paper to residents in Marion County. There were two versions of the survey English and Spanish. The survey was sent to organizations within Marion County by the major hospitals participating in this Community Needs Health Assessment. Organizations were then asked to pass the survey on to other individuals in the community. These are the preliminary results from the survey. More detail regarding this survey will be added later by the hospitals participating in the Community Health Needs Assessment.

Of the individuals who responded the questions pertaining to Marion County, 36.17% had a bachelor's degree and 35.21% had a graduate degree. Respondent identified credit unions/banks (78.64%) and credit cards (62.71%) as the financial resources they utilized regularly. These individuals were asked various questions pertaining to public health and safety within their community. Below a summary of the information gathered from the survey is provided.

Top Public and Environmental Health Issues. Of the individuals living in Marion County who participated in the survey, 75.3% identified substance abuse as one of the top three public health and safety issue in the community. Motor vehicle crashes (50.4%) and domestic violence (42.37%) were also ranked in the top three. The top three environmental issues identified included vector control (51.81%), water quality (42.08%), and property mismanagement (42.08%).

Violence. An overwhelming majority of respondents answered no (91.04%) when asked if they had or their immediate family had been a victim of physical violence in the past five years.

Joint Health and Pain. When asked about joint health, osteoporosis, arthritis, or back pain 67.32% of individuals identified that they were somewhat concerned or very concerned about these issues.

Access health services. When asked if in the past 12 months did if they put off or postponed getting medical care 55.48% of respondents answered no.

Access to Mental Health Services. Half of individuals reported that they and their household did not need mental health services. Of those who did need mental health services, 19.37% said the cost of the co-pay made it challenging to access services, 23.62% said they did not have problem accessing services (Community Health, Franciscan Alliance, Indiana University Health, and St. Vincent, 2015).

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MARION COUNTY -BRAG

Introduction

A community health needs assessment (CHNA) is currently being worked on by 4 major hospitals in the Marion County area. Under a collaboration with IU Health, St. Francis Alliance, and St. Vincent; Community Health Network have been conducting surveys focused on finding the most prevalent health needs of the community. With this collaboration between the hospital networks there will be more information accumulated, which will make this CHNA more complete and able to reach a wider audience, than if this assessment was taken on by one hospital network. The following sections will outline the findings of focus groups taken place in Marion County.

Data Sources

The data collection is done through primary and secondary data. The primary data is collected through focus groups, these focus groups are in a group setting. For the BRAG focus group it was made into an ‘ice breaker’ at one of the events. Step one: Each recipient was given a card that asked what they personally felt were the top 5 issues in their Indianapolis neighborhood. Step two: Those same participants were then asked to go and find someone and discuss their issues, and if the issues changed, added or deleted to write that information on the back of the card. It was interesting to see what people felt from a personal perspective what they thought individually vs. another individual.

Collaborating Organizations

The collaborating organizations for the CHNA are: Community Health Network, IU Health, St. Francis Alliance, and St. Vincent. All of the hospitals have been working in Marion County to try and get the most representation for the issues that are plaguing this area of Indiana.

COMMUNITY HEALTH NEEDS ASSESSMENT

This collaboration will ultimately be responsible for any expatiated change in policy, initiatives, or funding for issues that may be needed to improve the health needs of the community.

Definition of Community Assessed

Marion County is one of the least healthy counties in Indiana in reference to health outcomes, health behaviors, and health factors. Marion County is ranked number 89 out of 92 counties in the state and has the worst social & economic factors⁶. They are falling behind in high school graduation (10%) below the Indiana average, children in poverty (30%) is 8% higher than the Indiana average, and violent crime (1,124) this is 790 more than the Indiana averages⁴. These numbers exemplify issues that we see from the secondary data that we have accumulated, however there is more secondary data that needs to be examined in order to get a fair and detailed analysis of the community. The secondary data for Marion County will be explained further in the following sections.

Secondary Data

The following is information collected using the secondary sources listed above. This information includes demographics, economic indicators, insurance coverage, county health rankings, community health status indicators, zip-code specific data, medically underserved areas and populations, and information on medical professional shortages in Marion County.

Demographics

The total population for Marion County is 912,242 as of 2013. The population breaks down to 10.8% 65 or older, 64.23% 18 to 64 and 24.99% under age 18⁸. The racial demographics for Marion County are 63.4% Caucasian and 26.83% African-American. The Hispanic community makes up 9.42% of the population. A majority of the community, 87.5%,

COMMUNITY HEALTH NEEDS ASSESSMENT

use English as their household language. 7.67% use Spanish as their household language and 4.83% use a language other than English or Spanish in their household⁸.

Economic Indicators.

The economy is one key factors that influence a community. Marion County has a large population of children under 18 living in poverty, 30.1%, which is higher than the 22% of children living in poverty in Indiana⁵. Education within Marion County is also lower than other surrounding counties and the state as a whole. The population of adults 25 and older without a high school diploma is 15.45%, 29.1% have only a high school diploma, 21.13% have some college, without a degree, 6.93% have an associate’s degree and 27.38% have a bachelor’s or higher⁸. This lacking education is also a predictor of lower income. The median household income for Marion County is \$42,334, lower than all other surrounding counties, *Figure 1*⁸. In addition, 13.87% of the homes in Marion County are vacant and another 38.03% are renter occupied units⁸.

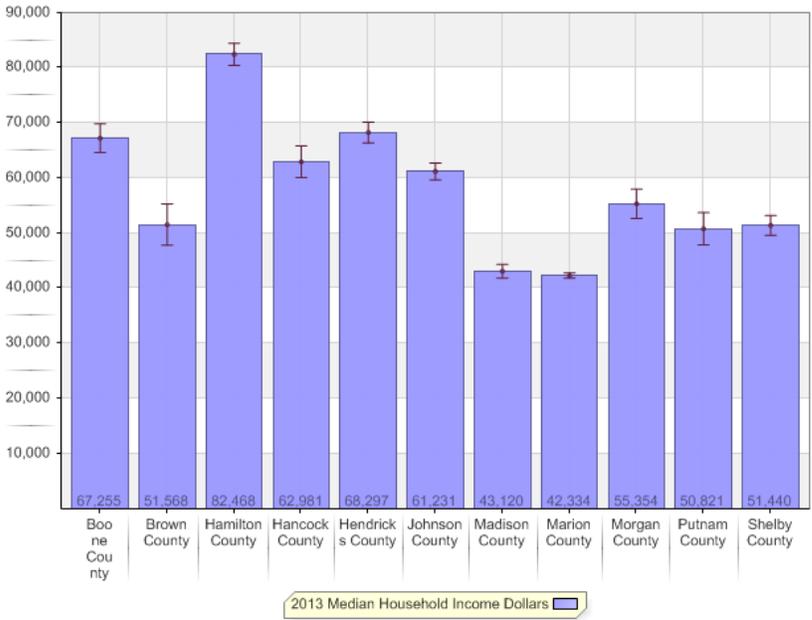


Figure 1: 2013 Median Household Income Dollars for Central Indiana counties

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The majority of Marion County residents have employer based healthcare insurance coverage, insuring 52.39% of the population. Residents under 65 who are uninsured reaches 18.85%, which is slightly higher than the state at 17%⁸.

County Health Ranking.

Marion County ranks 74th in the state for overall health outcomes. It is ranked 89th for health factors, such as adult smoking and adult obesity. It is exceptionally higher in the number of sexually transmitted infections and teen births, 1100 and 55, respectively, compared to the state, 451 and 39, respectively⁴. Among social and economic factors, such as unemployment, children in poverty and violent crimes, Marion County is ranked last in the state, 92nd⁴.

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According to the Center for Disease Control and Prevention, Marion County ranks in the least favorable quartile for mortality, related to cancer, chronic kidney disease, chronic lower respiratory disease, female life expectancy and male life expectancy. For issues related to morbidity, such as adult obesity, overall adult health status, gonorrhea, older adult depression and syphilis, Marion County is ranked in the least favorable quartile. Health care access and quality are also in the last favorable quartile related to older adult preventable hospitalizations. Marion County ranks in the least favorable quartile for health behaviors related to adult physical inactivity, adult smoking and teen births. Marion County also ranks in the least favorable quartile for social factors related to children in single-parent households, inadequate social support, poverty, and violent crime. For issues related to the physical environment such as access to parks, annual average PM2.5 concentration (poor air quality) and limited access to healthy food, Marion County ranks in the least favorable quartile.

Zip Code-Level Health Access Indicators

This focus group was located at the Hillcrest Country Club in zip code 46220. This area of Marion County is located in Lawrence, and has many good community resources. Data shows a low number of hospitalizations from complications of diabetes. Age-adjusted emergency hospitalization visits related to diabetes (9.7 per 10,000), long-term complications (4.6 per 10,000) and short-term complications (3.4 per 10,000).

Data shows low rates of emergency room visits due to respiratory diseases. Data shows age-adjusted hospitalization rates for asthma (9.7 per 10,000), adult asthma (7.7 per 10,000) with the exception of pediatric asthma (15.3 per 10,000) which is high.

Medically Underserved Areas and Populations

The United States Department of Health and Human Services considers parts of Marion County as a medically underserved area and population within Indiana.

Health Professional Shortage.

Compared to other counties in Indiana, Marion County is doing fairly well among health professionals. There are approximately 1,254 patients for 1 primary care physician, compared to 1,518 patients for 1 primary care physician in Indiana. There are 1,273 patients for every 1 dentist in Marion County, compared to 1,973 patients for every 1 dentist in the state. Marion County is also doing better than the state in the number of mental health providers, 436 patients for every 1 provider, compared to 750 patients for every 1 provider⁴.

COMMUNITY HEALTH NEEDS ASSESSMENT

*Other Facilities and Resources Serving the Community*⁸

Service	Office	ZIP Code
Food Pantry	ACTION HEALTH CENTER - WIC OFFICE	46205
	ALBERT AND SARA REUBEN SENIOR AND COMMUNITY RESOURCE CENTER	46260
	ANNA'S HOUSE	46222
	BARNES WORSHIP CENTER WEST	46224
	BETHEL AFRICAN METHODIST EPISCOPAL CHURCH	46202
	BILLIE'S FOOD PANTRY	46222
	BLACKBURN HEALTH CENTER WIC OFFICE	46208
	BOULEVARD PLACE FOOD PANTRY - SAINT VINCENT DE PAUL	46208
	BRIDGEPORT CENTRAL BAPTIST CHURCH	46231
	BRIGHTWOOD COMMUNITY CENTER	46218
	BROAD RIPPLE UNITED METHODIST CHURCH	46220
	BROOKSIDE PARK AND FAMILY CENTER	46201
	CALVARY BAPTIST CHURCH	46235
	CATHEDRAL KITCHEN	46202
	CATHOLIC CHARITIES CRISIS OFFICE	46202
	CENTER TOWNSHIP TRUSTEE, MARION COUNTY	46204
	CENTRAL CHRISTIAN CHURCH	46204
	CHAPEL HILL UNITED METHODIST CHURCH	46214
	CHAPEL ROCK CHRISTIAN CHURCH	46214
	CHRIST CHURCH APOSTOLIC	46260
	CHRIST CHURCH OF GLORY	46220
	CHRIST UNITED METHODIST CHURCH	46227
	CHRISTAMORE HOUSE FAMILY AND COMMUNITY CENTER	46222
	CHURCH OF ACTS	46237
	CITY VIEW CHRISTIAN CENTER	46208
	COMMUNITY ALLIANCE OF THE FAR EASTSIDE (CAFE)	46226
	COMMUNITY CARING AND SHARING	46241
	COMMUNITY OUTREACH MINISTRY EASTSIDE (COME)	46229
	COTTAGE CORNER WIC CLINIC	46203
	DECATUR TOWNSHIP TRUSTEE, MARION COUNTY	46221
	DELIVERANCE TEMPLE	46226
	DIVINE DIRECTION CHRISTIAN CHURCH	46205
	EAGLE CREEK ASSEMBLY OF GOD	46254
	EAGLE CREEK COMMUNITY CHURCH	46254
	EDNA MARTIN CHRISTIAN CENTER	46218
	EMMAUS LUTHERAN CHURCH FOOD PANTRY	46203
	FAY BICCARD GLICK NEIGHBORHOOD CENTER AT CROOKED CREEK	46268

COMMUNITY HEALTH NEEDS ASSESSMENT

FIRST BAPTIST CHURCH OF INDIANAPOLIS	46240
FIRST FREE METHODIST CHURCH	46201
FLETCHER PLACE COMMUNITY CENTER	46203
FOREST MANOR HEALTH CENTER WIC OFFICE	46226
FOREST MANOR MULTI-SERVICE CENTER	46218
FOREST MANOR UNITED METHODIST CHURCH	46218
FRANKLIN TOWNSHIP TRUSTEE, MARION COUNTY	46237
GARFIELD PARK BAPTIST CHURCH	46203
GLEANERS COMMUNITY CUPBOARD	46241
GLENDALE SEVENTH-DAY ADVENTIST CHURCH	46220
GOD'S BOUNTY FOOD PANTRY	46239
GOODWIN COMMUNITY CENTER	46221
GRASSY CREEK HEALTH CENTER WIC OFFICE	46235
GREATER ONE WAY APOSTOLIC CHURCH	46218
GREATER SAINT MARK MISSIONARY BAPTIST CHURCH	46218
GREATER TRUE GOSPEL TABERNACLE	46218
HARVEST PRAYER CENTER	46254
HAWTHORNE COMMUNITY CENTER	46222
HEALTHNET BARRINGTON HEALTH & DENTAL CENTER	46203
HEATHER HILLS BAPTIST CHURCH	46229
HOLY FAMILY DAVID S. MOORE FOOD PANTRY	46203
HOLY NAME	46107
HOLY TRINITY PARISH	46222
HOOSIER VETERANS ASSISTANCE FOUNDATION (HVAF)	46204
HOPE AND HELP CENTER	46201
HOPE BAPTIST CHURCH	46214
HUNGER INC.	46227
IGLESIA DE MONTE DE SION	46222
IRVINGTON CHURCHES ADVOCACY NETWORK (ICAN) AT DOWNEY AVENUE CHRIS	46219
JOHN H. BONER COMMUNITY CENTER	46201
JR DALTON	46222
KEENAN-STAHN BOYS AND GIRLS CLUB	46203
KENNEDY KING PARK CENTER	46202
LA PLAZA WIC OFFICE	46226
LAKEVIEW CHURCH	46224
LAWRENCE TOWNSHIP TRUSTEE, MARION COUNTY	46226
LIFE CHURCH	46234
LIGHT OF THE WORLD CHRISTIAN CHURCH	46228
LINWOOD CHRISTIAN CHURCH	46201

COMMUNITY HEALTH NEEDS ASSESSMENT

LIRIOS DE LOS VALLES	46221
LORD OF THE HARVEST CHURCH	46236
MARY RIGG NEIGHBORHOOD CENTER	46221
METRO BAPTIST CENTER	46204
MID-NORTH FOOD PANTRY	46208
MOUNT ZION BAPTIST CHURCH	46208
MOVIE THEATER CHURCH	46229
MEALS ON WHEELS OF CENTRAL INDIANA	46240
NATIONAL CHRISTIAN OUTREACH, COMPASSION CENTER	46203
NATIONAL SQUARE WIC CLINIC	46227
NEHEMIAH BIBLE CHURCH	46201
NEW BETHEL MISSIONARY BAPTIST CHURCH	46202
NEW JERUSALEM MISSIONARY BAPTIST CHURCH	46218
NEW REVELATIONS CHRISTIAN CHURCH	46236
NEW WINESKIN MINISTRIES	46254
NORTH ARLINGTON HEALTH CENTER WIC OFFICE	46218
NORTH UNITED METHODIST CHURCH	46208
NORTHSIDE BAPTIST CHURCH	46220
NORTHWOOD CHRISTIAN CHURCH	46205
NU CORINTHIAN BAPTIST CHURCH - INNER CITY MINISTRY, SANCTITY OF S	46205
OLD BETHEL UNITED METHODIST CHURCH	46219
OLIVE BRANCH CHRISTIAN CHURCH	46225
PERRY TOWNSHIP TRUSTEE, MARION COUNTY	46227
PIKE TOWNSHIP TRUSTEE, MARION COUNTY	46254
PROMISE LAND CHRISTIAN COMMUNITY CHURCH	46208
PURDUE EXTENSION - MARION COUNTY	46205
RAINBOW HOUSE FOOD PANTRY (EBENEZER MISSIONARY BAPTIST CHURCH)	46202
ROBERTS PARK UNITED METHODIST CHURCH	46204
SAINT CHRISTOPHER	46224
SAINT JOHN'S EPISCOPAL CHURCH	46224
SAINT JOHN'S MISSIONARY BAPTIST CHURCH	46202
SAINT LUKE MISSIONARY BAPTIST CHURCH	46218
SAINT SIMON THE APOSTLE CATHOLIC CHURCH	46236
SAINT TIMOTHY EPISCOPAL CHURCH	46227
SAINT VINCENT DE PAUL CLIENT CHOICE FOOD PANTRY	46218
SALVATION ARMY EAGLE CREEK CORPS	46254
SALVATION ARMY FOUNTAIN SQUARE CORPS	46203
SCOTT UNITED METHODIST CHURCH	46202
SECOND HELPINGS	46202

COMMUNITY HEALTH NEEDS ASSESSMENT

	SERVANT'S HEART OF INDY	46203
	SHARING PLACE	46236
	SHEPHERD COMMUNITY CENTER	46201
	SHILOH MISSIONARY BAPTIST CHURCH	46226
	SOUTHEASTERN CHRISTIAN FELLOWSHIP CHURCH	46203
	SOUTHEASTERN CHURCH OF CHRIST	46203
	TABERNACLE PRESBYTERIAN CHURCH	46205
	TEAR DOWN THE WALLS	46208
	TRINITY CHRISTIAN METHODIST EPISCOPAL CHURCH	46205
	TUXEDO PARK BAPTIST CHURCH	46201
	UMOJA CHRISTIAN CHURCH	46222
	VIDA NUEVA UNITED METHODIST CHURCH - CENTRO FAMILIAR	46222
	WARREN TOWNSHIP TRUSTEE, MARION COUNTY	46219
	WASHINGTON TOWNSHIP TRUSTEE, MARION COUNTY	46220
	WAYNE TOWNSHIP TRUSTEE, MARION COUNTY	46241
	WESTMINSTER NEIGHBORHOOD MINISTRIES	46201
	WESTSIDE HEALTH CENTER WIC OFFICE	46222
	WHEELER MISSION CENTER FOR WOMEN AND CHILDREN	46201
	WHEELER MISSION SHELTER FOR MEN	46204
	AMERICAN INDIAN CENTER OF INDIANA	46201
	CONCORD NEIGHBORHOOD CENTER	46225
Employment Assistance	FLANNER HOUSE OF INDIANAPOLIS	46208
	FOREST MANOR MULTI-SERVICE CENTER	46218
	GOODWILL INDUSTRIES OF CENTRAL INDIANA	46222
	HAWTHORNE COMMUNITY CENTER	46222
	HOOSIER VETERANS ASSISTANCE FOUNDATION (HVAF)	46204
	INDIANAPOLIS MARION COUNTY HUMAN RESOURCES DIVISION	46204
	JOHN H. BONER COMMUNITY CENTER	46201
	KEYS TO WORK	46202
	MARION COUNTY PROSECUTOR'S OFFICE	46204
	MARY RIGG NEIGHBORHOOD CENTER	46221
	NATIONAL ABLE NETWORK, INDIANA HEADQUARTERS	46208
	PACE, INC. (Public Advocates in Community Re-Entry)	46218
	PUBLIC ADVOCATES IN COMMUNITY RE-ENTRY (PACE)	46218
	VOCATIONAL REHABILITATION SERVICES - AREAS 13 AND 14	46256
	VOCATIONAL REHABILITATION SERVICES - AREAS 15 AND 16	46241
	VOLUNTEERS OF AMERICA - STRIVE INDY	46202
	WORKONE EXPRESS AT COLLEGE PARK, MARION COUNTY	46278
	WORKONE WEST - MARION COUNTY	46222

COMMUNITY HEALTH NEEDS ASSESSMENT

Mental Health		
	ESKENAZI HEALTH	46202
	ACTION HEALTH CENTER - MARION COUNTY HEALTH DEPARTMENT	46205
	ADULT AND CHILD - EAST OHIO STREET	46204
	ADULT AND CHILD - MADISON AVENUE	46227
	ARCHDIOCESE OF INDIANAPOLIS	46202
	ASIAN HELP SERVICES	46205
	ASPIRE INDIANA - INDIANAPOLIS	46205
	BROOKE'S PLACE FOR GRIEVING YOUNG PEOPLE	46240
	CATHOLIC CHARITIES INDIANAPOLIS	46202
	CHILDREN'S BUREAU - NEIGHBORHOOD ALLIANCE FOR CHILD SAFETY (NACS)	46218
	CHRISTIAN THEOLOGICAL SEMINARY COUNSELING CENTER	46208
	COMMUNITY HEALTH PAVILION SHADELAND	46219
	COMMUNITY HOSPITAL NORTH BEHAVIORAL HEALTH PAVILION	46256
	CUMMINS BEHAVIORAL HEALTH SYSTEMS - INDIANAPOLIS	46241
	FAMILIES FIRST - CENTRAL OFFICE	46204
	FRANCISCAN SAINT FRANCIS - OUTPATIENT BEHAVIORAL HEALTH SERVICES	46227
	HEALTHNET BARRINGTON HEALTH AND DENTAL CENTER	46203
	HEALTHNET MARTINDALE BRIGHTWOOD HEALTH AND DENTAL CENTER	46218
	HEALTHNET SOUTHEAST HEALTH AND DENTAL CENTER	46203
	HEALTHNET SOUTHWEST HEALTH AND DENTAL CENTER	46221
	HEALTHNET WEST HEALTH CENTER	46224
	INDIANA COALITION AGAINST DOMESTIC VIOLENCE (ICADV)	46202
	INDIANA UNIVERSITY HEALTH METHODIST HOSPITAL	46202
	INDIANA WESLEYAN UNIVERSITY GRADUATE COUNSELING CLINIC	46278
	LEGACY HOUSE	46218
	LIBERTAD COUNSELING	46224
	MARY RIGG NEIGHBORHOOD CENTER	46221
	MENTAL HEALTH AMERICA OF GREATER INDIANAPOLIS	46205
	MIDTOWN COMMUNITY MENTAL HEALTH - ESKENAZI HEALTH	46202
	MIDTOWN MENTAL HEALTH - DR. JAMES J. WRIGHT CENTER	46202
	MIDTOWN MENTAL HEALTH CENTER - ESKENAZI HEALTH	46208
	MIDTOWN WESTSIDE CLINIC - ESKENAZI HEALTH	46224
	MOUNT ZION APOSTOLIC CHURCH	46218
	PEOPLE'S HEALTH CENTER	46201
	REACH FOR YOUTH - CENTER TOWNSHIP OFFICE	46205
	RICHARD L. ROUDEBUSH VETERANS AFFAIRS MEDICAL CENTER (VAMC)	46202
	RILEY HOSPITAL FOR CHILDREN AT INDIANA UNIVERSITY HEALTH	46202
	SAINT VINCENT INDIANAPOLIS STRESS CENTER	46260
	UNIVERSITY OF INDIANAPOLIS PSYCHOLOGICAL SERVICES CENTER	46227

Focus Group (Community Meeting) Findings

Prioritization Process and Criteria

Facilitators instructed participants to socialize and talk with people who were not from the same respective organizations. Facilitators introduced themselves, and were Dan Hodgkins and Ann Yeakle, from Community Health Network, they explained the purpose of the gathering, as well as the findings from the previous CHNA. After the introduction of the facilitators, the participants went around the room and introduced themselves to the whole group and explained: who they were, what their job was, and an interesting fact about themselves. First, the facilitators asked the participants to write down their top 5 concerns for the community. Then the participants were asked to discuss their individual top 5 concerns for the community together.

Description of Prioritized Needs

- 1) Curb Appeal (sidewalks, signage, and curb conditions)
- 2) Crime and Safety
- 3) Education
- 4) Transportation
- 5) Healthcare

These were the top 5 health needs for this portion of Marion County, based on the focus group information.

Electronic Community Survey Findings

A total of 893 Marion County residents have participated in this electronic survey, as of 17 June 2015. The Marion County surveys have accounted for 14.6% of all surveys taken to that date. See Figures below for survey questions and responses.

COMMUNITY HEALTH NEEDS ASSESSMENT

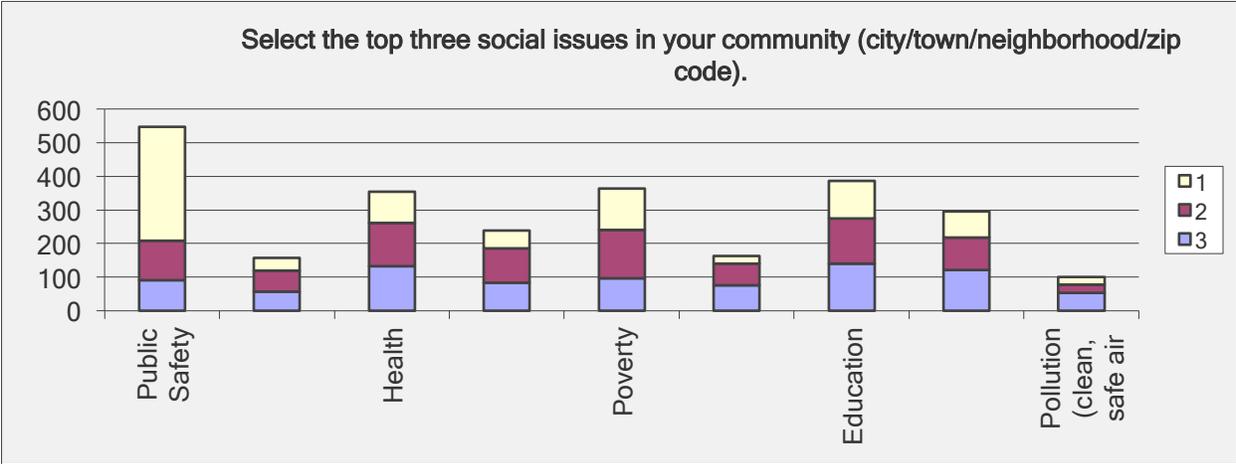


Figure 2 survey responses (N=891) to “Select the top three social issues in your community”

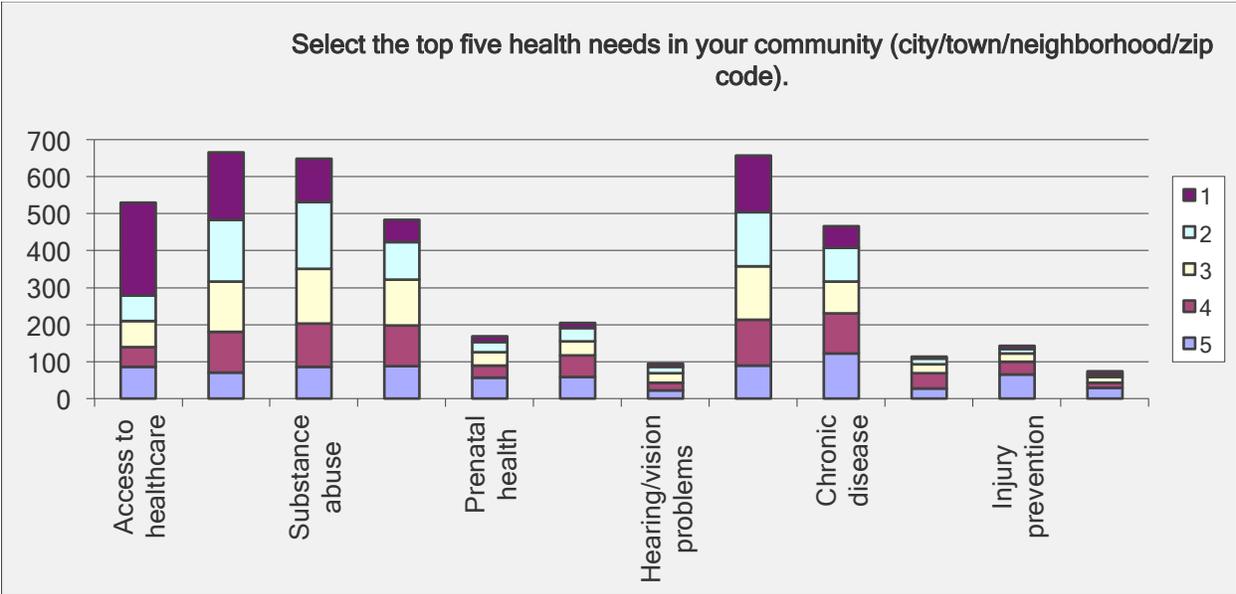


Figure 3 survey responses (N=891) to “Select the top five health needs in your community”

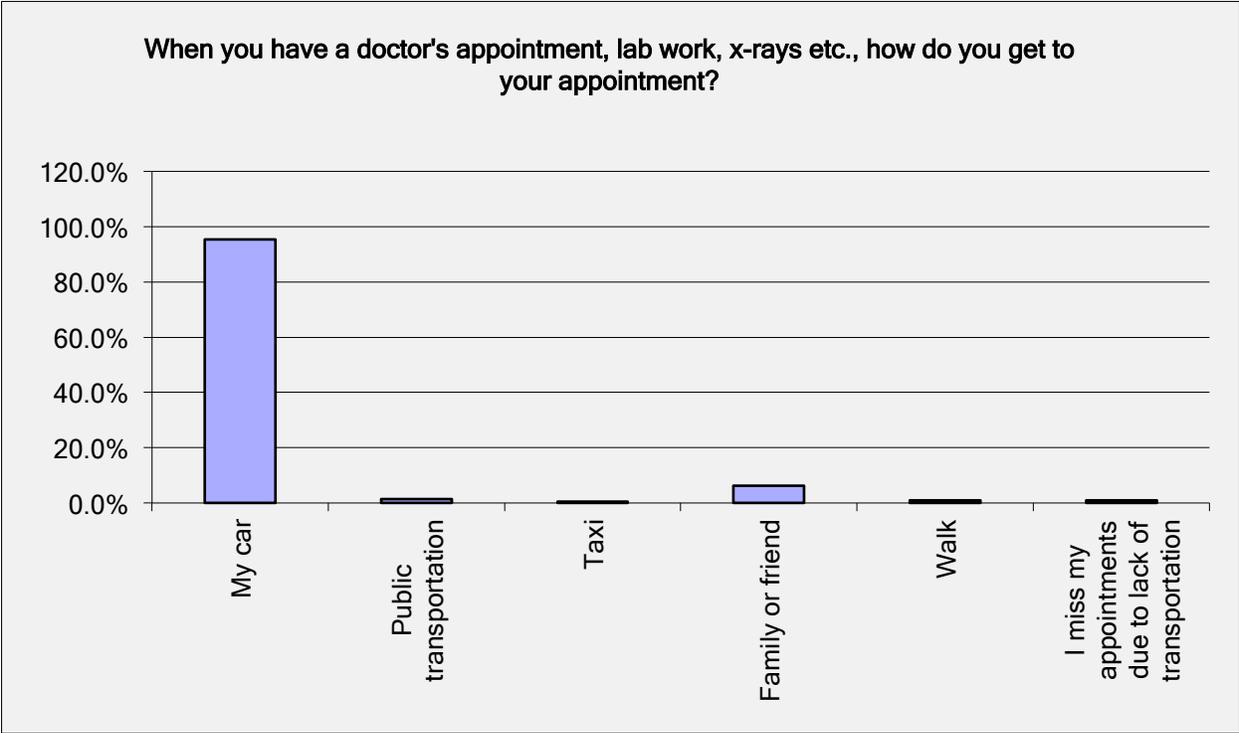


Figure 4 survey responses (N=891) to “When you have a doctor’s appointment, lab work, x-rays, etc., how do you get to your appointment”

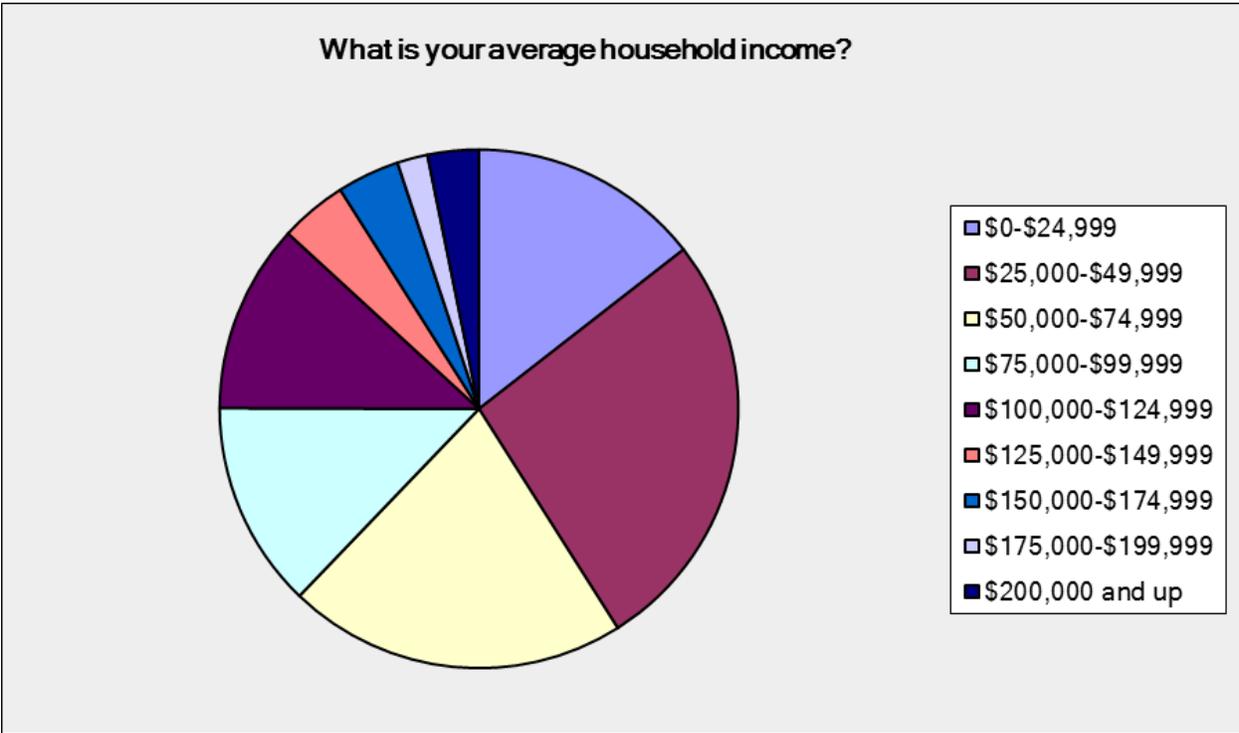


Figure 5 survey response (N=891) to “What is your average household income”

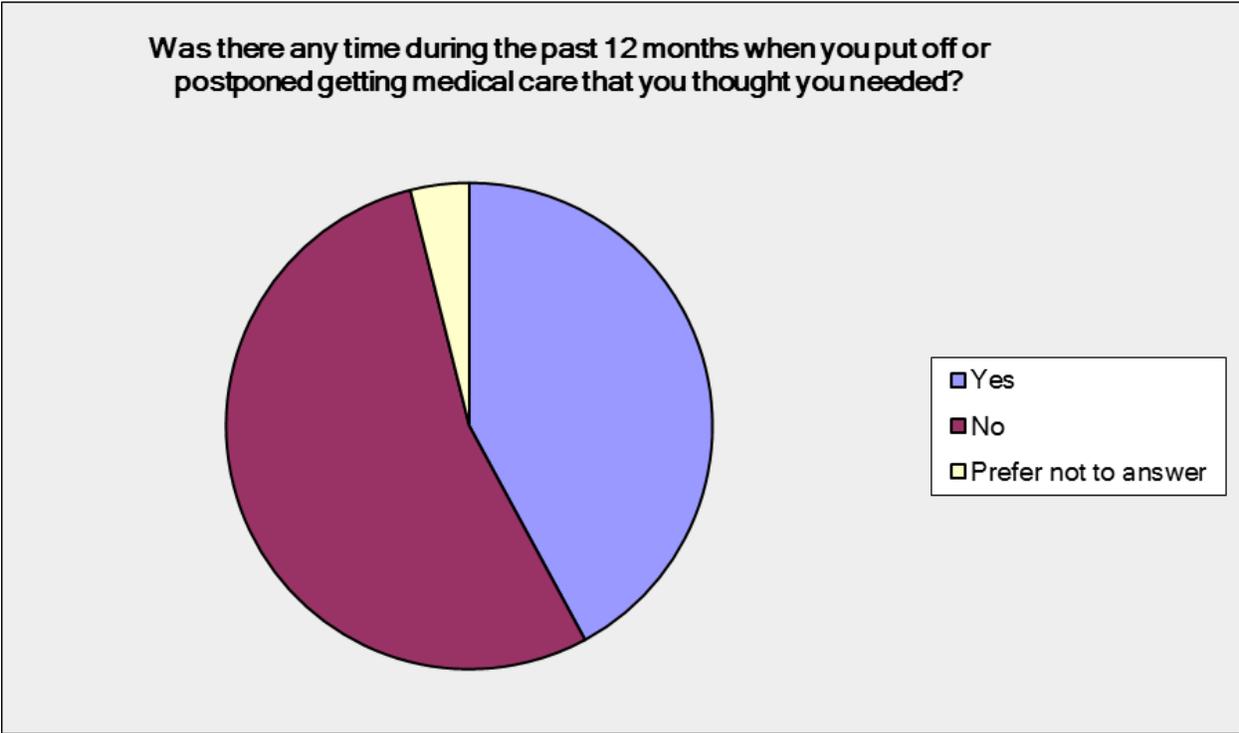


Figure 6 survey response (N=687) to “ Was there any time during the past 12 months when you put off or postponed getting medical care that you thought you needed”

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MARION COUNTY EAST SAFETY SUMMIT

Introduction

A community health needs assessment (CHNA) is currently being worked on by 4 major hospitals in the Marion County area. Under a collaboration with IU Health, St. Francis Alliance, and St. Vincent; Community Health Network have been conducting surveys focused on finding the most prevalent health needs of the community. With this collaboration between the hospital networks there will be more information accumulated, which will make this CHNA more complete and able to reach a wider audience, than if this assessment was taken on by one hospital network. The following sections will outline the findings of focus groups taken place in Marion County.

Data Sources

The data collection is done through primary and secondary data. The primary data is collected through focus groups, these focus groups are in a group setting. The focus groups are first made into groups of 5 people to a group and they discuss their personal health issues in the community. Once they come up with their issues they discuss as a group and come up with their groups top 5-7 health needs as a whole. Furthermore, as a whole they come up with their top 5-7 needs in the community, the qualitative as well as quantitative data is taken down. The secondary data collection occurs through online databases and resources such as: SAVI, Indicators, Community Commons, County Health Rankings, and the Centers for Disease Control and Prevention (CDC), to find out the demographic, health indexes, and health issues.

Collaborating Organizations

The collaborating organizations for the CHNA are: Community Health Network, IU Health, St. Francis Alliance, and St. Vincent. All of the hospitals have been working in Marion

COMMUNITY HEALTH NEEDS ASSESSMENT

County to try and get the most representation for the issues that are plaguing this area of Indiana. This collaboration will ultimately be responsible for any expatiated change in policy, initiatives, or funding for issues that may be needed to improve the health needs of the community.

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COMMUNITY HEALTH NEEDS ASSESSMENT

use English as their household language. 7.67% use Spanish as their household language and 4.83% use a language other than English or Spanish in their household⁸.

Economic Indicators.

The economy is one key factors that influence a community. Marion County has a large population of children under 18 living in poverty, 30.1%, which is higher than the 22% of children living in poverty in Indiana⁵. Education within Marion County is also lower than other surrounding counties and the state as a whole. The population of adults 25 and older without a high school diploma is 15.45%, 29.1% have only a high school diploma, 21.13% have some college, without a degree, 6.93% have an associate’s degree and 27.38% have a bachelor’s or higher⁸. This lacking education is also a predictor of lower income. The median household income for Marion County is \$42,334, lower than all other surrounding counties, *Figure 1*⁸. In addition, 13.87% of the homes in Marion County are vacant and another 38.03% are renter occupied units⁸.

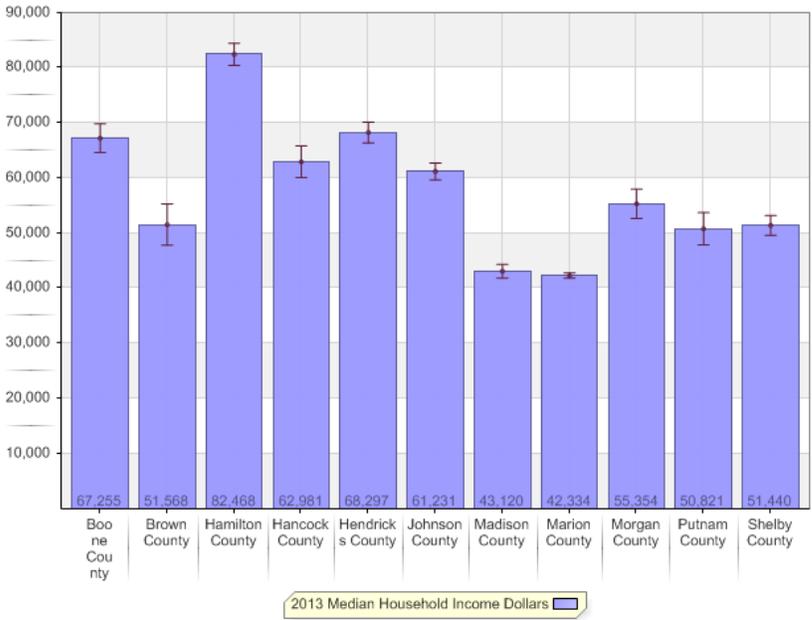


Figure 1: 2013 Median Household Income Dollars for Central Indiana counties

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Marion County ranks 74th in the state for overall health outcomes. It is ranked 89th for health factors, such as adult smoking and adult obesity. It is exceptionally higher in the number of sexually transmitted infections and teen births, 1100 and 55, respectively, compared to the state, 451 and 39, respectively⁴. Among social and economic factors, such as unemployment, children in poverty and violent crimes, Marion County is ranked last in the state, 92nd⁴.

Community Health Status Indicators.

According to the Center for Disease Control and Prevention, Marion County ranks in the least favorable quartile for mortality, related to cancer, chronic kidney disease, chronic lower respiratory disease, female life expectancy and male life expectancy. For issues related to morbidity, such as adult obesity, overall adult health status, gonorrhea, older adult depression and syphilis, Marion County is ranked in the least favorable quartile. Health care access and quality are also in the last favorable quartile related to older adult preventable hospitalizations. Marion County ranks in the least favorable quartile for health behaviors related to adult physical inactivity, adult smoking and teen births. Marion County also ranks in the least favorable quartile for social factors related to children in single-parent households, inadequate social support, poverty, and violent crime. For issues related to the physical environment such as access to parks, annual average PM2.5 concentration (poor air quality) and limited access to healthy food, Marion County ranks in the least favorable quartile.

COMMUNITY HEALTH NEEDS ASSESSMENT

Zip Code-Level Health Access Indicators

This focus group was located at the Indianapolis Marriott East, in zip code 46219. This area of Marion County is located in Indianapolis, but is still lacking in community resources. Data shows that high age-adjusted emergency hospitalization visits related to diabetes (47.0 per 10,000), long-term complications (23.4 per 10,000) and short-term complications (16.1 per 10,000).

Data shows high rates of emergency room visits due to respiratory diseases. Data shows high age-adjusted emergency visits for asthma (32.5 per 10,000), adult asthma (22.6 per 10,000) and pediatric asthma (60.9 per 10,000).

Another major health issue within this zip code is substance abuse. Data shows high hospitalization rates for alcohol abuse (12.7 per 10,000) in populations 18 and older³. This is alarming because all of these rates and percentages are falling way below the average for Indiana.

Medically Underserved Areas and Populations

The United States Department of Health and Human Services considers Marion County as a medically underserved area and population within Indiana.

Health Professional Shortage.

Compared to other counties in Indiana, Marion County is doing fairly well among health professionals. There are approximately 1,254 patients for 1 primary care physician, compared to 1,518 patients for 1 primary care physician in Indiana. There are 1,273 patients for every 1 dentist in Marion County, compared to 1,973 patients for every 1 dentist in the state. Marion County is also doing better than the state in the number of mental health providers, 436 patients for every 1 provider, compared to 750 patients for every 1 provider⁴.

COMMUNITY HEALTH NEEDS ASSESSMENT

*Other Facilities and Resources Serving the Community*⁸

Service	Office	ZIP Code
Food Pantry	ACTION HEALTH CENTER - WIC OFFICE	46205
	ALBERT AND SARA REUBEN SENIOR AND COMMUNITY RESOURCE CENTER	46260
	ANNA'S HOUSE	46222
	BARNES WORSHIP CENTER WEST	46224
	BETHEL AFRICAN METHODIST EPISCOPAL CHURCH	46202
	BILLIE'S FOOD PANTRY	46222
	BLACKBURN HEALTH CENTER WIC OFFICE	46208
	BOULEVARD PLACE FOOD PANTRY - SAINT VINCENT DE PAUL	46208
	BRIDGEPORT CENTRAL BAPTIST CHURCH	46231
	BRIGHTWOOD COMMUNITY CENTER	46218
	BROAD RIPPLE UNITED METHODIST CHURCH	46220
	BROOKSIDE PARK AND FAMILY CENTER	46201
	CALVARY BAPTIST CHURCH	46235
	CATHEDRAL KITCHEN	46202
	CATHOLIC CHARITIES CRISIS OFFICE	46202
	CENTER TOWNSHIP TRUSTEE, MARION COUNTY	46204
	CENTRAL CHRISTIAN CHURCH	46204
	CHAPEL HILL UNITED METHODIST CHURCH	46214
	CHAPEL ROCK CHRISTIAN CHURCH	46214
	CHRIST CHURCH APOSTOLIC	46260
	CHRIST CHURCH OF GLORY	46220
	CHRIST UNITED METHODIST CHURCH	46227
	CHRISTAMORE HOUSE FAMILY AND COMMUNITY CENTER	46222
	CHURCH OF ACTS	46237
	CITY VIEW CHRISTIAN CENTER	46208
	COMMUNITY ALLIANCE OF THE FAR EASTSIDE (CAFE)	46226
	COMMUNITY CARING AND SHARING	46241
	COMMUNITY OUTREACH MINISTRY EASTSIDE (COME)	46229
	COTTAGE CORNER WIC CLINIC	46203
	DECATUR TOWNSHIP TRUSTEE, MARION COUNTY	46221
	DELIVERANCE TEMPLE	46226
	DIVINE DIRECTION CHRISTIAN CHURCH	46205
	EAGLE CREEK ASSEMBLY OF GOD	46254
	EAGLE CREEK COMMUNITY CHURCH	46254
	EDNA MARTIN CHRISTIAN CENTER	46218
	EMMAUS LUTHERAN CHURCH FOOD PANTRY	46203
	FAY BICCARD GLICK NEIGHBORHOOD CENTER AT CROOKED CREEK	46268

COMMUNITY HEALTH NEEDS ASSESSMENT

FIRST BAPTIST CHURCH OF INDIANAPOLIS	46240
FIRST FREE METHODIST CHURCH	46201
FLETCHER PLACE COMMUNITY CENTER	46203
FOREST MANOR HEALTH CENTER WIC OFFICE	46226
FOREST MANOR MULTI-SERVICE CENTER	46218
FOREST MANOR UNITED METHODIST CHURCH	46218
FRANKLIN TOWNSHIP TRUSTEE, MARION COUNTY	46237
GARFIELD PARK BAPTIST CHURCH	46203
GLEANERS COMMUNITY CUPBOARD	46241
GLENDALE SEVENTH-DAY ADVENTIST CHURCH	46220
GOD'S BOUNTY FOOD PANTRY	46239
GOODWIN COMMUNITY CENTER	46221
GRASSY CREEK HEALTH CENTER WIC OFFICE	46235
GREATER ONE WAY APOSTOLIC CHURCH	46218
GREATER SAINT MARK MISSIONARY BAPTIST CHURCH	46218
GREATER TRUE GOSPEL TABERNACLE	46218
HARVEST PRAYER CENTER	46254
HAWTHORNE COMMUNITY CENTER	46222
HEALTHNET BARRINGTON HEALTH & DENTAL CENTER	46203
HEATHER HILLS BAPTIST CHURCH	46229
HOLY FAMILY DAVID S. MOORE FOOD PANTRY	46203
HOLY NAME	46107
HOLY TRINITY PARISH	46222
HOOSIER VETERANS ASSISTANCE FOUNDATION (HVAF)	46204
HOPE AND HELP CENTER	46201
HOPE BAPTIST CHURCH	46214
HUNGER INC.	46227
IGLESIA DE MONTE DE SION	46222
IRVINGTON CHURCHES ADVOCACY NETWORK (ICAN) AT DOWNEY AVENUE CHRIS	46219
JOHN H. BONER COMMUNITY CENTER	46201
JR DALTON	46222
KEENAN-STAHN BOYS AND GIRLS CLUB	46203
KENNEDY KING PARK CENTER	46202
LA PLAZA WIC OFFICE	46226
LAKEVIEW CHURCH	46224
LAWRENCE TOWNSHIP TRUSTEE, MARION COUNTY	46226
LIFE CHURCH	46234
LIGHT OF THE WORLD CHRISTIAN CHURCH	46228
LINWOOD CHRISTIAN CHURCH	46201

COMMUNITY HEALTH NEEDS ASSESSMENT

LIRIOS DE LOS VALLES	46221
LORD OF THE HARVEST CHURCH	46236
MARY RIGG NEIGHBORHOOD CENTER	46221
METRO BAPTIST CENTER	46204
MID-NORTH FOOD PANTRY	46208
MOUNT ZION BAPTIST CHURCH	46208
MOVIE THEATER CHURCH	46229
MEALS ON WHEELS OF CENTRAL INDIANA	46240
NATIONAL CHRISTIAN OUTREACH, COMPASSION CENTER	46203
NATIONAL SQUARE WIC CLINIC	46227
NEHEMIAH BIBLE CHURCH	46201
NEW BETHEL MISSIONARY BAPTIST CHURCH	46202
NEW JERUSALEM MISSIONARY BAPTIST CHURCH	46218
NEW REVELATIONS CHRISTIAN CHURCH	46236
NEW WINESKIN MINISTRIES	46254
NORTH ARLINGTON HEALTH CENTER WIC OFFICE	46218
NORTH UNITED METHODIST CHURCH	46208
NORTHSIDE BAPTIST CHURCH	46220
NORTHWOOD CHRISTIAN CHURCH	46205
NU CORINTHIAN BAPTIST CHURCH - INNER CITY MINISTRY, SANCTITY OF S	46205
OLD BETHEL UNITED METHODIST CHURCH	46219
OLIVE BRANCH CHRISTIAN CHURCH	46225
PERRY TOWNSHIP TRUSTEE, MARION COUNTY	46227
PIKE TOWNSHIP TRUSTEE, MARION COUNTY	46254
PROMISE LAND CHRISTIAN COMMUNITY CHURCH	46208
PURDUE EXTENSION - MARION COUNTY	46205
RAINBOW HOUSE FOOD PANTRY (EBENEZER MISSIONARY BAPTIST CHURCH)	46202
ROBERTS PARK UNITED METHODIST CHURCH	46204
SAINT CHRISTOPHER	46224
SAINT JOHN'S EPISCOPAL CHURCH	46224
SAINT JOHN'S MISSIONARY BAPTIST CHURCH	46202
SAINT LUKE MISSIONARY BAPTIST CHURCH	46218
SAINT SIMON THE APOSTLE CATHOLIC CHURCH	46236
SAINT TIMOTHY EPISCOPAL CHURCH	46227
SAINT VINCENT DE PAUL CLIENT CHOICE FOOD PANTRY	46218
SALVATION ARMY EAGLE CREEK CORPS	46254
SALVATION ARMY FOUNTAIN SQUARE CORPS	46203
SCOTT UNITED METHODIST CHURCH	46202
SECOND HELPINGS	46202

COMMUNITY HEALTH NEEDS ASSESSMENT

	SERVANT'S HEART OF INDY	46203
	SHARING PLACE	46236
	SHEPHERD COMMUNITY CENTER	46201
	SHILOH MISSIONARY BAPTIST CHURCH	46226
	SOUTHEASTERN CHRISTIAN FELLOWSHIP CHURCH	46203
	SOUTHEASTERN CHURCH OF CHRIST	46203
	TABERNACLE PRESBYTERIAN CHURCH	46205
	TEAR DOWN THE WALLS	46208
	TRINITY CHRISTIAN METHODIST EPISCOPAL CHURCH	46205
	TUXEDO PARK BAPTIST CHURCH	46201
	UMOJA CHRISTIAN CHURCH	46222
	VIDA NUEVA UNITED METHODIST CHURCH - CENTRO FAMILIAR	46222
	WARREN TOWNSHIP TRUSTEE, MARION COUNTY	46219
	WASHINGTON TOWNSHIP TRUSTEE, MARION COUNTY	46220
	WAYNE TOWNSHIP TRUSTEE, MARION COUNTY	46241
	WESTMINSTER NEIGHBORHOOD MINISTRIES	46201
	WESTSIDE HEALTH CENTER WIC OFFICE	46222
	WHEELER MISSION CENTER FOR WOMEN AND CHILDREN	46201
	WHEELER MISSION SHELTER FOR MEN	46204
	AMERICAN INDIAN CENTER OF INDIANA	46201
	CONCORD NEIGHBORHOOD CENTER	46225
Employment Assistance	FLANNER HOUSE OF INDIANAPOLIS	46208
	FOREST MANOR MULTI-SERVICE CENTER	46218
	GOODWILL INDUSTRIES OF CENTRAL INDIANA	46222
	HAWTHORNE COMMUNITY CENTER	46222
	HOOSIER VETERANS ASSISTANCE FOUNDATION (HVAF)	46204
	INDIANAPOLIS MARION COUNTY HUMAN RESOURCES DIVISION	46204
	JOHN H. BONER COMMUNITY CENTER	46201
	KEYS TO WORK	46202
	MARION COUNTY PROSECUTOR'S OFFICE	46204
	MARY RIGG NEIGHBORHOOD CENTER	46221
	NATIONAL ABLE NETWORK, INDIANA HEADQUARTERS	46208
	PACE, INC. (Public Advocates in Community Re-Entry)	46218
	PUBLIC ADVOCATES IN COMMUNITY RE-ENTRY (PACE)	46218
	VOCATIONAL REHABILITATION SERVICES - AREAS 13 AND 14	46256
	VOCATIONAL REHABILITATION SERVICES - AREAS 15 AND 16	46241
	VOLUNTEERS OF AMERICA - STRIVE INDY	46202
	WORKONE EXPRESS AT COLLEGE PARK, MARION COUNTY	46278
	WORKONE WEST - MARION COUNTY	46222

COMMUNITY HEALTH NEEDS ASSESSMENT

Mental Health	ESKENAZI HEALTH	46202
	ACTION HEALTH CENTER - MARION COUNTY HEALTH DEPARTMENT	46205
	ADULT AND CHILD - EAST OHIO STREET	46204
	ADULT AND CHILD - MADISON AVENUE	46227
	ARCHDIOCESE OF INDIANAPOLIS	46202
	ASIAN HELP SERVICES	46205
	ASPIRE INDIANA - INDIANAPOLIS	46205
	BROOKE'S PLACE FOR GRIEVING YOUNG PEOPLE	46240
	CATHOLIC CHARITIES INDIANAPOLIS	46202
	CHILDREN'S BUREAU - NEIGHBORHOOD ALLIANCE FOR CHILD SAFETY (NACS)	46218
	CHRISTIAN THEOLOGICAL SEMINARY COUNSELING CENTER	46208
	COMMUNITY HEALTH PAVILION SHADELAND	46219
	COMMUNITY HOSPITAL NORTH BEHAVIORAL HEALTH PAVILION	46256
	CUMMINS BEHAVIORAL HEALTH SYSTEMS - INDIANAPOLIS	46241
	FAMILIES FIRST - CENTRAL OFFICE	46204
	FRANCISCAN SAINT FRANCIS - OUTPATIENT BEHAVIORAL HEALTH SERVICES	46227
	HEALTHNET BARRINGTON HEALTH AND DENTAL CENTER	46203
	HEALTHNET MARTINDALE BRIGHTWOOD HEALTH AND DENTAL CENTER	46218
	HEALTHNET SOUTHEAST HEALTH AND DENTAL CENTER	46203
	HEALTHNET SOUTHWEST HEALTH AND DENTAL CENTER	46221
	HEALTHNET WEST HEALTH CENTER	46224
	INDIANA COALITION AGAINST DOMESTIC VIOLENCE (ICADV)	46202
	INDIANA UNIVERSITY HEALTH METHODIST HOSPITAL	46202
	INDIANA WESLEYAN UNIVERSITY GRADUATE COUNSELING CLINIC	46278
	LEGACY HOUSE	46218
	LIBERTAD COUNSELING	46224
	MARY RIGG NEIGHBORHOOD CENTER	46221
	MENTAL HEALTH AMERICA OF GREATER INDIANAPOLIS	46205
	MIDTOWN COMMUNITY MENTAL HEALTH - ESKENAZI HEALTH	46202
	MIDTOWN MENTAL HEALTH - DR. JAMES J. WRIGHT CENTER	46202
	MIDTOWN MENTAL HEALTH CENTER - ESKENAZI HEALTH	46208
	MIDTOWN WESTSIDE CLINIC - ESKENAZI HEALTH	46224
	MOUNT ZION APOSTOLIC CHURCH	46218
	PEOPLE'S HEALTH CENTER	46201
	REACH FOR YOUTH - CENTER TOWNSHIP OFFICE	46205
	RICHARD L. ROUDEBUSH VETERANS AFFAIRS MEDICAL CENTER (VAMC)	46202
	RILEY HOSPITAL FOR CHILDREN AT INDIANA UNIVERSITY HEALTH	46202
	SAINT VINCENT INDIANAPOLIS STRESS CENTER	46260
	UNIVERSITY OF INDIANAPOLIS PSYCHOLOGICAL SERVICES CENTER	46227

Focus Group (Community Meeting) Findings

Identification of Persons Providing Input

On May 4th, 2015, a community focus group meeting was held to gain additional insight to top health needs in Marion County, Indiana. Key community leaders were asked to attend the focus group and participate in a discussion which was held at the Indianapolis Marriott East from 7am-9pm. A total of 13 leaders participated in the meeting. In attendance were representatives from MSD Warren, School Superintendent, Community Hospital East, Indianapolis Police Department, City County Counselor, Mayor's office, Indy Parks, Prosecutors office, Charter School, Marriott, Raytheon.

Prioritization Process and Criteria

Facilitators instructed participants to sit at one of the 3 tables in the room, with people who were not from the same respective organizations. Facilitators introduced themselves, and were Dan Hodgkins and Ann Yeakle, from Community Health Network, they explained the purpose of the meeting, as well as the findings from the previous CHNA. After the introduction of the facilitators, the participants went around the room and introduced themselves to the whole group and explained: who they were, what their job was, and an interesting fact about themselves. First, the facilitators asked the participants to write down their top 8 concerns for the community on post-it notes that were provided, they were given 20 minutes to decide their biggest issues individually. Then the facilitators asked the tables which were comprised of 6 or 7, to come up with the top 5 concerns for the community together. Approximately 30 minutes later, a representative from each table presented and showed the top 5 concerns that were discussed in the groups to the rest of the participants and facilitators. With a smaller group we were able to talk freely regarding the issues directly affecting the East side.

Description of Prioritized Needs

Individual results were tallied from the groups and they were categorized as: 1. Neighborhood partnership 2. Economy 3. Negative perception. 4. Education. The final conclusion that emerged from the group were not to look at all the negativity that is sometimes brought about with the eastside, but to change the perception. Economic re-development is a big key issue for this zip code 46219. By redeveloping the area it will bring more businesses which bring more jobs. The overarching goal was to engage the local media to see the good that is coming from this area. Scott Teffeteller, Community Hospital East Region President stated that they are putting \$175 million back into the community, *“we are here to stay and people need to know that the east side is great”*. Raytheon echoed the sentiment as did the police department and Mayor’s office. Everyone agreed that crime is being worked on by the police department, and neighborhood groups are becoming involved. It is the media that we need to include so people can see that the eastside is great. One other conclusion was education, as the backbone to helping to change the perception. Education is the key to getting people out of poverty, growing the economy and giving a sense of pride in their community.

Electronic Community Survey Findings

A total of 893 Marion County residents have participated in this electronic survey, as of 17 June 2015. The Marion County surveys have accounted for 14.6% of all surveys taken to that date. See Figures below for survey questions and responses.

COMMUNITY HEALTH NEEDS ASSESSMENT

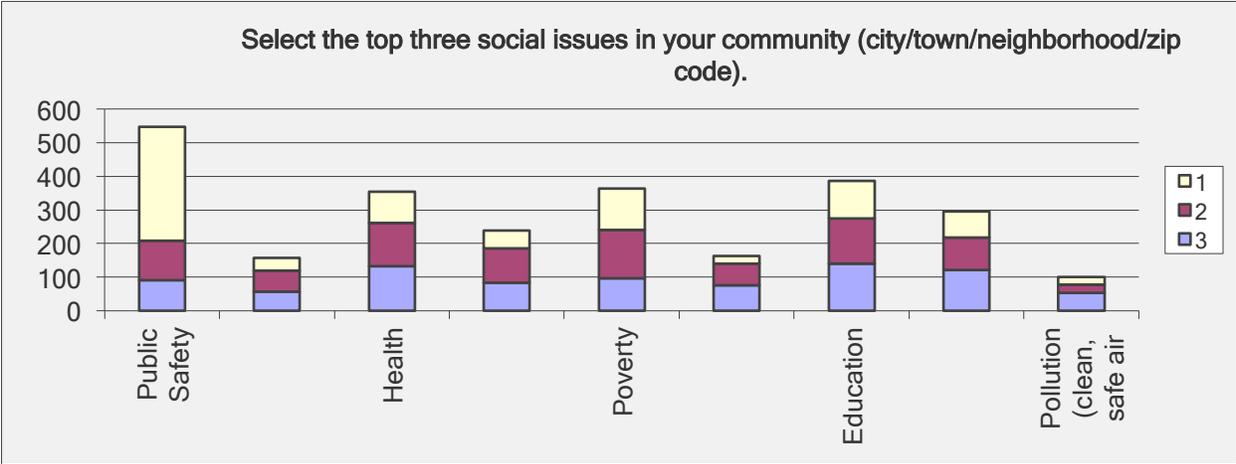


Figure 2 survey responses (N=891) to “Select the top three social issues in your community”

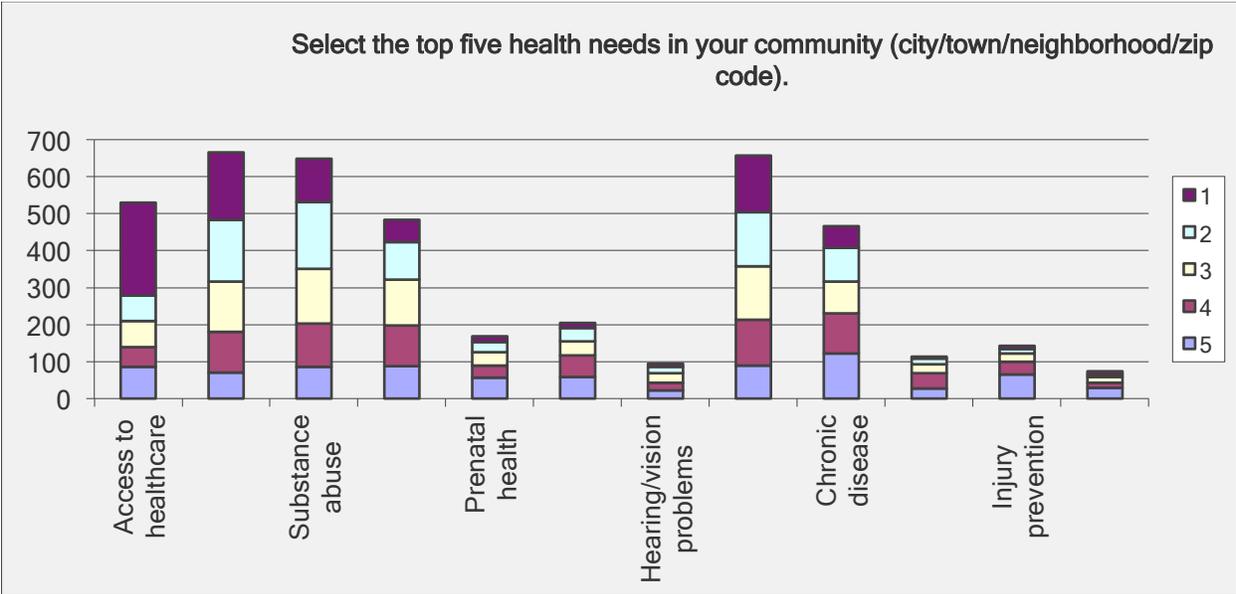


Figure 3 survey responses (N=891) to “Select the top five health needs in your community”

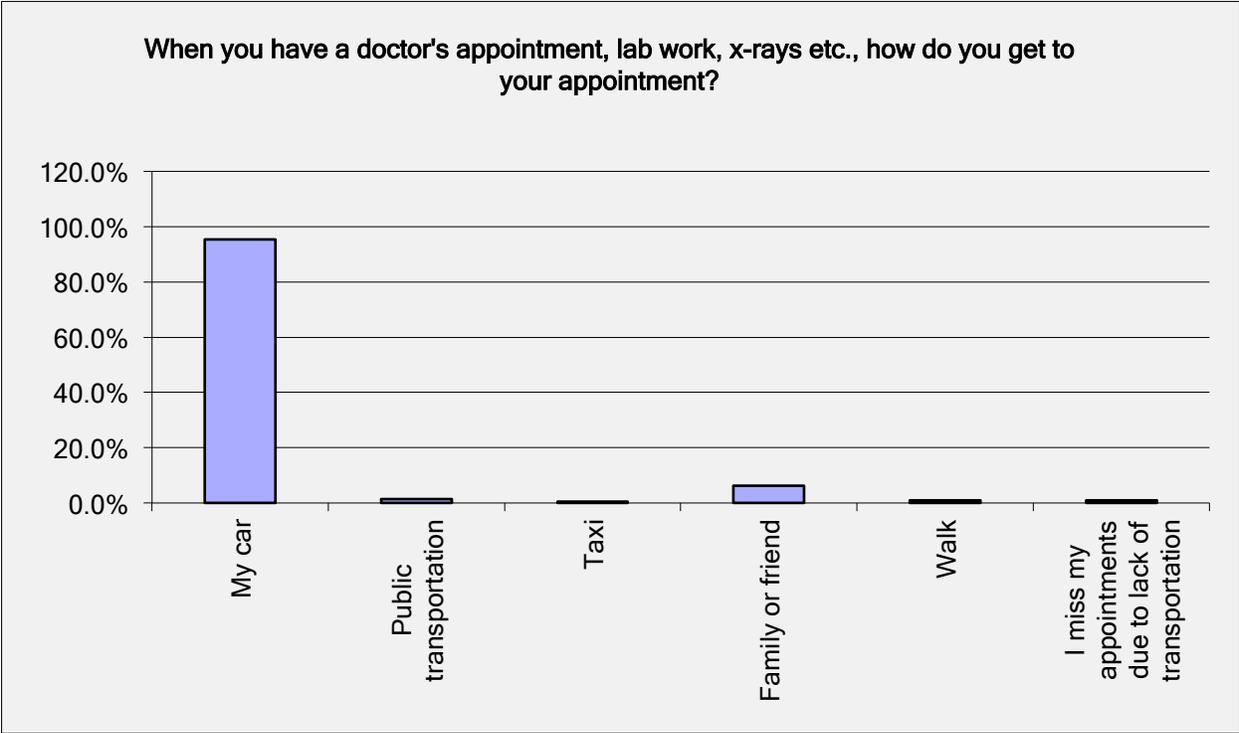


Figure 4 survey responses (N=891) to “When you have a doctor’s appointment, lab work, x-rays, etc., how do you get to your appointment”

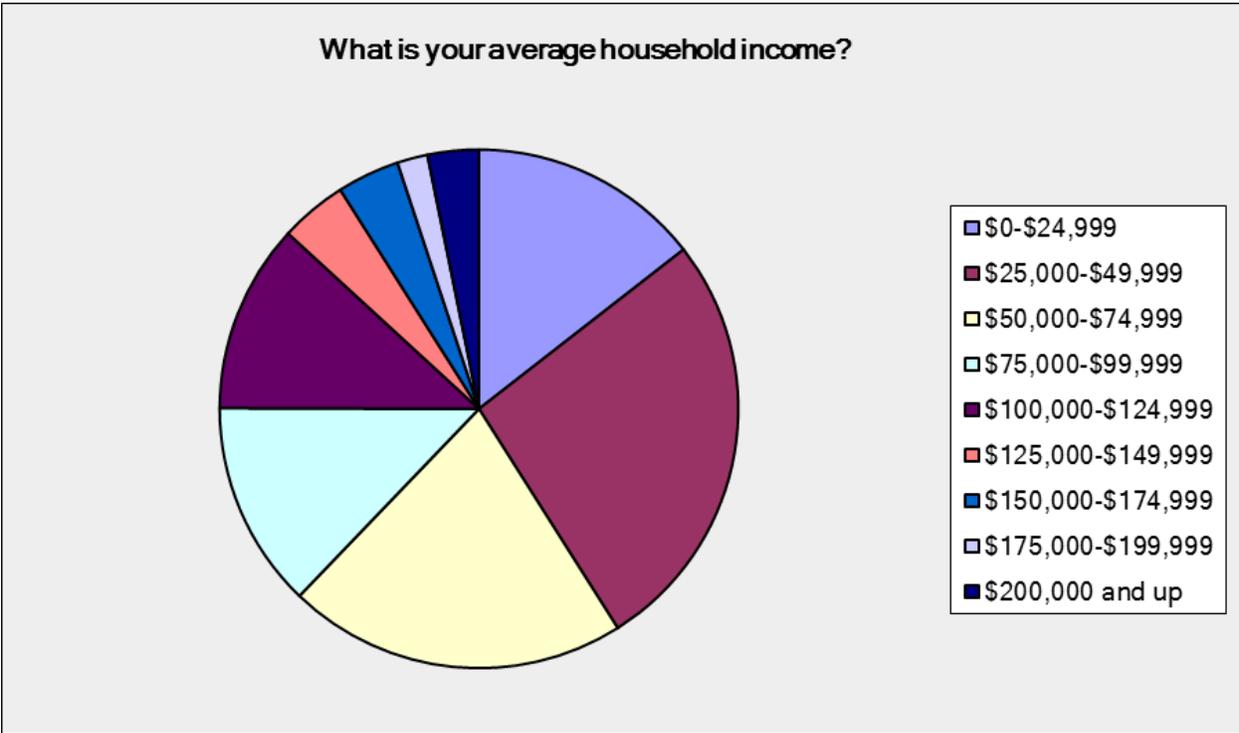


Figure 5 survey response (N=891) to “What is your average household income”

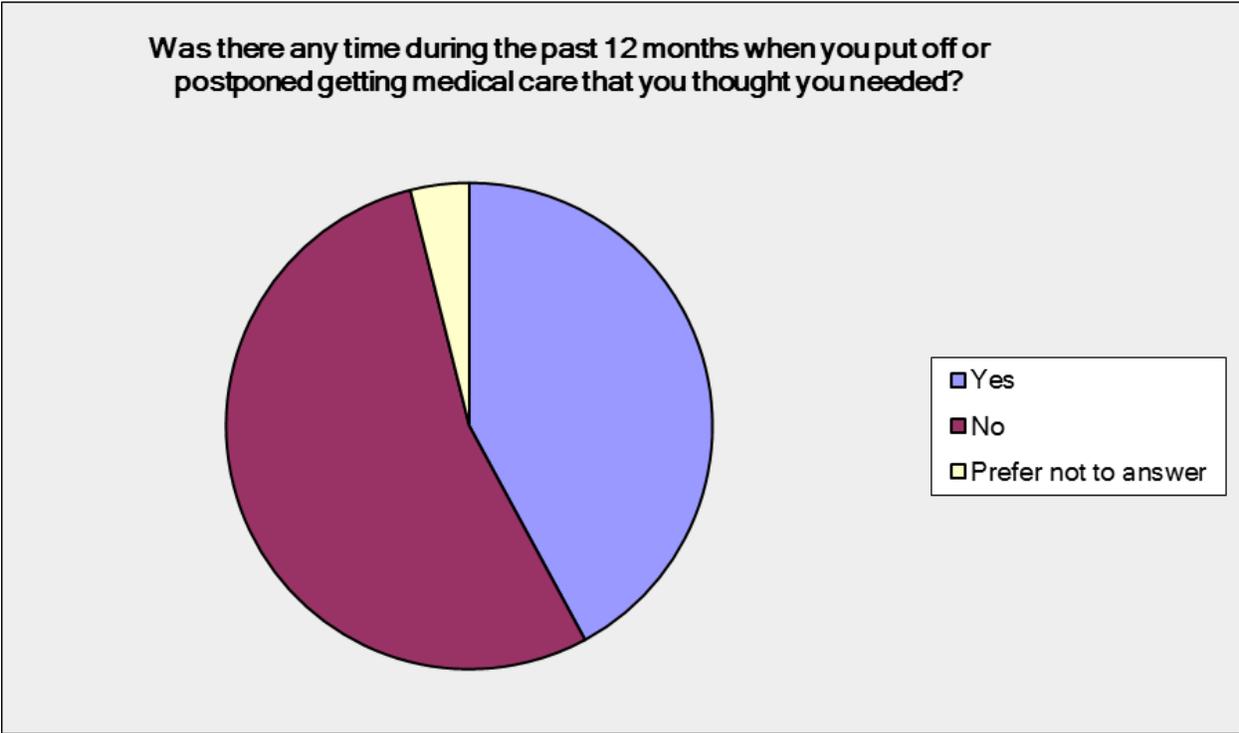


Figure 6 survey response (N=687) to “ Was there any time during the past 12 months when you put off or postponed getting medical care that you thought you needed”

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MARION COUNTY-COMMUNITY/COUNTY WIDE FOCUS GROUP

Introduction

A community health needs assessment (CHNA) is currently being worked on by 4 major hospitals in the Marion County area. Under a collaboration with IU Health, St. Francis Alliance, and St. Vincent; Community Health Network have been conducting surveys focused on finding the most prevalent health needs of the community. With this collaboration between the hospital networks there will be more information accumulated, which will make this CHNA more complete and able to reach a wider audience, than if this assessment was taken on by one hospital network. The following sections will outline the findings of focus groups taken place in Marion County.

Data Sources

The data collection is done through primary and secondary data. The primary data is collected through focus groups, these focus groups are in a group setting. The focus groups are first made into groups of 5 people to a group and they discuss their personal health issues in the community. Once they come up with their issues they discuss as a group and come up with their groups top 5-7 health needs as a whole. Furthermore, as a whole they come up with their top 5-7 needs in the community, the qualitative as well as quantitative data is taken down. The secondary data collection occurs through online databases and resources such as: SAVI, Indicators, Community Commons, County Health Rankings, and the Centers for Disease Control and Prevention (CDC), to find out the demographic, health indexes, and health issues.

Collaborating Organizations

The collaborating organizations for the CHNA are: Community Health Network, IU Health, St. Francis Alliance, and St. Vincent. All of the hospitals have been working in Marion

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County to try and get the most representation for the issues that are plaguing this area of Indiana. This collaboration will ultimately be responsible for any expatiated change in policy, initiatives, or funding for issues that may be needed to improve the health needs of the community.

Definition of Community Assessed

Marion County is one of the least healthy counties in Indiana in reference to health outcomes, health behaviors, and health factors. Marion County is ranked number 89 out of 92 counties in the state and has the worst social & economic factors⁶. They are falling behind in high school graduation (10%) below the Indiana average, children in poverty (30%) is 8% higher than the Indiana average, and violent crime (1,124) this is 790 more than the Indiana averages⁴. These numbers exemplify issues that we see from the secondary data that we have accumulated, however there is more secondary data that needs to be examined in order to get a fair and detailed analysis of the community. The secondary data for Marion County will be explained further in the following sections.

Secondary Data

The following is information collected using the secondary sources listed above. This information includes demographics, economic indicators, insurance coverage, county health rankings, community health status indicators, zip-code specific data, medically underserved areas and populations, and information on medical professional shortages in Marion County.

Demographics

The total population for Marion County is 912,242 as of 2013. The population breaks down to 10.8% 65 or older, 64.23% 18 to 64 and 24.99% under age 18⁸. The racial demographics for Marion County are 63.4% Caucasian and 26.83% African-American. The Hispanic community makes up 9.42% of the population. A majority of the community, 87.5%,

COMMUNITY HEALTH NEEDS ASSESSMENT

use English as their household language. 7.67% use Spanish as their household language and 4.83% use a language other than English or Spanish in their household⁸.

Economic Indicators.

The economy is one key factors that influence a community. Marion County has a large population of children under 18 living in poverty, 30.1%, which is higher than the 22% of children living in poverty in Indiana⁵. Education within Marion County is also lower than other surrounding counties and the state as a whole. The population of adults 25 and older without a high school diploma is 15.45%, 29.1% have only a high school diploma, 21.13% have some college, without a degree, 6.93% have an associate’s degree and 27.38% have a bachelor’s or higher⁸. This lacking education is also a predictor of lower income. The median household income for Marion County is \$42,334, lower than all other surrounding counties, *Figure 1*⁸. In addition, 13.87% of the homes in Marion County are vacant and another 38.03% are renter occupied units⁸.

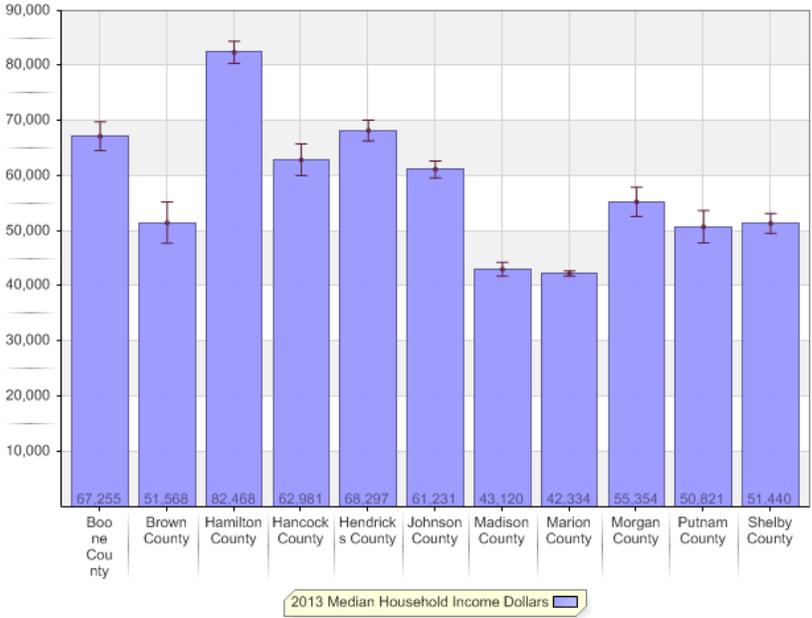


Figure 1: 2013 Median Household Income Dollars for Central Indiana counties

Insurance Coverage.

The majority of Marion County residents have employer based healthcare insurance coverage, insuring 52.39% of the population. Residents under 65 who are uninsured reaches 18.85%, which is slightly higher than the state at 17%⁸.

County Health Ranking.

Marion County ranks 74th in the state for overall health outcomes. It is ranked 89th for health factors, such as adult smoking and adult obesity. It is exceptionally higher in the number of sexually transmitted infections and teen births, 1100 and 55, respectively, compared to the state, 451 and 39, respectively⁴. Among social and economic factors, such as unemployment, children in poverty and violent crimes, Marion County is ranked last in the state, 92nd⁴.

Community Health Status Indicators.

According to the Center for Disease Control and Prevention, Marion County ranks in the least favorable quartile for mortality, related to cancer, chronic kidney disease, chronic lower respiratory disease, female life expectancy and male life expectancy. For issues related to morbidity, such as adult obesity, overall adult health status, gonorrhea, older adult depression and syphilis, Marion County is ranked in the least favorable quartile. Health care access and quality are also in the last favorable quartile related to older adult preventable hospitalizations. Marion County ranks in the least favorable quartile for health behaviors related to adult physical inactivity, adult smoking and teen births. Marion County also ranks in the least favorable quartile for social factors related to children in single-parent households, inadequate social support, poverty, and violent crime. For issues related to the physical environment such as access to parks, annual average PM2.5 concentration (poor air quality) and limited access to healthy food, Marion County ranks in the least favorable quartile.

COMMUNITY HEALTH NEEDS ASSESSMENT

Zip Code-Level Health Access Indicators

This focus group was located at the Saint Paul Episcopal Church, in zip code 46208. This area of Marion County is located in Indianapolis, but is still lacking in community resources. Data shows that high age-adjusted emergency hospitalization visits related to diabetes (47.0 per 10,000), long-term complications (23.4 per 10,000) and short-term complications (16.1 per 10,000).

Data shows high rates of emergency room visits due to respiratory diseases. Data shows high age-adjusted emergency visits for asthma (32.5 per 10,000), adult asthma (22.6 per 10,000) and pediatric asthma (60.9 per 10,000).

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The United States Department of Health and Human Services considers Marion County as a medically underserved area and population within Indiana.

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Compared to other counties in Indiana, Marion County is doing fairly well among health professionals. There are approximately 1,254 patients for 1 primary care physician, compared to 1,518 patients for 1 primary care physician in Indiana. There are 1,273 patients for every 1 dentist in Marion County, compared to 1,973 patients for every 1 dentist in the state. Marion County is also doing better than the state in the number of mental health providers, 436 patients for every 1 provider, compared to 750 patients for every 1 provider⁴.

COMMUNITY HEALTH NEEDS ASSESSMENT

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	ANNA'S HOUSE	46222
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	BETHEL AFRICAN METHODIST EPISCOPAL CHURCH	46202
	BILLIE'S FOOD PANTRY	46222
	BLACKBURN HEALTH CENTER WIC OFFICE	46208
	BOULEVARD PLACE FOOD PANTRY - SAINT VINCENT DE PAUL	46208
	BRIDGEPORT CENTRAL BAPTIST CHURCH	46231
	BRIGHTWOOD COMMUNITY CENTER	46218
	BROAD RIPPLE UNITED METHODIST CHURCH	46220
	BROOKSIDE PARK AND FAMILY CENTER	46201
	CALVARY BAPTIST CHURCH	46235
	CATHEDRAL KITCHEN	46202
	CATHOLIC CHARITIES CRISIS OFFICE	46202
	CENTER TOWNSHIP TRUSTEE, MARION COUNTY	46204
	CENTRAL CHRISTIAN CHURCH	46204
	CHAPEL HILL UNITED METHODIST CHURCH	46214
	CHAPEL ROCK CHRISTIAN CHURCH	46214
	CHRIST CHURCH APOSTOLIC	46260
	CHRIST CHURCH OF GLORY	46220
	CHRIST UNITED METHODIST CHURCH	46227
	CHRISTAMORE HOUSE FAMILY AND COMMUNITY CENTER	46222
	CHURCH OF ACTS	46237
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	COMMUNITY OUTREACH MINISTRY EASTSIDE (COME)	46229
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	DELIVERANCE TEMPLE	46226
	DIVINE DIRECTION CHRISTIAN CHURCH	46205
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Focus Group (Community Meeting) Findings

Identification of Persons Providing Input

On May 15th, 2015, a community focus group meeting was held to gain additional insight to top health needs in Marion County, Indiana. Key community leaders were asked to attend the focus group and participate in a discussion which was held at Saint Paul Episcopal Church from 10am-12pm. A total of 20 leaders participated in the meeting. In attendance were representatives from Clinical Translational Sciences Institute, Life's Touch Home Health, Repucare Incorporated, Indianapolis Housing, St. Vincent Hospital, St. Francis Hospital, Anthem, IU Health, Martindale Brightwood Community Development Corporation, Immigrant Welcome Center, Community Alliance of the Far Eastside, All Senior Citizens Connect, Mapleton-Fall Creek Development Corporation, Marion County Health Department, and Phalen Leadership Academies.

Prioritization Process and Criteria

Facilitators instructed participants to sit at one of the 5 tables in the room, with people who were not from the same respective organizations. Facilitators introduced themselves, and were Dan Hodgkins and Ann Yeakle, from Community Health Network, they explained the purpose of the meeting, as well as the findings from the previous CHNA. After the introduction of the facilitators, the participants went around the room and introduced themselves to the whole group and explained: who they were, what their job was, and an interesting fact about themselves. First, the facilitators asked the participants to write down their top 8 concerns for the community on post-it notes that were provided, they were given 20 minutes to decide their biggest issues individually. Then the facilitators asked the tables which were comprised of 6 or 7, to come up with the top 5 concerns for the community together. Approximately 30 minutes later,

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a representative from each table presented and showed the top 5 concerns that were discussed in the groups to the rest of the participants and facilitators. While these top 5 issues were being discussed, Jacob Hartmeister, Laynie Mason, and Zach Loftfalian, from Community Health Network, wrote down and tallied each of the tables' top priorities as a whole, these were written down on poster board for everyone to see. Communication and education received the greatest number of tally marks, which was acknowledged as the top concern for almost all in by the end of the meeting. Jacob Hartmeister, Laynie Mason, and Zach Loftfalian grouped closely-related issues together to finalize the list of top 5 priority concerns for the community after the meeting.

Description of Prioritized Needs

1) Communication/Resources, 2) Education, 3) Transportation, 4) Poverty, and 5) Built Environment, these were the top 5 health needs for this portion of Marion County, based on the focus group.

Electronic Community Survey Findings

A total of 893 Marion County residents have participated in this electronic survey, as of 17 June 2015. The Marion County surveys have accounted for 14.6% of all surveys taken to that date. See Figures below for survey questions and responses.

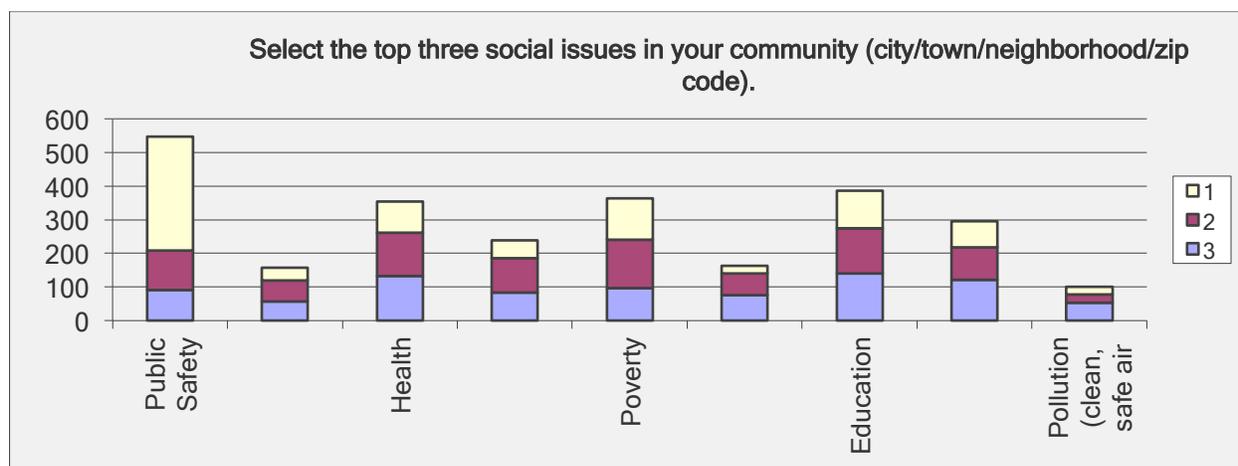


Figure 2 survey responses (N=891) to “Select the top three social issues in your community”

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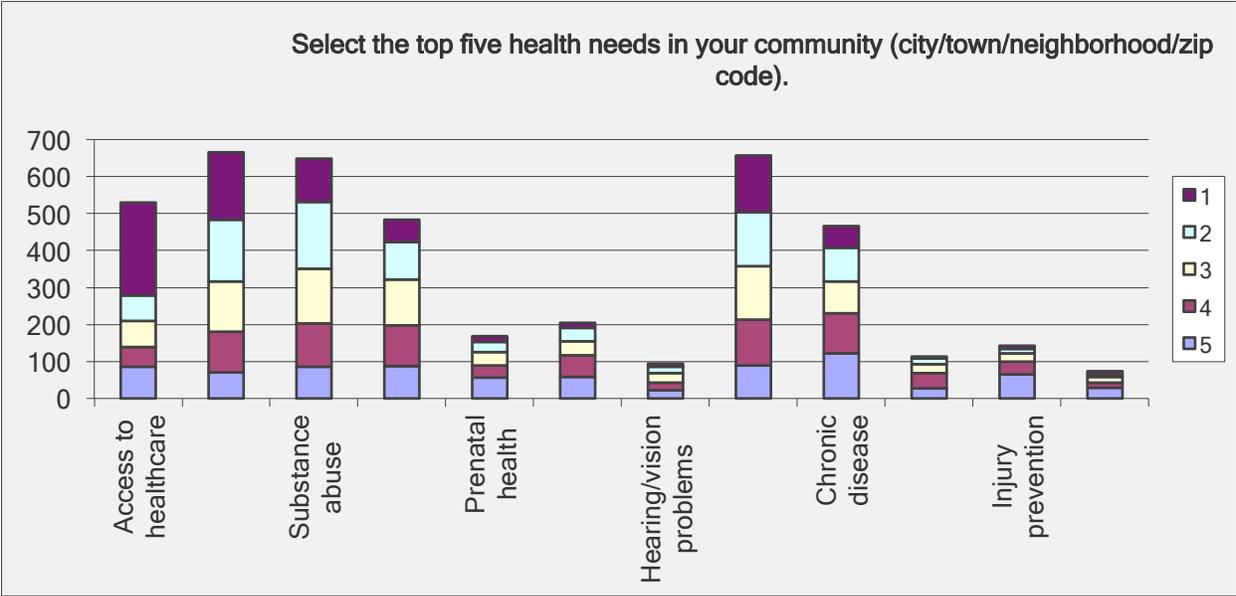


Figure 3 survey responses (N=891) to “Select the top five health needs in your community”

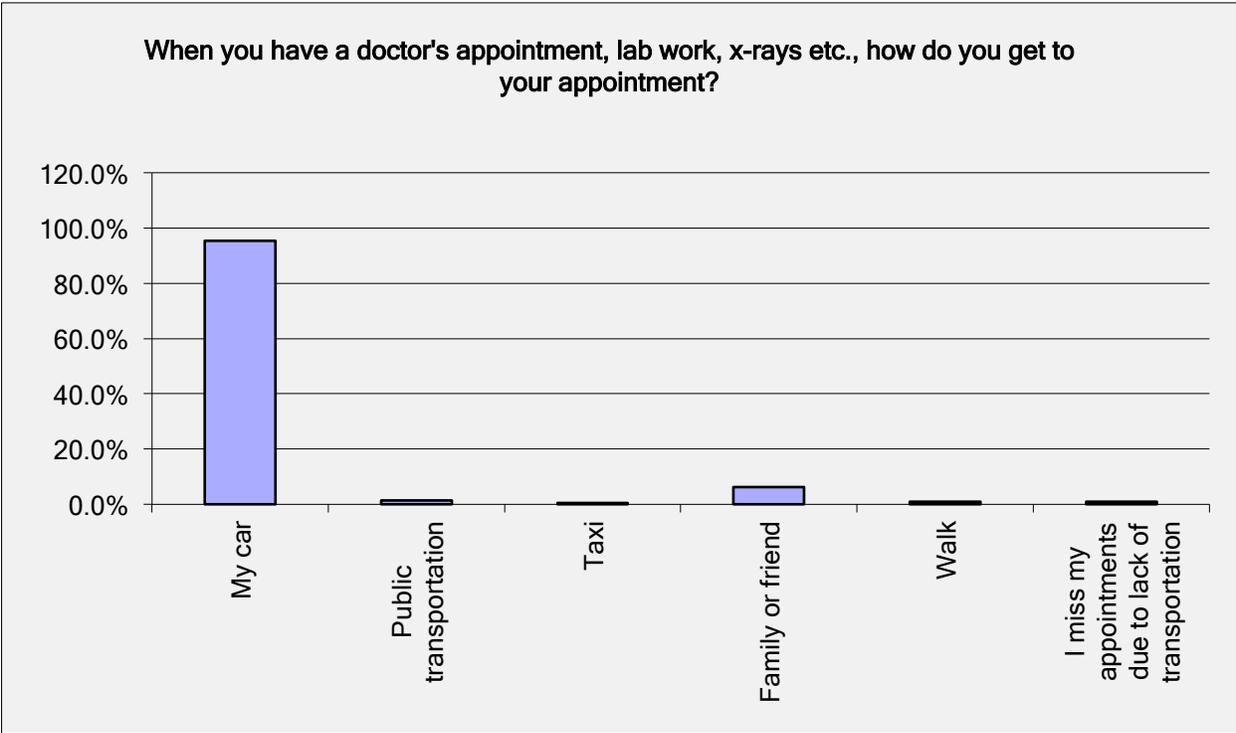


Figure 4 survey responses (N=891) to “When you have a doctor’s appointment, lab work, x-rays, etc., how do you get to your appointment”

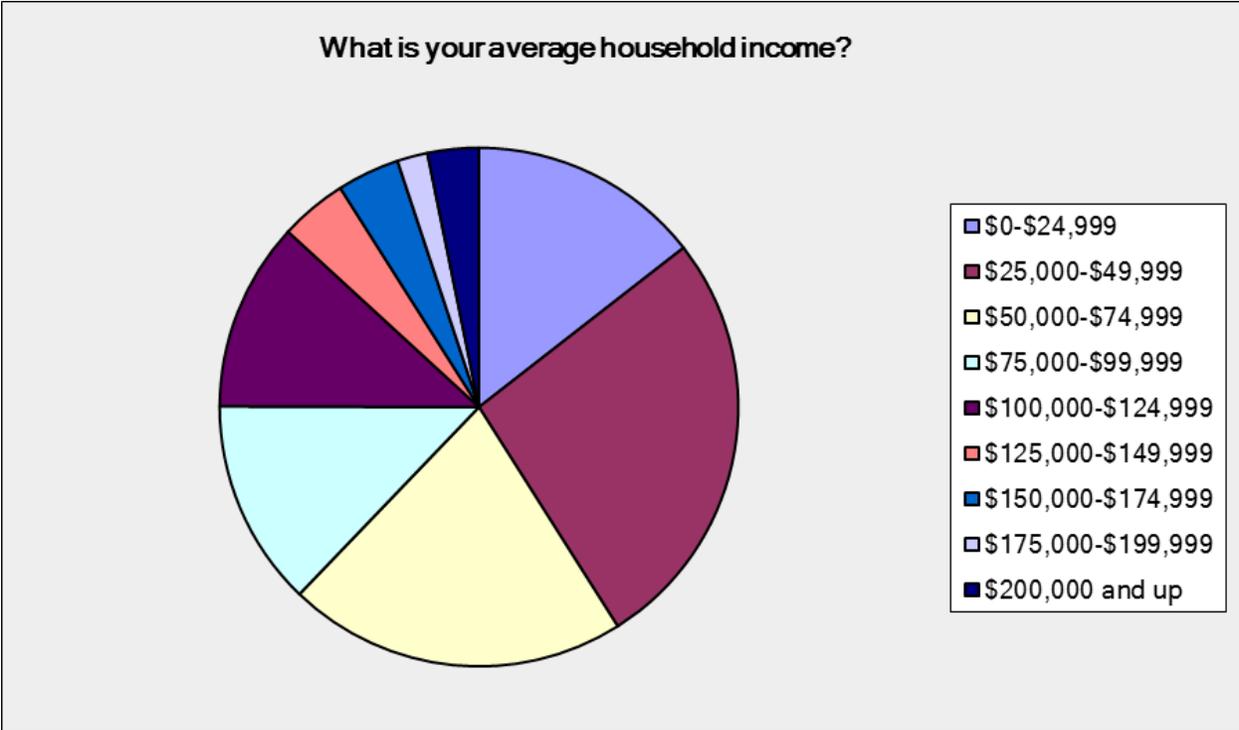


Figure 5 survey response (N=891) to “What is your average household income”

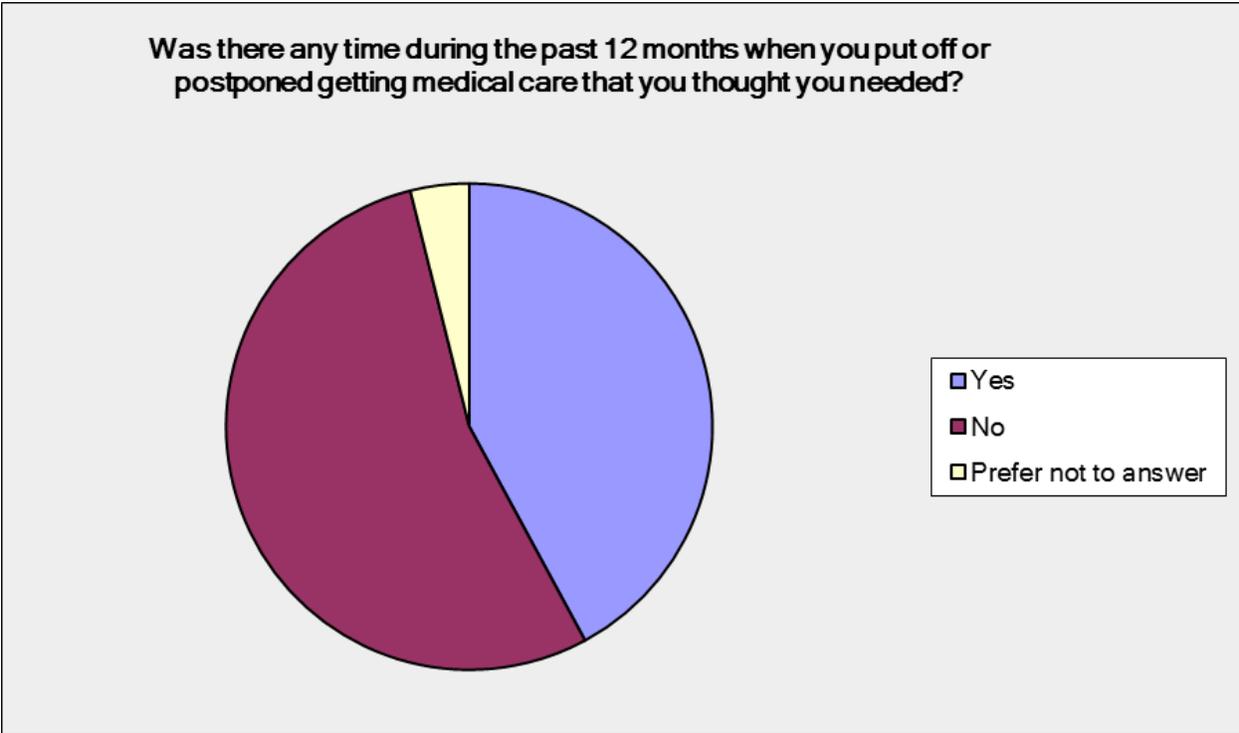


Figure 6 survey response (N=687) to “ Was there any time during the past 12 months when you put off or postponed getting medical care that you thought you needed”

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Howard County

Introduction

During the spring of 2015, Indiana University Health, Community Health Network, Franciscan St Francis, and St Vincent Health initiated a Community Health Needs Assessment (CHNA) to identify the most important health needs in their communities. The overall purpose of conducting a CHNA is to gather information on gaps in the services currently provided and use that information to assist the hospitals in identifying strategies and developing programs to implement over the next three years, 2016-2018 (CHNA, 2012).

Data Sources

Data for this report comes from multiple sources including the U.S. Census Bureau (U.S. Census, 2015), Indiana INdicators (Indiana INdicators, 2013), County Health Rankings & Roadmaps (County Health Rankings, 2015), U.S. Department of Health and Human Services (HHS) (HHS, 2014 and HRSA, 2014), Kids Count Data Center (Kids Count Data, 2015), Community Health Status Indicators (CHSI) (CHSI, 2015), and previous Community Health Needs Assessment (CHNA) for Howard County (CHNA, 2012). These sources were used to gather secondary data on Howard County's demographics, economic indicators, and health status. Both primary and secondary data research was conducted.

Definition of Community Assessed

This report provides the findings for Howard County, which includes the cities of Kokomo, Russiaville, and Greentown. See Appendix A for a map of Howard County. Howard County is rich in the manufacturing industry and 21.5% of individuals live in a rural area (County Health Rankings, 2015 and Greater Kokomo, 2015).

Secondary Data

Demographics. According to the 2013 U.S. Census, the total population in Howard County is 82,961 (U.S. Census, 2015). The 2013 U.S. Census reported 88.8% of the population is Caucasian, 7.2% is African American, 2.9% is Hispanic or Latino, 1% is Asian, and 0.4% is American Indian (U.S. Census, 2015). Howard County has slightly more females (51.8%) than males (U.S. Census, 2015).

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The median age in Howard County is 38.7 and the largest group of individual’s falls between the ages of 20-34 (Greater Kokomo, 2015). The life expectancy in Howard County (78.7 for females and 74.2 for males) is below the National average (80.9 for females and 76.3 for males) (IHME, n.d.).

Economic Indicators. Unemployment, defined as the labor force age 16 and older, that is not working and seeking work, can cause a lack of access to health insurance and may also lead to unhealthy behaviors (County Health Rankings, 2015). Howard County’s unemployment rate (8.2%) is slightly higher than the State of Indiana’s unemployment rate (7.5%) (County Health Rankings, 2015).

Higher levels of household income and education are important factors to acknowledge, as they can be associated with a lower risk of developing chronic diseases (Indiana INdicators, 2013). In 2009-2013, 20% of the Howard County population had a bachelor’s degree or higher and 88.8% were high school graduates or higher (U.S. Census, 2015). Howard County’s high school graduate rate is higher than the State of Indiana’s (87.2%) but falls behind in bachelor’s degree or higher (23.2%) (U.S. Census, 2015).

The median household income for residents of Howard County in 2013 was \$43,590, falling below the State of Indiana’s median household income of \$48,248 (Indiana INdicators, 2013). The percentage of the population in Howard County that lives below the poverty line is 16.7%, higher than the State of Indiana’s; 15.4% (Indiana INdicators, 2013). The percentage of Howard County children living in poverty (25.4%) is higher than the State of Indiana’s children (21.4%) (Indiana INdicators, 2013). The number of residents requiring food stamps in Howard County has continued to increase since 2009:

Table 1: Number of Individuals Who Required Food Stamps in Howard County by Year
(Kids Count Data Center, 2015)

Year	2009	2010	2011	2012	2013
# of individuals	9,817	11,862	13,527	14,516	14,712

Howard County has seen a marginal decrease in individuals utilizing Women Infant and Children Services (WIC) from 2012 (4,310) to 2013 (4,207) (Kids Count Data Center, 2015). Two hundred and twenty four children in Howard County required Temporary Assistance for

Needy Families (TANF) in 2013 (Kids Count Data Center, 2015). TANF is a program that provides cash and other support services to families with children under the age of 18 (Kids Count Data, 2015).

Insurance Coverage. Having health insurance allows individuals to access health care when needed and receive preventative care (County Health Rankings, 2015). In 2013, 19% of adults (aged 18-65) and 7% of children (under the age of 19) lacked health insurance in Howard County (County Health Rankings, 2015).

Howard County's ranking in clinical care in the 2015 County Health Rankings & Roadmaps report shifted from 7th to 8th (County Health Rankings, 2015). Clinical care includes the number of uninsured, the amount of primary care physicians, dentist, mental health providers, preventable hospital stays, diabetic monitoring, and mammography screening (County Health Rankings, 2015). Eighteen percent of residents in Howard County reported not being able to see a doctor due to the cost in the past year (County Health Rankings, 2015).

County Health Rankings. Indiana has 92 counties; all counties were compared and ranked (1 being the highest) on a variety of health measure as part of the County Health Rankings & Roadmaps program. Howard County's overall ranking in the 2015 report was 61st in Health Outcomes and 53rd in Health Factors (County Health Rankings, 2015). This is an improvement from the 2014 report ranking, 68th in Health Outcomes and 58th in Health Factors (County Health Rankings, 2014). Health outcomes include length of life and quality of life. Health factors include health behaviors, clinical care, social and economic factors, and physical environment (County Health Rankings, 2015). Areas that saw the most improvement were health behaviors, length of life, and quality of life. Areas that fell in rankings were clinical care and physical environment.

The following information regarding Howard County's health status was gathered from the 2015 County Health Rankings & Roadmaps report (County Health Rankings, 2015):

- Thirteen percent of residents have diabetes
- In the past year, 16% of residents did not have access to a reliable source of food
- Ten percent reported not living close to a grocery store in order to access healthy foods
- HIV prevalence is 122 per 100,000 population
- Infant mortality (less than 1 year of age) - 6.0 per 1,000 live births
- Child mortality (under the age of 18) - 38.6 per 100,000 population

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- Live births considered low birth weight - 7.4% (5 lbs., 8 oz.)

Howard County residents rank lower than the State of Indiana’s average in the following (County Health Rankings, 2015):

- Self-reported poor or fair health (20%)
- Self-reported poor physical health days (5.1 in the past 30 days)
- Self-reported poor mental health days (4.9 in the past 30 days)

Additionally, the rate of adult obesity decreased from 38% in the 2014 report to 36% in the 2015 report (County Health Rankings, 2015). This rate is still above the State of Indiana and National rate for adult obesity. Areas that saw improvement are listed in the following table:

Table 2: Health Factor/Behavior Report Comparisons for Howard County
(County Health Rankings, 2015)

Health Factors/Behavior	2014 Report	2015 Report
Physical Inactivity	31%	29%
Alcohol-impaired driving deaths	30%	26%
Sexually transmitted infections	312	304
Teen births	49	47

Community Health Status Indicators. The Center for Disease Control and Prevention (CDC) created an online application, Community Health Status Indicators (CHSI), to report on the health status of all counties in the United States and District of Columbia (CHSI, 2015). The application compares county information (variables include population size, growth, density, unemployment, poverty, etc) with other similar counties as well as with the United States as a whole. It then rates the county as “better”, “moderate” or “worse” compared to the other similar counties (CHSI, 2015). Information provided by the CHSI includes mortality, morbidity, health care access and quality, health behaviors, social factors, and physical environment (CHSI, 2015).

Howard County rates “moderate” most often when compared to other similar counties. Examples of specific areas that Howard County rates “moderate” in for mortality and morbidity are deaths caused by diabetes (per 100,000), deaths causes chronic lower respiratory disease (CLRD), cases of individuals living with HIV (per 100,000), and the amount of adults with

depression and diabetes (CHSI, 2015). Howard County's health care access also rates "moderate" in the amount of primary care providers per 1,000 and individuals under the age 65 that are uninsured (CHSI, 2015). Health behaviors that are rated "moderate" include; adult physical inactivity, the amount of adults (age 18 and over) that smoke, and teen births for females age 15-19 (per 1,000 births) (CHSI, 2015). Social factors that are rated "moderate" include poverty (income below federal poverty level) and unemployment (CHSI, 2015). Howard County's physical environment also rated "moderate" for access to parks (living within a half mile of a park) (CHSI, 2015).

Howard County rates "better", or most favorable, in overall cancer death rates and coronary heart disease deaths (CHSI, 2015). The county also rates "better" in the incidence rate of cancer, preterm births, and syphilis (per 100,000) (CHSI, 2015). In health care access and quality, Howard County rates "better" than similar counties in "older adult preventable hospitalizations" (CHSI, 2015). The only health behavior that Howard County rates "better" in is the percentage of adult binge drinking (CHSI, 2015). Examples of social factors that Howard County rates "better" in include the amount of residents that graduate from high school in four years and percentage of children living in a single parent home (CHSI, 2015).

Lastly, Howard County rates "worse", or least favorable, in the following areas; "chronic kidney disease deaths, female life expectancy, adult obesity, adult overall health status, cost barrier to care, inadequate social support, and limited access to healthy food" (CHSI, 2015).

Zip-Code Level Health Access Indicators. No information is provided in this category for Howard County.

Medically Underserved Areas and Populations.

The Indiana State Department of Health (ISDH) and the U.S. Department of Health and Human Services (HHS) reported in April 2014 that Howard County is a Medically Underserved Area and Population (HHS, 2014). Areas that have a shortage of personal health services are identified as Medically Underserved Areas (HRSA, 2014). Medically Underserved Populations are groups of individuals that face barriers to health care (HRSA, 2014). Examples of barriers include economic, cultural, or linguistic (HRSA, 2014).

Health Professional Shortage Areas.

ISDH and HHS reported in April 2014 that Howard County has a Primary Care Health Professional Shortage (physician to population ratio) (HHS, 2014). Howard County *does not* have a shortage of dental or mental health providers (HHS, 2014).

Description of Other Facilities and Resources within the Community.

Howard County has two major medical facilities: Community Howard Regional Health System and St Joseph Hospital and has more than 12 optometrists and 50 dentists (Greater Kokomo, 2015). Other health services provided throughout Howard County include family practices, surgery, internal medicine, pediatric care, care for homebound individuals, rehabilitation and OB/GYN services (Greater Kokomo, 2015).

Focus Group Findings

Identification of Persons Providing Input

The Howard County focus group was conducted as part of the CHNA to gain further insight into the pressing human service issues (CHNA, 2012). Key stakeholders in the community were invited to attend the focus group on Wednesday, March 25, 2015 from 11am to 2pm. The focus group was held at Kokomo Howard County Public Library.

In attendance were representatives from the following organizations: Indiana Health Center, United Way, Mental Health Association, City of Kokomo, YMCA, Clinic of Hope, Kokomo Public Library, Center Township, Community Foundation, Samaritan Caregivers, Bona Vista, Kokomo Housing Authority, Acacia Academy, Indiana University, Ivy Tech, St Joseph Hospital, American Cancer Society, Indiana Health Center, Excel Center, UAW/Partners for a healthier Community, Project Access, Early Headstart, and Kokomo Rescue Mission. A detailed list of participants is available in Appendix B. The focus group was facilitated by the following individuals; Kelly Peisker, St Vincent Health/St Joseph Hospital, Ann Yeakle, Community Health Network, Lisa Holaday, Howard Community Hospital, and Whitney Albrecht, student from Indiana University Purdue University in Indianapolis, IN (School of Public Health).

Prioritization Process and Criteria

The focus group began with introductions of facilitators followed by the purpose and goal of the meeting and a brief explanation of the previous CHNA results. Participants went around the room and introduced themselves and stated what organization they represented. Participants were assigned to one of six tables and provided with a list of ten health indicators:

1. Obesity
2. Tobacco use/e-cigarettes
3. Behavioral health (substance abuse, addiction)
4. Mental health (depression)
5. Access to healthcare (transportation)
6. Food security
7. Lifestyle
8. Poverty
9. Unemployment
10. Community is not walkable/bike-able

Each table was asked to discuss the list of health indicators for roughly thirty-five minutes and identify the five most pressing issues in the county. If the table determined an additional indicator that was not listed, they were encouraged to add it. After discussions were complete, each table reported their top five priorities. Additional areas of concern include criminal record, infant mortality, mentoring, advocacy, underemployment, prenatal care, parenting skills training/education, and education on a variety of health topics.

Next, based on the final count of all the tables, large pieces of paper were hung on the wall with the top 10 indicators identified:

1. Housing
2. Tobacco
3. Poverty
4. Unemployment/underemployed
5. Lifestyle
6. Food security
7. Obesity
8. Access to healthcare
9. Behavioral health
10. Mental health

Each table was given five colored sticky notes and asked to discuss the health indicators on the wall. Some of the health indicators on the list were combined (example behavioral and mental health). After discussions were complete, each table placed one sticky note on five of the most pressing issues. See Appendix C for a picture of the wall with sticky notes.

Description of Prioritized Needs

Participants identified the following top five indicators:

1. Behavioral and mental health
2. Lifestyle
3. Access to healthcare
4. Tobacco
5. Unemployment/underemployed

Electronic Community Survey Findings

The online survey was designed by Indiana University Health, Community Health Network, Franciscan St Francis, and St Vincent Health to help identify outreach priorities for the next three years, 2016-2018 (CHNA, 2012). Almost 5,000 participants completed the online survey. Participants were asked to enter their zip code in order to associate them with other participants in their county. Howard County yielded responses from 136 participants, however not all 136 participants answered the questions relating to Howard County. The following is a summary of the five Howard County specific questions from the online survey results (Questions 22-26) (Central Indiana Hospital CHNA, 2015):

Question 22: Please select which services you and your household use and where you go for those services. Check all that apply:

- Answers to select from: primary care, mental health care, prenatal care, dental/oral health care, eye/vision care, social services, health care specialist, other health care
- Yielded 136 respondents
- Primary care (93.33%) followed closely by dental/oral health (92.31%) were sought in Howard County
- Prenatal care (80.95%) and social services, including unemployment, (80.37%) was select most often as “don’t need service”

Question 23: In the last twelve months, where did your household get health care and how often?

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- Answers to select from: primary care doctor, specialist, nurse practitioner, emergency department, immediate care center, community clinic, drug or discount store, school nurse office, dentist, vision center, mental health services.
- Yielded 134 respondents
- Primary care doctor, used 1-3 times (68.94%)
- Drug or discount store, used more than 12 times (26.09%)
- Community clinic, used the least or not used at all (95.41%)

Question 24: Which of the following do you think is the most important behavioral health issue in your community? Select one only.

- Answers to select from: depression/loneliness, stress, suicide, heroin abuse, other illegal drug use, prescription drug abuse, tobacco use/addiction, alcohol use/addiction, violence in household, neglect/abuse of children
- Yielded 126 respondents
- Other illegal drug use (19.05%) followed by depression/loneliness (15.87%)

Questions 25: Please select who is your household participated in these health prevention activities in the last 12 months to stay healthy. Check all that apply:

- Answers to select from: annual physical/checkup, Age appropriate screening, flu shot, age appropriate immunization, stayed physically active, ate fruits and vegetables more than once a day, routine dental exam/checkup, routine eye exam/vision screening, quit smoking/using tobacco
- Yielded 135 respondents
- “Myself” was selected most often by participants
- Flu shot was the top health prevention activity (90.55%) followed by “ate fruits and vegetables more than once a day” (87.10%)
- 89.29% of respondents stated they did not need assistance to quit smoking/tobacco usage

Question 26: If you do not have a primary care physician or family doctor, what are the challenges to seeing one?

- Answers to select from: cost of office visit/co-pay, transportation, long wait to see a doctor, can't find a doctor that takes our insurance, prefer to see a specialist for all health needs, don't know what doctor to pick, lack of trust in doctors, doctor's office isn't working with other doctors

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- Yielded 105 respondents
- “Don’t know what doctor to pick” (36.19%) followed by “long wait to see the doctor” (35.24%)

There is some disconnect between the results of the community meeting and online survey:

- According to the online survey, prenatal care was not needed
- Stronger social services, including unemployment, were not a need according to the online survey
- Respondents to the online survey stated they did not need assistance to quit smoking/tobacco usage
- According to 68.57% of respondents, mental health services are not needed

Factors for the disconnect may be small sample size of the online survey group, the attendees and size of the focus group, or the lack of conversation in the focus group on why these indicators were identified.

Appendix A

(CHNA, 2012)



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Appendix B

Chad Springer	Indiana Health Center
Cheryl Graham	United Way
Cindy Campbell	Mental Health Association
Cindy Sanders	City of Kokomo
Dave Dubois	YMCA
Diana Lowery	Clinic of Hope
Faith Brautigam	Kokomo Public Library
Frank Gribble	Center Township
Hilda Burns	Community Foundation
Jamey Henderson	Samaritan Caregivers
Jill Dunn	Bona Vista
Jim Leslie	United Way
Joe Milam	Kokomo Housing Authority
Lori Tate	Acacia Academy
Lynda Narwold	Indiana University
Marilyn Skinner	Ivy Tech
Mark Deckinga	St. Joseph Hospital
Melissa Baker	American Cancer Society
Nemramy D'Agostino	Indiana Health Center
Nick Parks	Excel Center
Patty Goff	Center Township
Rick Zachary	UAW/Partners for a Healthier Community
Scottie McCowan	Project Access
Sherry Rahl	Project Access
Tom Tolen	City of Kokomo
Tracy Martino	Early Headstart
Earlanda Jett	Project Access

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Michael Holsapple	Ivy Tech
Kristan Huffer	Project Access
Dave Boss	Kokomo Rescue Mission

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Johnson County

Introduction

A community health needs assessment (CHNA) among the four main hospital systems in Indiana is under way. The CHNA is aimed at addressing a variety of different health factors in each county with one of the four health systems to provide a better understanding of the current health status of residents across the state. Additionally, this CHNA involves a multi-faceted collaboration between public health and medical professionals, which provides a more comprehensive approach to identifying key strategies aimed at improving health among residents in Indiana. The following sections will outline some of the components of a CHNA.

Data Sources

In order to conduct the CHNA, both qualitative and quantitative methods are used during the assessment. The data collection approach consists of primary and secondary data. Primary data collection (qualitative) has been documented through key informant interviews and a windshield survey. Key informant interviews consist of interviewing stakeholders and/or participants in Johnson County through email and/or phone call with local knowledge of the area and its health status. The windshield survey provides an understanding of Greenwood's infrastructure and the types of health services available on the North end of Johnson County. Secondary data collection involves utilizing online resources, such as: SAVI, Indicators, Centers for Disease Control and Prevention (CDC), County Health Rankings, and others to determine the prevalence of adult obesity in Johnson County and identify factors that may contribute to adult obesity rates increasing in the near future.

Collaborating Organizations

The four hospital systems involved in the statewide CHNA are as follows: IU Health, Community Health Network, St. Vincent Health, and Franciscan Health. Specifically,

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Community Health Network and Franciscan St. Francis Health are the two partners in the Johnson County CHNA. Both hospitals have been working in collaboration with one another to prioritize and select appropriate methods for acquiring Johnson County resident's health data, which will ultimately provide an idea of how to proceed with certain policies, initiatives, and/or programs for improving certain health outcomes and behaviors.

Definition of Community Assessed

Johnson County is one of the healthiest counties in Indiana in regards to health outcomes, health behaviors, and health factors and is also a predominantly Caucasian population with one of the highest social and economic rankings in the state. However, data for Johnson County indicate that residents in the county are at the state average (31%) in regards to adult obesity rates¹. This adult obesity rate is concerning because data from 2014 had adult obesity rates listed at 29% in the county, and a 2% increase in one year demonstrates the need for further examination. Secondary data for Johnson County's demographics and adult obesity concerns are detailed in the following sections.

Secondary Data

Demographics

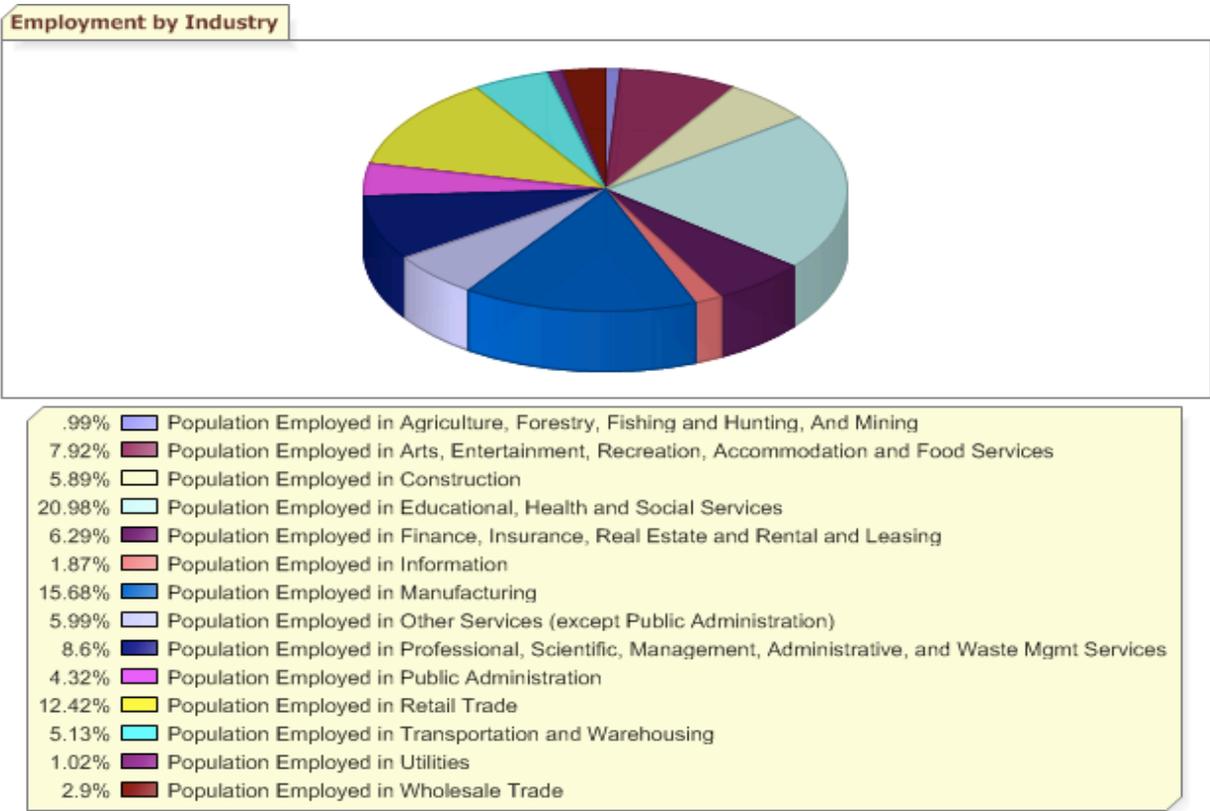
Johnson County's basic demographic variables illustrate that the county's population has slowly increased over time, and the county is mostly comprised of one race. According to U.S. Census Bureau (2014) data, Johnson County has a population of 147,538, an increase of 5.5% since the 2010 estimate². Individuals aged 65 and older account for 13.4% of the whole population, which equates to roughly 19,770 people². Also, there is a small discrepancy between males and females living in Johnson County, as 49.3% and 50.7% of the population are male and

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female respectively. Finally, Johnson County is mainly a Caucasian population, as 94.2% of the residents in the county are White².

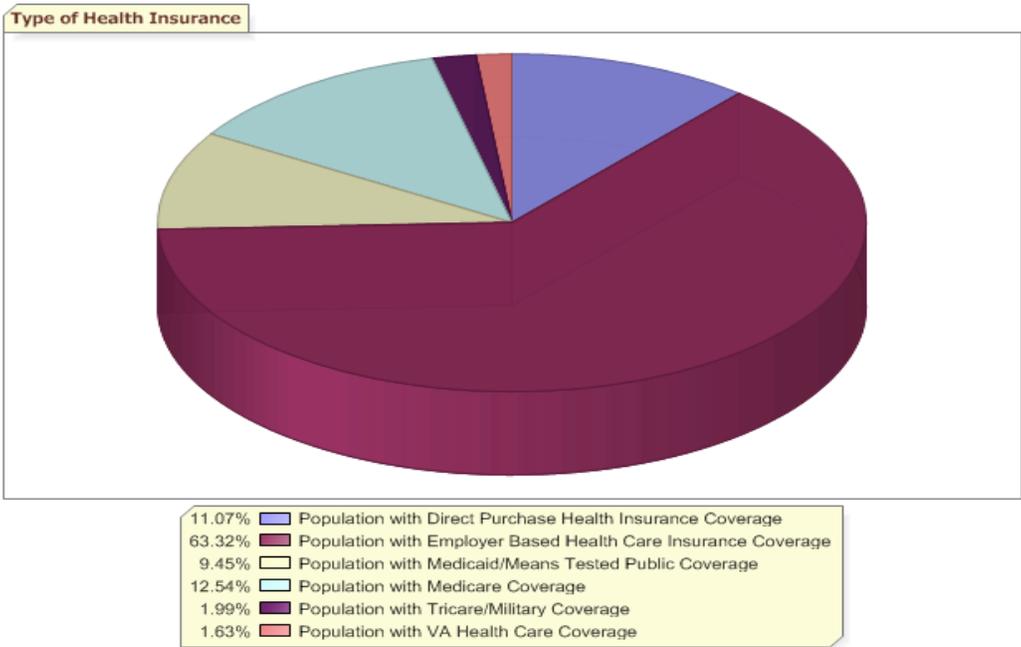
Economic Indicators

Johnson County’s economic demographic variables indicate that the county is doing well financially. The median household income in Johnson County is \$61,213, which is well above the state average of \$48,248². Furthermore, per capita income (\$28,575) for the county is also above the state average (\$24,635)². Also worth noting is the poverty level in Johnson County; it is well below the state average (10.6% in the county compared to 15.4% in the state). In regards to education, 91% of Johnson County residents aged twenty-five and older have a high school diploma, but only 26% of those residents have a bachelor’s degree or higher². Finally, almost two-thirds of jobs held by residents in the county are White Collar occupations (62.55% compared to 37.45% Blue Collar)(See chart below for breakdown of employment by industry³).



Insurance Coverage

The majority of Johnson County residents have some type of health insurance that enable them to access health care. According to SAVI (2014), 87.46% of the population in Johnson County aged 65 and younger has health insurance coverage⁴. Additionally, the majority of those with health insurance in the county have employer-based insurance plans⁴. The types of health insurance plans utilized by Johnson County residents are as follows: direct purchase, employer-based, Medicaid, Medicare, military, and VA health insurance plans (See chart below for breakdown of type of health insurance).

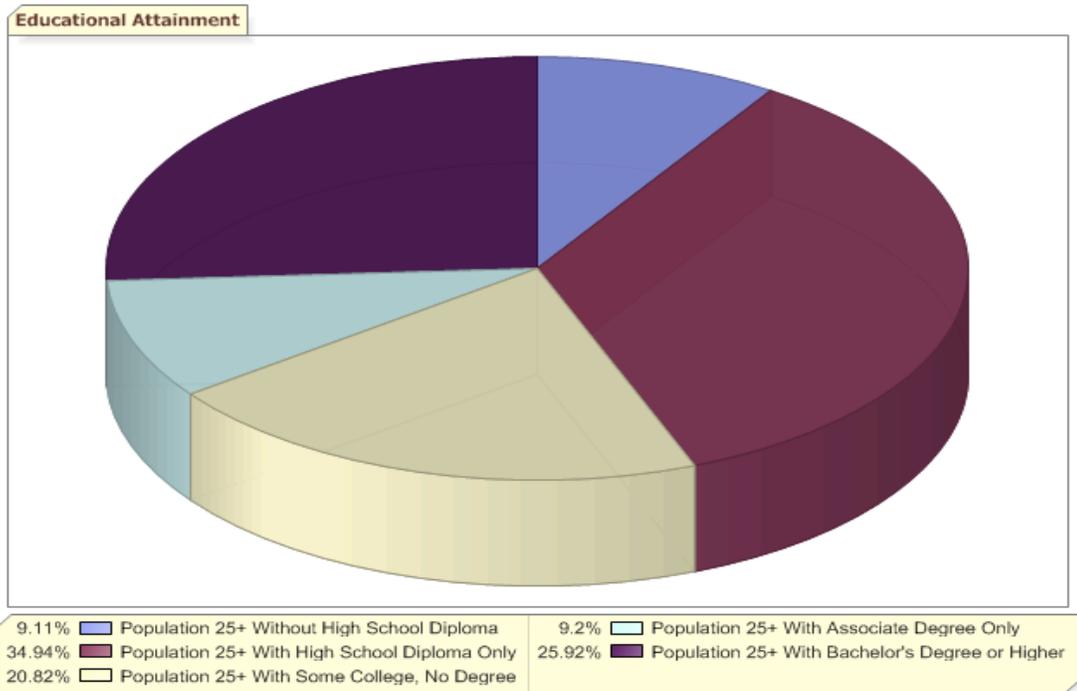


County Health Rankings

According to the CDC (2013), there is an inverse association between obesity and education levels for both men and women, but for women the statistical significance was greater⁵. Furthermore, the inverse association shows that men and women with higher levels of education (those completing college) have lower levels of obesity compared to those who only complete some college or high school⁵.

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In Johnson County, County Health Rankings indicate that the adult obesity rate of 31% is equivalent to the Indiana state average¹. However, this does not indicate that Johnson County does not have an obesity problem. 31% of the adult population (age 20+) in Johnson County is currently obese, which is equal to approximately one third of the population having a Body Mass Index (BMI) greater than or equal to 30%, and there could be another large majority of the population nearing that 30% or greater BMI level. An increase is possible because measures of adult obesity only account for adult BMI levels documented at 30% or above, and if there is a great proportion of the adult population just below 30% BMI (25-29% BMI), then there could be a drastic upswing in adult obesity in Johnson County in the near future. The education levels in Johnson County illustrate that this very well could be a distinct possibility (See pie chart below⁷).



As mentioned prior, educational levels of adults play a prominent role in regards to whether or not certain individuals will end up being obese as adults. According to the pie chart above, approximately 9% of the adult population age 25+ do not have a high school diploma, 35% have only a high school diploma, and 21% completed some college but did not obtain a

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degree⁶. The other 9% and 26% of the Johnson County population received Associate and Bachelor degrees respectively⁶. What this chart illustrates is that the majority of the Johnson County population (65%) is at risk of becoming obese because education pertaining to obesity, and the roles physical activity and nutrition play in this topic, is prevalent among college curriculums. Thus, the majority of Johnson County residents do not learn about important aspects pertaining to obesity because most have only attended high school.

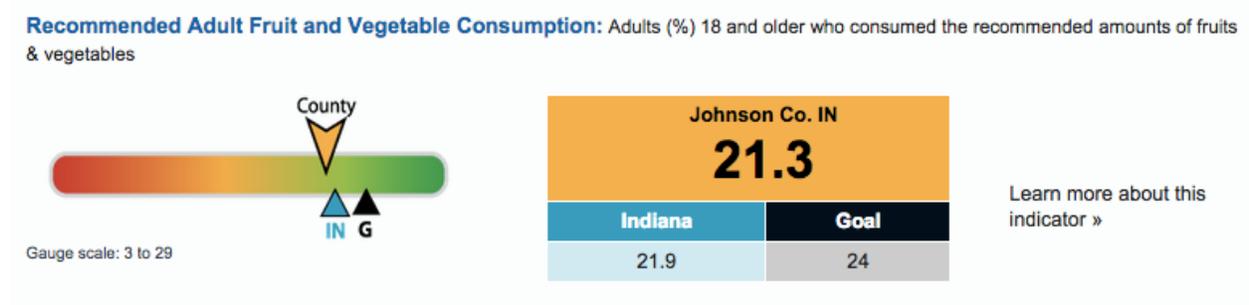
Community Health Status Indicators

Taking into consideration all health outcomes, behaviors, and factors, Johnson County's community health status indicators (CHSI) are in the middle tier (average). Adult obesity also falls into this area as one of the middle two quartiles, which is to be expected for a county that has an adult obesity rate equivalent to the state average⁸. One important finding from the CHSI is that adult diabetes (Type II) is in the least favorable quartile, and adult diabetes is typically a comorbidity associated with adult obesity⁸. This type of data regarding adult diabetes could be an indication that further research is needed to discover the causes of adult diabetes in the county and the extent to which adult obesity plays a role.

Indiana Indicators

Proper nutrition and eating the recommended amount of food as illustrated in the Food Guide Pyramid is vital to any individual's diet. In Johnson County, the vast majority of the adult population (age 18+) does not consume the recommended amount of fruits and vegetables, which suggests other food options – possibly high in fat and sugar – are regularly chosen and does not bode well for the adult obesity epidemic (See chart below⁹).

COMMUNITY HEALTH NEEDS ASSESSMENT

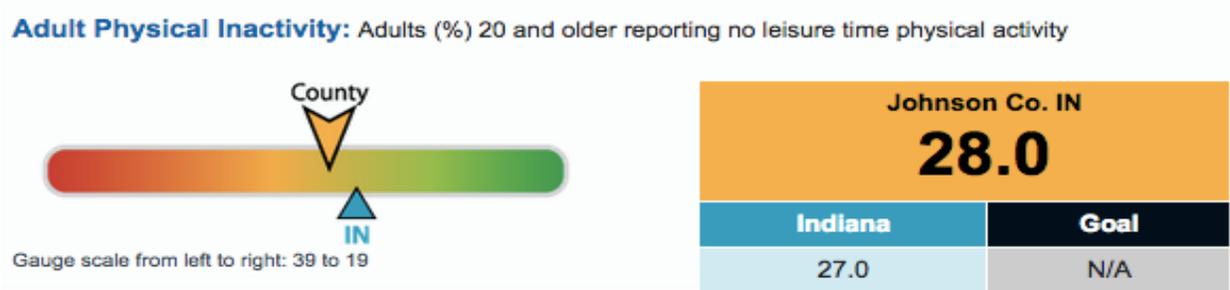


Fruit and vegetable consumption is essential to any diet because these foods provide a variety of health benefits (essential vitamins and minerals) and are also very low in fat. According to Indiana Indicators (2013) and the chart above, just over one-fifth (21.3%) of the adult Johnson County population (age 18+) consumes the recommended amount of fruits and vegetables on a daily basis⁹. While the Indiana state average (21.9%) for fruit and vegetable consumption is barely above the Johnson County rate, these statistics depict a serious issue because the state's adult population as a whole (78%) does not consume the recommended amount of fruits and vegetables⁹. Moreover, this indicates that nearly four-fifths of Indiana's adult population is replacing fruits and vegetables with other foods, and these foods that replace fruits and vegetables tend to be quick and high caloric options that lead to adult obesity.

The other major component that plays a prominent role in the adult obesity epidemic is physical activity; however, in regards to adult obesity, most of the cases deal with physical inactivity or insufficient physical activity. According to the CDC (2011), an adult should engage in 300 minutes of moderate-intensity aerobic activity or 150 minutes of vigorous aerobic activity every week in order to improve or maintain overall health¹⁰. In Indiana, the majority of adults are not reaching these goals, and some are completely sedentary. In a recent study by the CDC (2012), it was reported that 43.2% of Indiana adults achieved either the 300 minutes of moderate exercise or 150 minutes of intense exercise, while 27.2% of Indiana adults had not engaged in any type of physical activity in the past month¹¹. In Johnson County, the physical inactivity rate

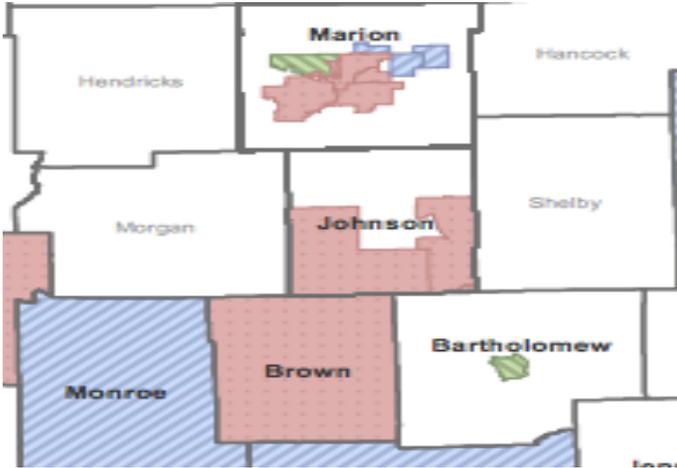
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of adults (age 20+) has reached 28%, which is just above the state average of 27%⁹. As depicted in the chart below, Johnson County falls right in line with the state average for adult physical inactivity rates, but typical trends tend to increase this rate over time.



Medically Underserved Areas/Populations and Health Professional Shortage Areas

According to the Indiana State Department of Health (ISDH, 2014), there is a pocket on the South end of Johnson County that is a medically underserved area/population (MUA/P)¹². This pocket begins near the middle of the county and extends down to the Southern end, where another designated geographic shortage area exists in all of Brown County¹² (See map below).



Specifically, the Health Resources and Services Administration (HRSA, 2014) identifies Blue River, Hensley, Nineveh, and Union Townships as the medically underserved areas in Johnson County¹³. These are the four townships that form the geographic shortage area in the u-shaped

pocket as illustrated in the map above. The only identified health professional shortage area (HPSA) in Johnson County is on the southwestern end of the county at the Trafalgar Family Health Clinic¹⁴. Trafalgar is a very small town in Hensley and Nineveh Townships, which demonstrates that there is an overlap between a MUA/P and HPSA in Johnson County.

Other Facilities and Resources in the Community

In order to map assets and provide a list of health facilities in the largest area in Johnson County, a windshield survey of Greenwood was performed. During the windshield survey, a variety of health resources were identified, some of which include the following: Med Express Urgent Care, Valle Vista Health System, Adult and Child Center, ManorCare Health Services, Greenwood Health and Living Facility, and several family health/general practitioner offices. The windshield survey validated prior assumptions that Greenwood has a plethora of different and specialty health care services and facilities. Some of the health care services to describe the health facilities identified are as follows: urgent care, mental health, behavioral health, assisted living, and physical rehabilitation. These are not the only health care facilities beyond general practitioners in Johnson County, but those listed included the facilities observed while driving through Greenwood.

Key Informant Interview Findings

Identification of Individuals Providing Input and Prioritization Criteria

Kate Johnson, the facilitator of key informant interviews, identified a total of 15 participants in Johnson County for either a phone or email interview, and each researcher contacted five of the key informants. These individuals were identified for interviews because of their involvement in and knowledge of the Partnership for a Healthier Johnson County. This initiative is a multi-faceted approach to improving the lifestyle of Johnson County residents

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through behavioral health changes and evidence-based programs. By contacting individuals with knowledge of this initiative, the facilitator of Johnson County hoped to gain useful insight from individuals in the county for the CHNA.

Unfortunately, out of the fifteen participants contacted for interviews by the three researchers, only five of the key informants responded. The questions asked by researchers in the key informant interviews – conducted through email – are as follows:

- Name, Title, Credentials (BS, RN, etc.), Organization?
- What do you think are the most pressing community issues, such as public safety, water quality, educational attainment, and food insecurity? Why?
- What do you think are the most pressing health issues in Johnson County, such as diabetes, obesity, mental health, substance abuse, and cancer? Why?
- What kinds of activities do you think would assist in solving the issues you identified? Can you name any organizations that are working on this or might be able to assist in developing solutions?
- What health-related activities are working well in Johnson County? Why?
- What advice do you have for the healthcare providers in Johnson County that would assist in elevating the health of Johnson County residents?

Description of Prioritized Needs

Despite the limited responses to emails and phone calls made to the fifteen identified participants for key informant interviews, two themes seemed to be reoccurring: obesity was consistently identified as a major health issue in the county and educational attainment was one of the more prominent community issues. Below are the results obtained from key informant interview questions:

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- Pressing Community Issues – Education reform, food insecurity, homelessness, medical care for low income/uninsured families, educational attainment, infrastructure, and substance abuse.
- Pressing Health Issues – Obesity, substance use/abuse, infant mortality, childhood obesity, diabetes, mental health, teen pregnancy, and pre-natal care.

These primary data findings validate concerns from a previous section involving secondary data.

While the limited number of key informant respondents identified numerous other pressing community and health issues, the fact that adult obesity was identified – along with a comorbidity associated with adult obesity – by stakeholders in Johnson County reveals that the problem is not only reflected on paper; it is apparent throughout the community and its residents.

Adult Obesity Intervention Recommendations

Evidence-based intervention programs aimed at mitigating adult obesity will prove to be effective in treating this problem. The first of the two programs that could potentially work for Johnson County focuses on primary care consultations. This program is called the Primary Care Physician Network Obesity Management Program, and its main purpose is to provide patients with a 10-minute long consultation that assesses individual needs based on filled out forms and personal information¹⁵. The doctor then uses this information to decide on the appropriate course patients should take. If participants decide to partake in the program, the doctor faxes over results and personal information to a registered dietician, who develops meal plans and replacement meal options for participants¹⁵. Results from this program indicate that participants who completed at least 6 months of the program lose 19.0 ± 4 pounds for women and 15.5 ± 8.2 pounds for men¹⁵.

The second intervention plan is called M.O.B.I.L.I.S.¹⁶. M.O.B.I.L.I.S. is a fitness based intervention plan with a nutritional component as well, and such programs have proven to be just as effective as dieting and nutritional-based plans when it comes to losing weight and lowering BMI levels. M.O.B.I.L.I.S. has a simple physical activity design and also emphasizes diets that are low in fat, carbohydrate conscious, and high in protein¹⁶. Results from this study indicate that participants who complete the full year-long program lose on average about 14 pounds¹⁶.

Conclusion

The data elaborated on in this document are only the starting points for a comprehensive CHNA. While it has been documented that adult obesity is the result of a variety of factors – education, nutrition, physical inactivity, etc. – there are many more factors that need further exploration and explanation to fully understand what contributes to adult obesity. Johnson County, Indiana may be one of the healthier counties in the state of Indiana in regards to overall health behaviors and health outcomes, but there is always room for improvement, especially when considering the county's adult obesity levels progressed two percent from 2014 to 2015.

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Hamilton County

Introduction

Organizations involved on the Community Health Needs Assessment of Hamilton County, Indiana, included Community Health Network, Franciscan St. Francis Health, Indiana University Health, St. Vincent Health, and Indiana University-Purdue University (IUPUI) Richard M. Fairbanks School of Public Health.

Data sources

Primary data collection methods included an electronic survey (hospitals administered), a community meeting, and a windshield survey. The windshield survey focused on housing, open spaces, business areas, schools, religion, human services, protective services, and transportation throughout Hamilton County, Indiana, including Arcadia, Carmel, Cicero, Fishers, Noblesville, Sheridan, and Westfield. Secondary data collection involved searching for pre-existing data with resources such as Community Commons, Community Health Status Indicators (CHSI), Community Needs Index (CNI), County Health Rankings, Indiana INdicators, and SAVI.

Definition of community assessed

The community is defined as the area and residents of Hamilton County, Indiana. Arcadia, Carmel, Cicero, Fishers, Noblesville, Sheridan, and Westfield are towns in Hamilton County, Indiana. Hamilton County, Indiana, contains ZIP codes 46030, 46031, 46032, 46033, 46034, 46037, 46038, 46060, 46062, 46069, 46074, 46280, and 46290.

Secondary data

Demographics. The largest age group for the population is 5 to 17 years (22.2%) (Figure 1) (Community Commons, 2015). In Hamilton County, Indiana, 51.3% of the population is female (Figure 2) (Community Commons, 2015). The majority of residents are White (88.1%), Asian (4.9%), and Black (3.5%) and non-Hispanic (96.6%) (Figures 3-4) (Community Commons, 2015; The Polis Center, 2014). Most of the population lives in urban areas of Hamilton County (94.6%) (Figure 5) (Community Commons, 2015).

Figure 1 Total population by age groups, percentage (Community Commons, 2015)

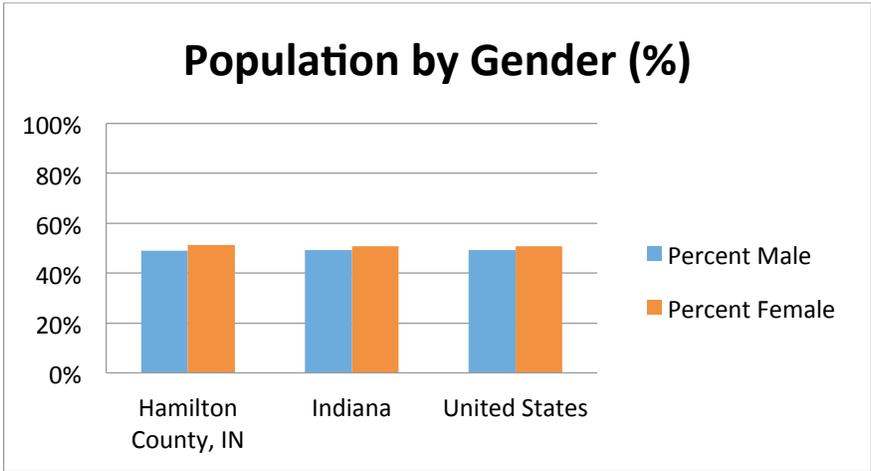


Figure 2 Total population by gender, percentage (Community Commons, 2015)

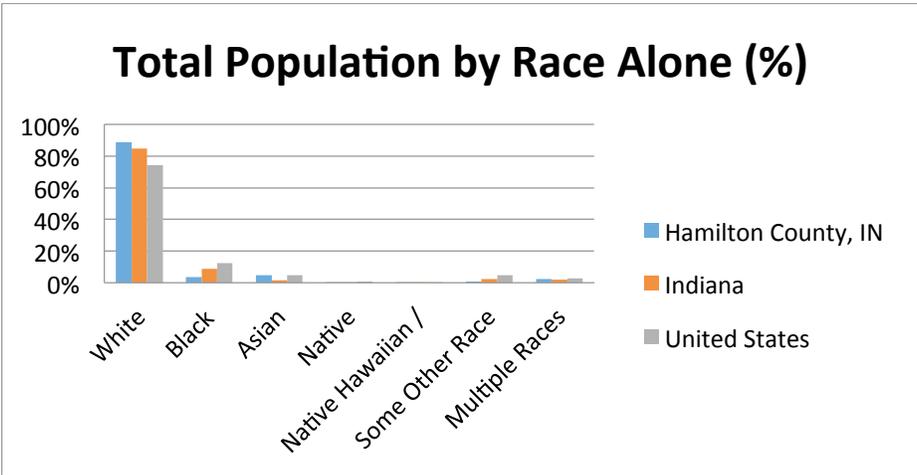


Figure 3 Total population by race alone, percentage (Community Commons, 2015)

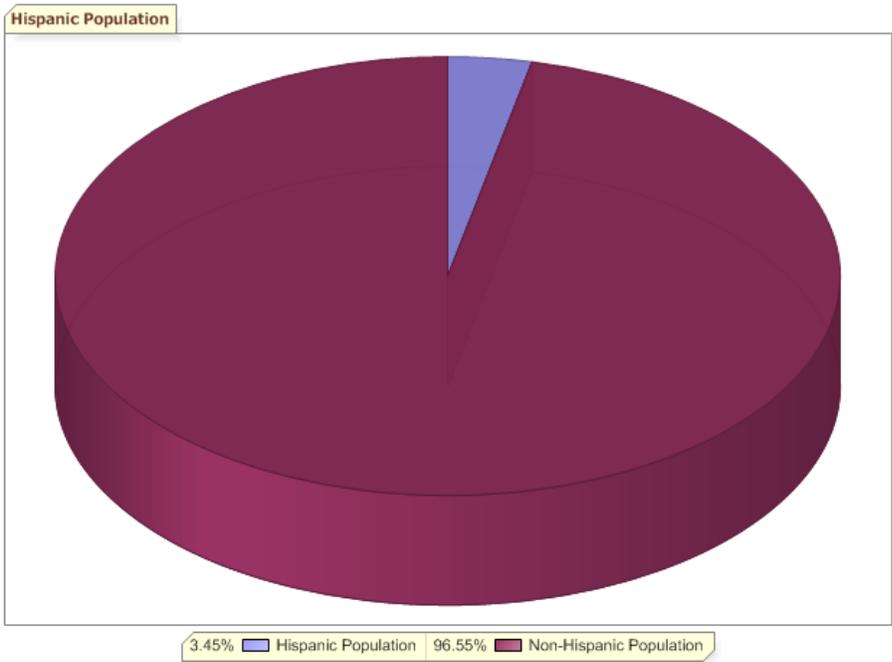


Figure 4 Hispanic population, percentage (The Polis Center, 2014)

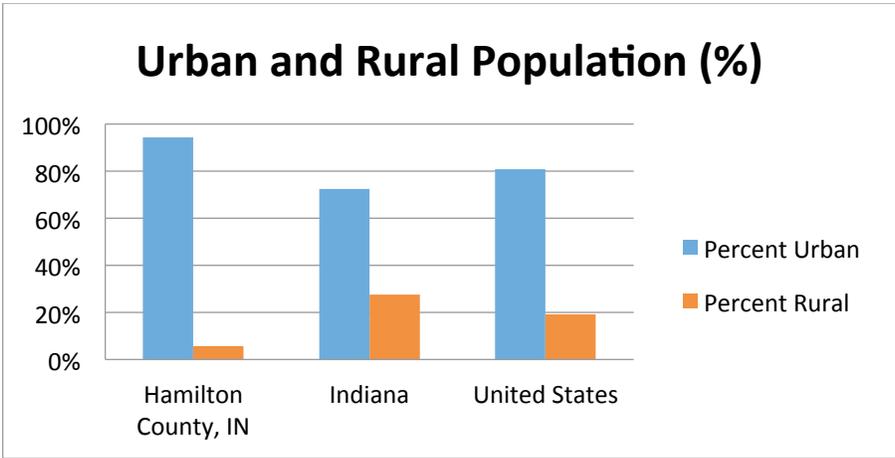


Figure 5 Urban and rural population, percentage (Community Commons, 2015)

Economic indicators. Three-fourths of Hamilton County residents live in owner occupied housing units (Figure 6) (The Polis Center, 2014). The population below 100% the Federal Poverty Level (FPL) is just over 5 percent (Figure 7) and the percent of the population at or below 200% the FPL varies by location in Hamilton County, Indiana (Figure 8) (Community Commons, 2015). The percent of children living below 100% the FPL is 6.7 (Figure 9), which also varies by location in Hamilton County, Indiana (Figure 10) (Community Commons, 2015). Figure 11 shows that 64.9 % of the population has a household income over \$75,000 (Community Commons, 2015). Figure 12 shows trend in unemployment rates, which are currently at 4.4% in Hamilton County, Indiana (Community Commons, 2015). Educational attainment is high in Hamilton County, Indiana, with only 3.5% of the population not having attained a high school diploma and 55.0% with a bachelor degree or higher (Figure 13) (The Polis Center, 2014).

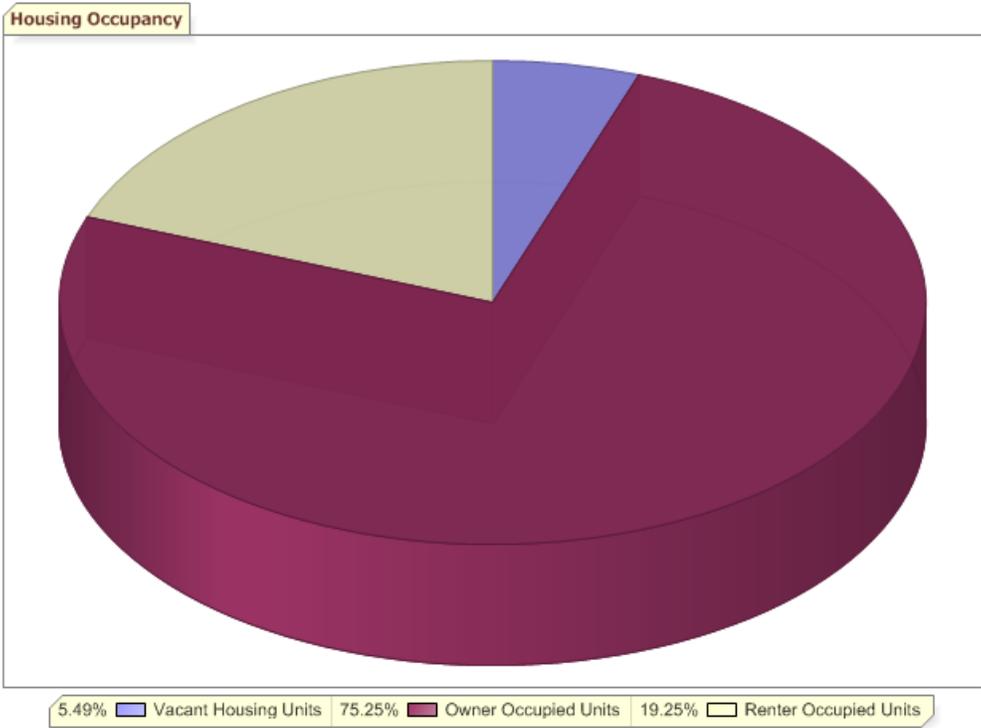


Figure 6 Housing occupancy in Hamilton County, Indiana (The Polis Center, 2014)

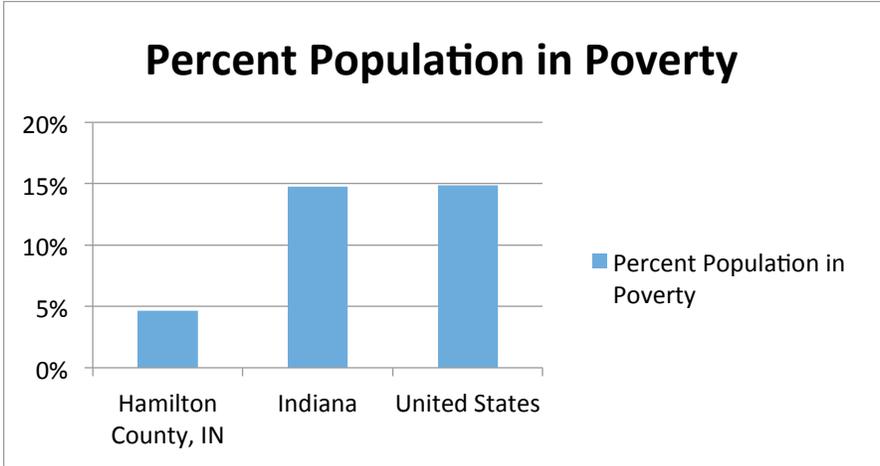


Figure 7 Population at or below 100% FPL (federal poverty level)(Community Commons, 2015)

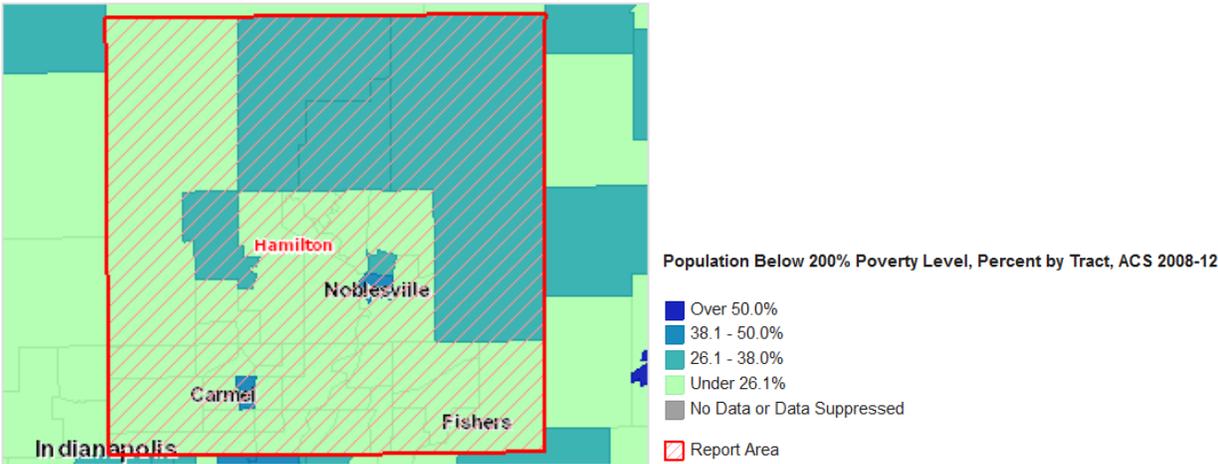


Figure 8 Map of population below 200% FPL, Percent by Tract, ACS 2008 – 2012 (Community Commons, 2015)

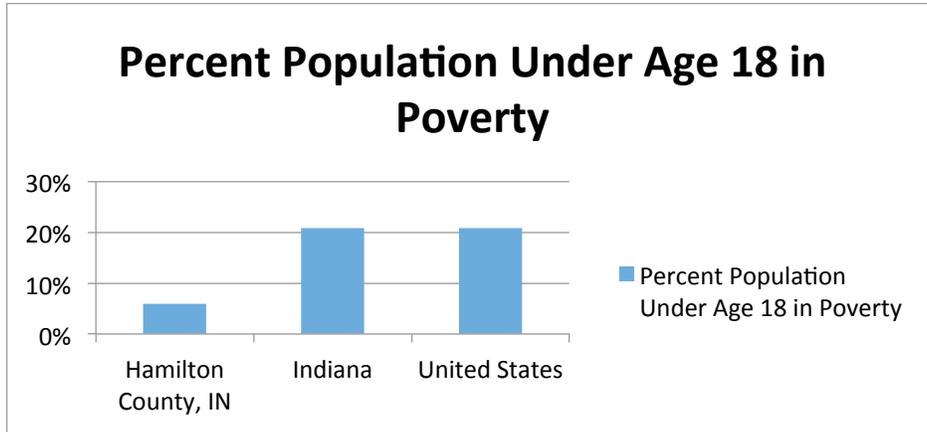


Figure 9 Percent of the population (under age 18) in poverty (Community Commons, 2015).

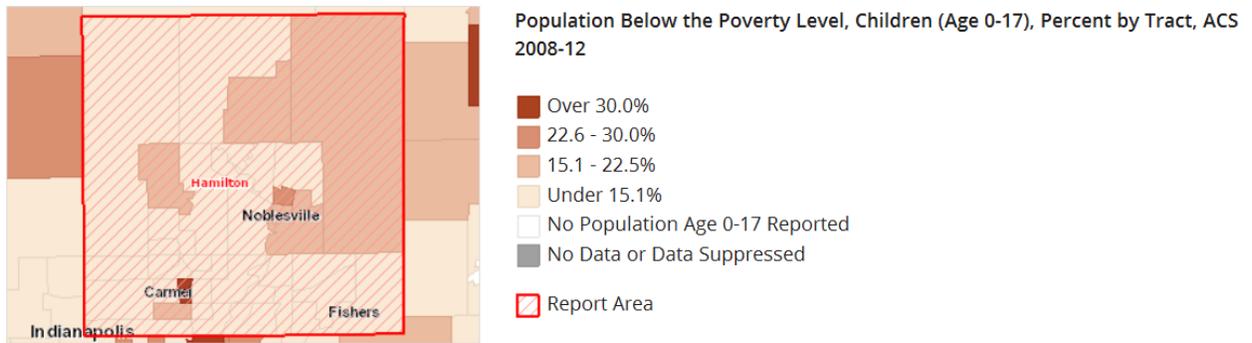


Figure 10 Map of the population (under age 18) in poverty, Percent by Tract, ACS 2008 - 2012 (Community Commons, 2015).

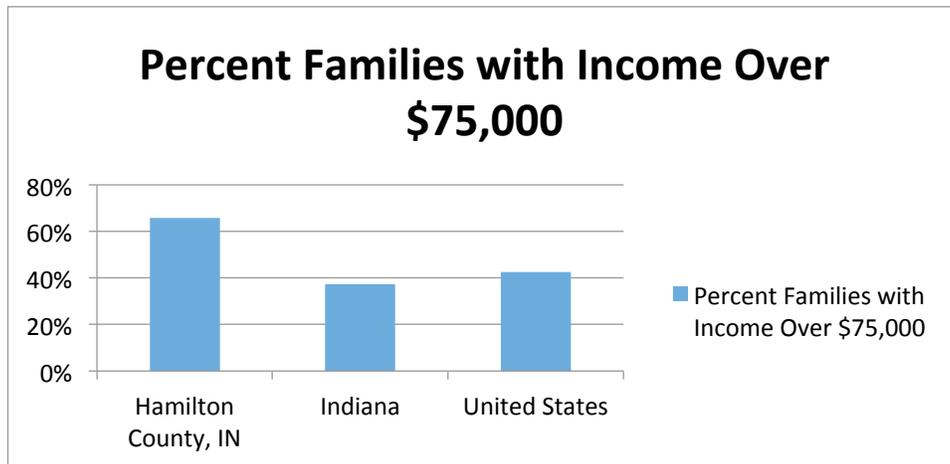


Figure 11 Percent of families with income over \$75,000 (Community Commons, 2015)

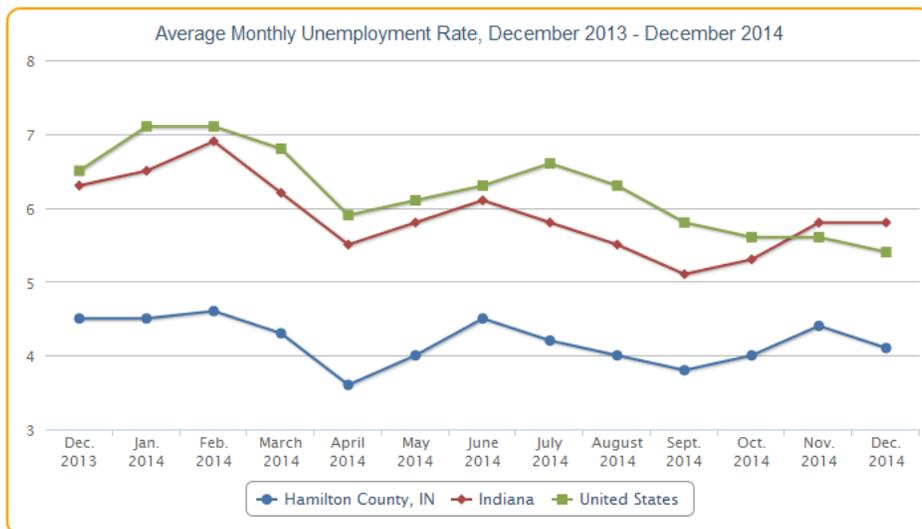


Figure 12 Trend in average monthly unemployment rates (Community Commons, 2015).

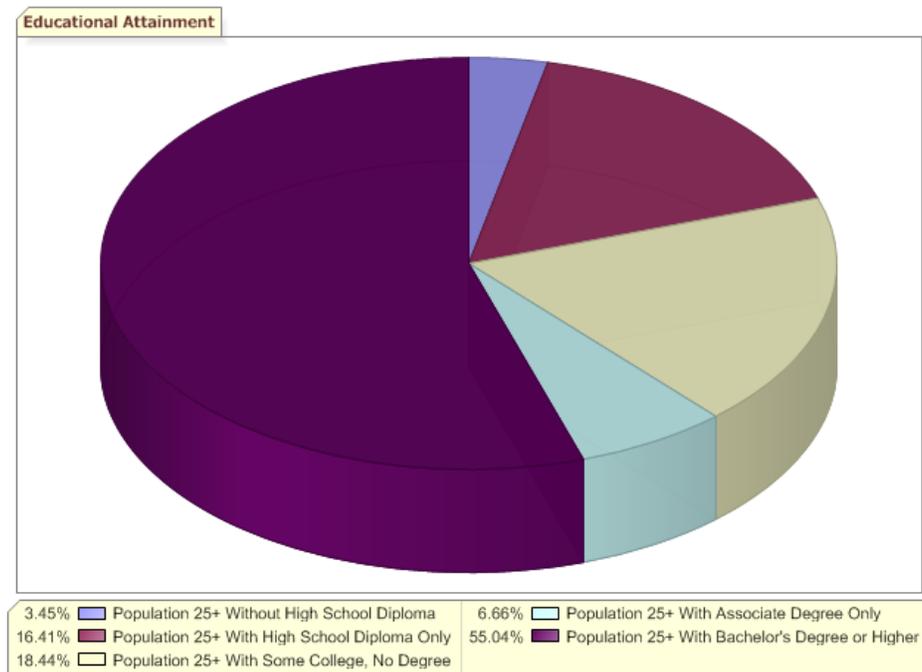


Figure 13 Educational attainment in Hamilton County, Indiana (The Polis Center, 2014)

Insurance coverage. Figure 14 shows a map of the distribution of the population who are uninsured by census tract in Hamilton County, Indiana. Approximately 7.89% of the total

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population under age 65 is uninsured in Hamilton County, Indiana (Community Commons, 2015).

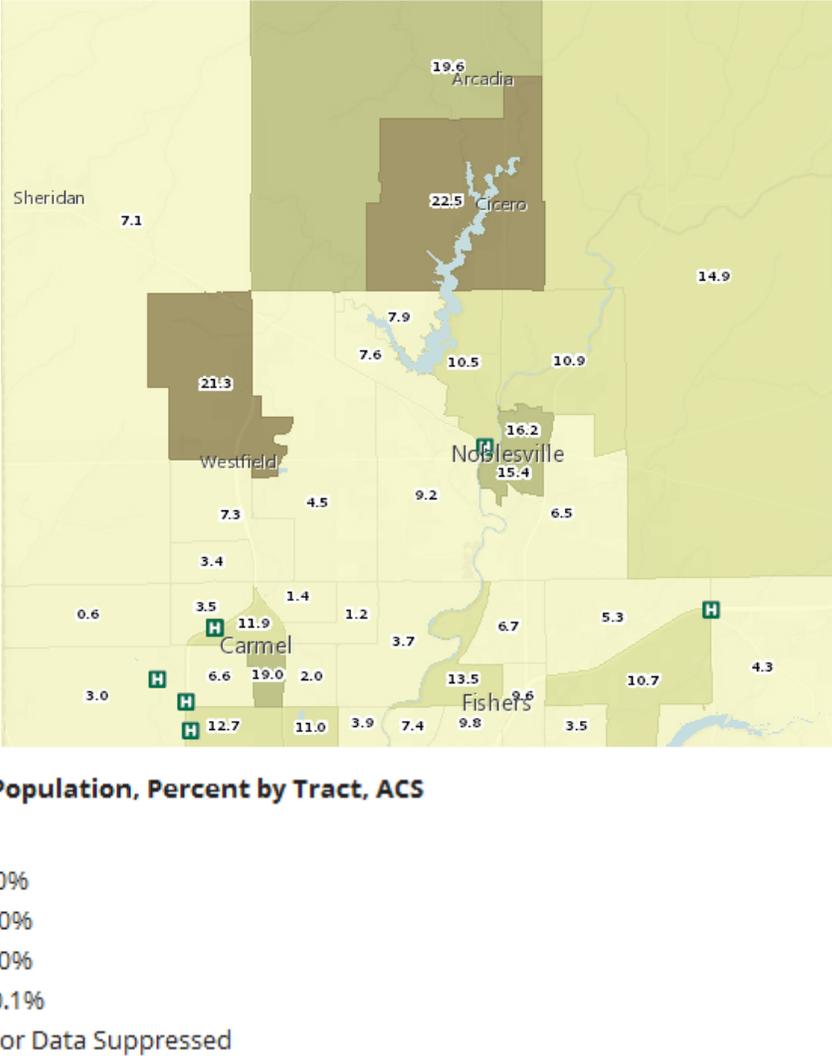


Figure 14 Uninsured population by tract, ACS 2009 – 2013 (Community Commons, 2015)

County health rankings. Hamilton County was ranked the healthiest county in Indiana by County Health Rankings in 2015 (County Health Rankings, 2015). Hamilton County ranked first of 92 counties on length of life, health behaviors, clinical care, and social and economic factor categories (County Health Rankings, 2015). Hamilton County also ranked second of 92 counties on quality of life, but only ranked 31st out of 92 counties on physical environment (County Health Rankings, 2015).

Community health status indicators. The Summary Comparison Report shows a comparison of Hamilton County with peer counties on community health status indicators (see

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Table 1) (Centers for Disease Control and Prevention (CDC), 2015). Hamilton County compared worse to peer counties on chronic kidney disease deaths, adult binge drinking, access to parks, annual average PM2.5 concentration, and limited access to healthy food (CDC, 2015).

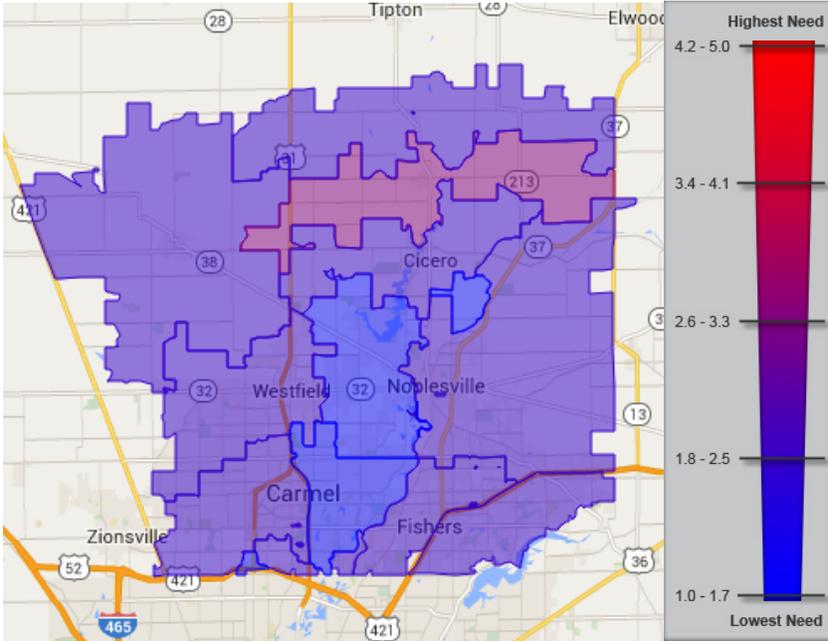
Table 1 Results of Summary Comparison Report for Hamilton County, Indiana (CDC, 2015).

	Better	Moderate	Worse
Mortality	<ul style="list-style-type: none"> • Motor vehicle deaths • Unintentional injury (including motor vehicle) 	<ul style="list-style-type: none"> • Alzheimer's disease deaths • Cancer deaths • Chronic lower respiratory disease (CLRD) deaths • Coronary heart disease deaths • Diabetes deaths • Female life expectancy • Male life expectancy • Stroke deaths 	<ul style="list-style-type: none"> • Chronic kidney disease deaths
Morbidity	<ul style="list-style-type: none"> • Adult overall health status • Cancer • Gonorrhea • HIV 	<ul style="list-style-type: none"> • Adult diabetes • Adult obesity • Alzheimer's diseases/dementia • Older adult asthma • Older adult depression • Preterm births • Syphilis 	

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<p>Healthcare Access and Quality</p>	<ul style="list-style-type: none"> • Cost barrier to care • Primary care provider access 	<ul style="list-style-type: none"> • Older adult preventable hospitalizations • Uninsured 	
<p>Health Behaviors</p>		<ul style="list-style-type: none"> • Adult female routine pap tests • Adult physical inactivity • Adult smoking • Teen Births 	<ul style="list-style-type: none"> • Adult binge drinking
<p>Social Factors</p>	<ul style="list-style-type: none"> • High housing costs • Inadequate social support • On time high school graduation • Poverty • Violent crime 	<ul style="list-style-type: none"> • Children in single-parent households • Unemployment 	
<p>Physical Environment</p>	<ul style="list-style-type: none"> • Drinking water violations • Housing stress 	<ul style="list-style-type: none"> • Living near highways 	<ul style="list-style-type: none"> • Access to parks • Annual average PM2.5 concentration • Limited access to healthy food

Zip code-level health access indicators. Community Needs Index (CNI) is a tool for identifying the severity of housing, education level, and English as a second language related health disparities for United States zip codes. Figure 15 shows a map of CNI scores for zip codes in Hamilton County Indiana.



Mean(zipcode): 1.9 / Mean(person): 1.9

CNI Score Median: 1.8

CNI Score Mode: 1.8

Zip Code	CNI Score	Population	City	County	State
46030	2.6	3222	Arcadia	Hamilton	Indiana
46031	1.8	2209	Atlanta	Hamilton	Indiana
46032	2.2	44733	Carmel	Hamilton	Indiana
46033	1.4	36447	Carmel	Hamilton	Indiana
46034	2.2	7083	Cicero	Hamilton	Indiana
46037	1.8	41310	Fishers	Hamilton	Indiana
46038	1.8	38819	Fishers	Hamilton	Indiana
46060	2.4	39661	Noblesville	Hamilton	Indiana
46062	1.6	31994	Noblesville	Hamilton	Indiana
46069	2.2	6643	Sheridan	Hamilton	Indiana
46074	1.8	30650	Westfield	Hamilton	Indiana
46280	2	7219	Indianapolis	Hamilton	Indiana
46290	1.4	237	Indianapolis	Hamilton	Indiana

Figure 15 Map of zip code level CNI scores for Hamilton County, IN (Dignity Health, 2015).

Medically underserved areas and populations. According to Health Resources and Services Administration (HRSA), there are no medically underserved areas in Hamilton County, Indiana (HRSA, 2015).

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Health professional shortage areas. There are no mental health care, dental health care, or primary care facilities designated as health professional shortage areas in Hamilton County in Hamilton County, Indiana (Community Commons, 2015).

Description of other facilities and resources within the community. Facilities designated as hospitals, Federally Qualified Health Centers (FQHCs), health departments, and other organizations were searched for and included in this report. There are no Federally Qualified Health Centers (FQHCs) in Hamilton County, Indiana (Community Commons, 2015). There were also no mental health facilities, homeless shelters, or safe houses in Hamilton County, Indiana (The Polis Center, 2014). Table 2 contains the type, name, and location of facilities and resources within the community.

Table 2 Health-related support services in Hamilton County, Indiana (The Polis Center, 2014).

Type	Name	Address	Location
Hospitals	ARCADIA DEVELOPMENTAL CENTER	303 FRANKLIN	ARCADIA
	FRANCISCAN ST FRANCIS HEALTH - CARMEL	12188 B NORTH MERIDIAN ST	CARMEL
	INDIANA UNIVERSITY HEALTH NORTH HOSPITAL	11700 N MERIDIAN ST	CARMEL
	INDIANA UNIVERSITY HEALTH NORTH HOSPITAL		CARMEL
	INDIANA UNIVERSITY HEALTH SAXONY HOSPITAL		FISHERS
	REM-INDIANA INC	10606 HAVERSTICK	CARMEL
	REM-INDIANA INC	3107 HENSEL DR	CARMEL
	REM-INDIANA INC	3705 E 116TH ST	CARMEL
	REM-INDIANA INC	723 E 116TH ST	CARMEL
	RIVERVIEW HEALTH		NOBLESVILLE
	RIVERVIEW HOSPITAL	395 WESTFIELD RD	NOBLESVILLE
	SAINT VINCENT CARMEL HOSPITAL		CARMEL
	SAINT VINCENT FISHERS HOSPITAL		FISHERS
	SAINT VINCENT HEART CENTER OF INDIANA - CARMEL		INDIANAPOLIS
	ST VINCENT CARMEL HOSPITAL INC	13500 N MERIDIAN ST	CARMEL
ST VINCENT FISHERS HOSPITAL INC	13861 OLIO RD	FISHERS	

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	ST VINCENT HEART CENTER OF INDIANA LLC	10580 N MERIDIAN ST	INDIANAPOLIS
	ST VINCENT NEW HOPE INC	10264 N COLLEGE	INDIANAPOLIS
	ST VINCENT NEW HOPE INC	12342 LANTERN RD	FISHERS
	ST VINCENT NEW HOPE INC	130 E MERIDIAN ST	ATLANTA
	ST VINCENT NEW HOPE INC	515 S 10TH ST	NOBLESVILLE
	WARNER TRANSITIONAL SERVICES, LLC	11075 N PENNSYLVANIA ST	INDIANAPOLIS
Clinics	HEART AND SOUL CLINIC		WESTFIELD
	HOPE FAMILY CARE CLINIC		CICERO
	RIVERVIEW COMMUNITY HEALTH CLINIC		INDIANAPOLIS
	TRINITY FREE CLINIC		CARMEL
	TRINITY FREE CLINIC - PEDIATRIC MEDICAL CLINIC		CARMEL
Emergency/Minor Medical Facilities	COMMUNITY MEDCHECK CARMEL		CARMEL
	COMMUNITY MEDCHECK NOBLESVILLE		NOBLESVILLE
	SAINT VINCENT PHYSICIAN NETWORK IMMEDIATE CARE - CARMEL		CARMEL
	SAINT VINCENT PHYSICIAN NETWORK IMMEDIATE CARE - FISHERS		FISHERS
Long-term Care	CLARE BRIDGE OF CARMEL LLC	301 EXECUTIVE DR	CARMEL
	CROWNPOINTE OF CARMEL	11610 TECHNOLOGY DR	CARMEL
	HEARTH AT TUDOR GARDENS LLC	11755 N MICHIGAN RD	ZIONSVILLE
	HEARTH AT WINDERMERE	9745 OLYMPIA DR	FISHERS
	RIVERWALK COMMONS	7235 RIVERWALK WAY N	NOBLESVILLE
	SANDERS GLEN	334 S CHERRY ST	WESTFIELD
	SUNRISE ON OLD MERIDIAN	12130 OLD MERIDAN ST	CARMEL
Surgery Centers	AESTHETIC SURGERY CENTER LLC	13590 N MERIDIAN ST	CARMEL
	BELTWAY SURGERY CENTER SPRINGMILL	200 W 103RD ST STE 2400	INDIANAPOLIS
	BELTWAY SURGERY CENTERS LLC	151 PENNSYLVANIA PKWY	INDIANAPOLIS
	CARMEL AMBULATORY SURGERY CENTER LLC, THE	13421 OLD MERIDIAN ST	CARMEL

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	CARMEL SPECIALTY SURGERY CENTER LLC	11590 N MERIDIAN ST STE 130	CARMEL
	COMMUNITY SURGERY CENTER HAMILTON	9700 E 146TH ST	NOBLESVILLE
	DIGESTIVE HEALTH CENTER	1120 AAA WAY	CARMEL
	ENDOSCOPY CENTER LLC	13421 OLD MERIDIAN ST STE 150	CARMEL
	INDIANA ENDOSCOPY CENTERS (FISHERS)	10967 ALLISONVILLE RD STE 100	FISHERS
	MERIDIAN PLASTIC SURGERY CENTER	170 W 106TH ST	INDIANAPOLIS
	MULTI SPECIALTY SURGERY CENTER LLC	10601 N MERIDIAN ST STE 100	INDIANAPOLIS
	NORTH MERIDIAN SURGERY CENTER	13225 N MERIDIAN STREET	CARMEL
	SAXONY SURGERY CENTER	13100 EAST 136TH STREET STE 1100	FISHERS
	SURGERY CENTER OF CARMEL THE	12188 N MERIDIAN ST BLDG A STE 150	CARMEL
Health Education	HAMILTON COUNTY HEALTH DEPARTMENT		NOBLESVILLE
	PURDUE EXTENSION - HAMILTON COUNTY		NOBLESVILLE
Medical Expense Assistance	J & B MEDICAL SUPPLY		FISHERS
	MUSCULAR DYSTROPHY FAMILY FOUNDATION		CARMEL
Mental Health Services	ASPIRE INDIANA – CARMEL		CARMEL
	ASPIRE INDIANA - NOBLESVILLE		NOBLESVILLE
	COMMUNITY HOME HEALTH SERVICES		FISHERS
	PREVAIL		NOBLESVILLE
	PROMISING FUTURES OF CENTRAL INDIANA		NOBLESVILLE
	WESTFIELD CENTER FOR WOMEN'S MINISTRIES		WESTFIELD
Public Health	HAMILTON COUNTY HEALTH DEPARTMENT		NOBLESVILLE
Substance Abuse Services	ASPIRE INDIANA – CARMEL		CARMEL
	ASPIRE INDIANA - NOBLESVILLE		NOBLESVILLE
	RIVERVIEW HEALTH		NOBLESVILLE

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Runaway/Youth Shelters	PROMISING FUTURES OF CENTRAL INDIANA		NOBLESVILLE
Housing Expense Assistance	ADAMS TOWNSHIP TRUSTEE, HAMILTON COUNTY		SHERIDAN
	CLAY TOWNSHIP TRUSTEE, HAMILTON COUNTY		INDIANAPOLIS
	DELAWARE TOWNSHIP TRUSTEE, HAMILTON COUNTY		FISHERS
	FALL CREEK TOWNSHIP TRUSTEE, HAMILTON COUNTY		FISHERS
	GOOD SAMARITAN NETWORK		FISHERS
	JACKSON TOWNSHIP TRUSTEE, HAMILTON COUNTY		ARCADIA
	MERCIFUL HELP CENTER		CARMEL
	NOBLESVILLE TOWNSHIP TRUSTEE, HAMILTON COUNTY		NOBLESVILLE
	SAINT VINCENT DE PAUL CENTER, HAMILTON COUNTY		NOBLESVILLE
	SALVATION ARMY HAMILTON COUNTY SERVICE EXTENSION		NOBLESVILLE
	WASHINGTON TOWNSHIP TRUSTEE, HAMILTON COUNTY		CARMEL
	WAYNE TOWNSHIP TRUSTEE, HAMILTON COUNTY		NOBLESVILLE
	WHITE RIVER TOWNSHIP TRUSTEE, HAMILTON COUNTY		CICERO
Low-income/subsidized rental housing	COMMUNITY ACTION OF GREATER INDIANAPOLIS (CAGI) - HAMILTON COUNTY		NOBLESVILLE
	HABITAT FOR HUMANITY OF HAMILTON COUNTY		WESTFIELD
	NOBLESVILLE HOUSING AUTHORITY		NOBLESVILLE
Transitional Housing/Shelter	THIRD PHASE		NOBLESVILLE
Nutrition-related public assistance programs	INDIANA HEALTH CENTERS	942 NORTH 10TH STREET	NOBLESVILLE
Employment Programs	PREVAIL		NOBLESVILLE
	WORKONE EXPRESS - FISHERS, HAMILTON COUNTY		FISHERS
Financial Assistance Programs	ADAMS TOWNSHIP TRUSTEE, HAMILTON COUNTY		SHERIDAN
	CLAY TOWNSHIP TRUSTEE, HAMILTON COUNTY		INDIANAPOLIS
	DELAWARE TOWNSHIP TRUSTEE, HAMILTON COUNTY		FISHERS
	FALL CREEK TOWNSHIP TRUSTEE, HAMILTON COUNTY		FISHERS

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	JACKSON TOWNSHIP TRUSTEE, HAMILTON COUNTY	ARCADIA
	NOBLESVILLE TOWNSHIP TRUSTEE, HAMILTON COUNTY	NOBLESVILLE
	WASHINGTON TOWNSHIP TRUSTEE, HAMILTON COUNTY	CARMEL
	WAYNE TOWNSHIP TRUSTEE, HAMILTON COUNTY	NOBLESVILLE
	WHITE RIVER TOWNSHIP TRUSTEE, HAMILTON COUNTY	CICERO
Food Programs	ADAMS TOWNSHIP TRUSTEE, HAMILTON COUNTY	SHERIDAN
	ANGELS' ATTIC	ARCADIA
	BETHEL LUTHERAN CHURCH	NOBLESVILLE
	CARMEL FRIENDS CHURCH	CARMEL
	CARMEL UNITED METHODIST CHURCH	CARMEL
	CHRIST COMMUNITY CHRISTIAN CHURCH	NOBLESVILLE
	CHRIST COMMUNITY CHURCH	SHERIDAN
	CICERO CHRISTIAN CHURCH	CICERO
	CLAY TOWNSHIP TRUSTEE, HAMILTON COUNTY	INDIANAPOLIS
	DELAWARE TOWNSHIP TRUSTEE, HAMILTON COUNTY	FISHERS
	FAITH APOSTOLIC CHURCH	SHERIDAN
	FALL CREEK TOWNSHIP TRUSTEE, HAMILTON COUNTY	FISHERS
	FISHERS UNITED METHODIST CHURCH	FISHERS
	GREEN VALLEY CHURCH OF CHRIST	NOBLESVILLE
	HAZEL DELL CHRISTIAN CHURCH	CARMEL
	JACKSON TOWNSHIP TRUSTEE, HAMILTON COUNTY	ARCADIA
	LIVE THE WAY	NOBLESVILLE
	MARION ADAMS MINISTERIAL ASSOCIATION	SHERIDAN
	MERCIFUL HELP CENTER	CARMEL
	NOBLESVILLE FIRST UNITED METHODIST CHURCH	NOBLESVILLE
	NOBLESVILLE TOWNSHIP TRUSTEE, HAMILTON COUNTY	NOBLESVILLE
	OPEN DOORS OF WESTFIELD WASHINGTON TOWNSHIP	WESTFIELD
	PURDUE EXTENSION - HAMILTON COUNTY	NOBLESVILLE

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	SACRED HEART OF JESUS CATHOLIC CHURCH	CICERO
	SAINT LOUIS DE MONTFORT	FISHERS
	SAINT MARIA GORETTI CATHOLIC CHURCH	WESTFIELD
	SAINT VINCENT DE PAUL CENTER, HAMILTON COUNTY	NOBLESVILLE
	SHERIDAN MARION ADAMS HIGH SCHOOL	SHERIDAN
	THIRD PHASE	NOBLESVILLE
	WASHINGTON TOWNSHIP TRUSTEE, HAMILTON COUNTY	CARMEL
	WAYNE TOWNSHIP TRUSTEE, HAMILTON COUNTY	NOBLESVILLE
	WHITE RIVER CHRISTIAN CHURCH	NOBLESVILLE
	WHITE RIVER TOWNSHIP TRUSTEE, HAMILTON COUNTY	CICERO
Utility Assistance	ADAMS TOWNSHIP TRUSTEE, HAMILTON COUNTY	SHERIDAN
	CLAY TOWNSHIP TRUSTEE, HAMILTON COUNTY	INDIANAPOLIS
	COMMUNITY ACTION OF GREATER INDIANAPOLIS (CAGI) - HAMILTON COUNTY	NOBLESVILLE
	DELAWARE TOWNSHIP TRUSTEE, HAMILTON COUNTY	FISHERS
	FALL CREEK TOWNSHIP TRUSTEE, HAMILTON COUNTY	FISHERS
	GOOD SAMARITAN NETWORK	FISHERS
	JACKSON TOWNSHIP TRUSTEE, HAMILTON COUNTY	ARCADIA
	MERCIFUL HELP CENTER	CARMEL
	NOBLESVILLE TOWNSHIP TRUSTEE, HAMILTON COUNTY	NOBLESVILLE
	SAINT VINCENT DE PAUL CENTER, HAMILTON COUNTY	NOBLESVILLE
	SALVATION ARMY HAMILTON COUNTY SERVICE EXTENSION	NOBLESVILLE
	WASHINGTON TOWNSHIP TRUSTEE, HAMILTON COUNTY	CARMEL
	WAYNE TOWNSHIP TRUSTEE, HAMILTON COUNTY	NOBLESVILLE
	WHITE RIVER TOWNSHIP TRUSTEE, HAMILTON COUNTY	CICERO
Transportation	HAMILTON COUNTY EXPRESS	NOBLESVILLE

Executive summary

Community Health Needs Assessments assess community assets and resource gaps to identify the top priority health needs in a community. Focus groups are conducted to gather information about communities as a part of Community Health Needs Assessments. On April 14th, 2015, a focus group was conducted to gain additional insight into top priority health needs in Hamilton County, Indiana. Key community leaders were invited to attend and participate in the focus group.

Stockholders/ Meeting participants

Ann Yeakle from Community Health Network, Kelly Peisker from St. Vincent Health, Joy Davis from Indiana University Health, Janet Gafkjen and Holly Wheeler from Partnership for A Healthy Hamilton County, Nancy Chance from Good Samaritan Network, and Maggie Matson, a MPH student from IUPUI's Fairbanks School of Public Health facilitated the focus group, which was held at Hamilton County Fairgrounds from 11:00am to 1:00pm.

In attendance were representatives from Advocates for Children and Families (AFCF) the Cherish Center, Alternatives, Inc., Aspire Indiana, Children's Bureau, Inc., CICOA Aging and In-Home Solutions, Community Assistance Program, Community Health Network, Covering Kids, Delaware Township Trustee, Fall Creek Township, Fishers, Franciscan St. Francis Health – Carmel, Gleaners Food Bank, Hamilton County Adult Protective Services (APS), Hamilton County Council on Alcohol and Other Drugs, Hamilton County Department of Child Services (DCS), Hamilton County Express, Hamilton County Health Department, Hamilton County Society for the Disabled, HAND, Inc., Heart & Soul Clinic, Indiana University Health, Janus Developmental Services, Inc., Legacy Fund, Noblesville, Noblesville Township Trustee, OneZone, Prevail Inc., PrimeLife Enrichment, Inc., Purdue Extension, Riverview Health, St.

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Vincent Health, St. Vincent Health- Carmel, The Salvation Army, Trinity Free Clinic, United Way of Central Indiana (UWCL), Wayne Township Trustee, Westfield, Westfield Chamber of Commerce, WestLink Consulting, White River Christian Church, and YMCA of Greater Indianapolis. See Appendix A. for detailed list of participants.

Procedures and Prioritization

Facilitators instructed participants to sit at one of the ten tables in the room, with people who were not from the same organization as themselves. Facilitators introduced themselves and explained the purpose of the focus group at the start of the meeting. Ann Yeakle from Community Health Network presented results from the previous Community Health Needs Assessment. Then, each attendee introduced themselves and announced the name of the organization they represented.

First, facilitators asked participants to individually write down the top eight concerns for the community on Post-it notes. Then, facilitators assigned each table with the task of identifying the top five concerns for the community through table group discussion about participants' top eight individual concerns. About thirty minutes later, a representative from each table presented and shared the top five concerns that emerged from table group discussion with facilitators and the rest of the room, while Ann Yeakle and Joy Davis wrote down and tallied each table's top priority concerns on poster boards hanging up in the front of the room to keep track of the number of times each issue was identified as a top five priority concern. Mental health/drug and alcohol abuse received the greatest number of tally marks, which was acknowledged as the community's top concern at the end of the meeting. Ann Yeakle and Joy Davis grouped closely-related issues together to finalize the list of top five priority concerns for the community after the

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meeting. Appendix B. shows the number of tally marks for each issue identified prior to grouping.

Health indicators identified

The top five priority concerns for the community were identified and grouped as:

1. Mental health/behavioral health/suicide/substance abuse
2. Life skills and education
3. Access to healthcare
4. Transportation
5. Affordable housing/domestic violence shelter

Appendix A.

The number of tally marks for each issue identified prior to grouping.

Name of Issue(s)	Tally Marks (n =)
Mental Health/Drug and Alcohol Abuse	8
Access and Healthcare	5
Affordable Housing	2
Food Insecurity	1
Life Skills	3
Transportation	5
Education/ Resource Awareness	5
Senior Care	2
Suicide Prevention	1
Community Design (Obesity, Food)	1
Domestic Violence/Shelter	3
Affordable Childcare	1

Hancock Electronic community survey findings

A total of 391 Hamilton County residents participated in the survey, which accounted for 7.92% of all survey respondents. See Figures 16 through 20 for survey questions and responses.

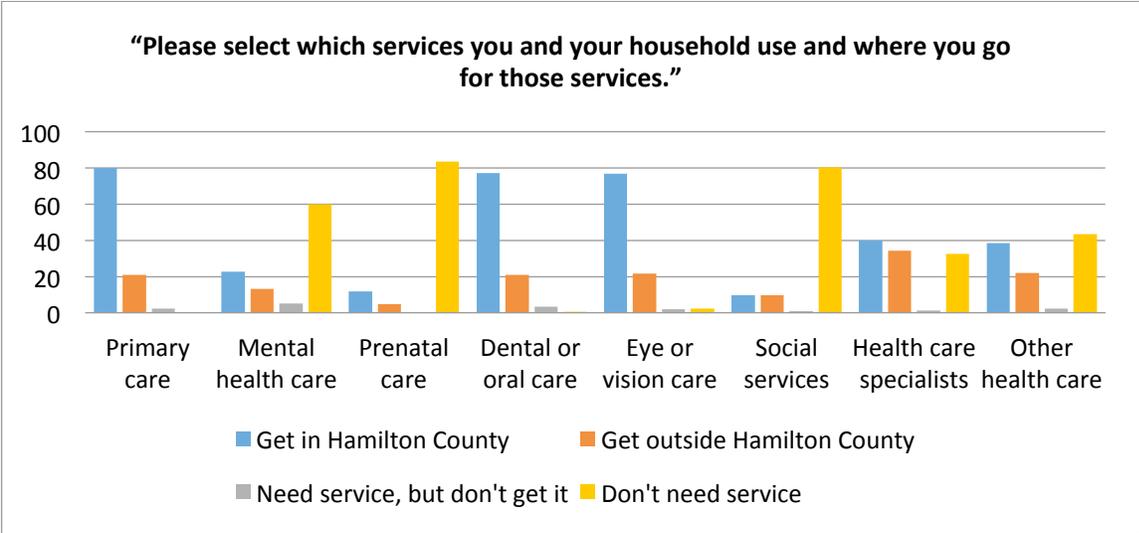


Figure 16 Survey responses (n = 327) to “Please select which services you and your household use and where you go for those services.”

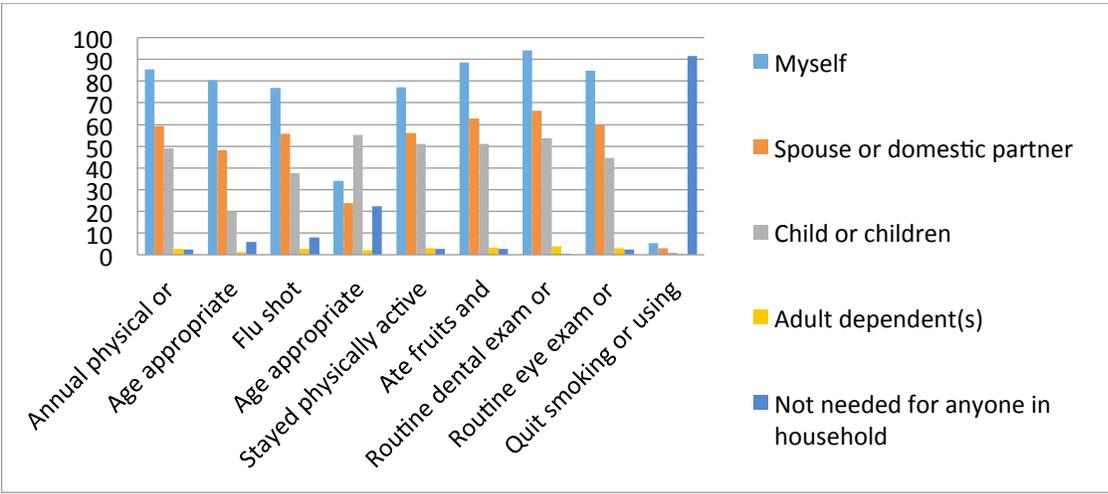


Figure 17 Survey responses (n = 337) to "Please select who in your household has participated in these health prevention activities in the past 12 months to stay healthy. Check all that apply:"

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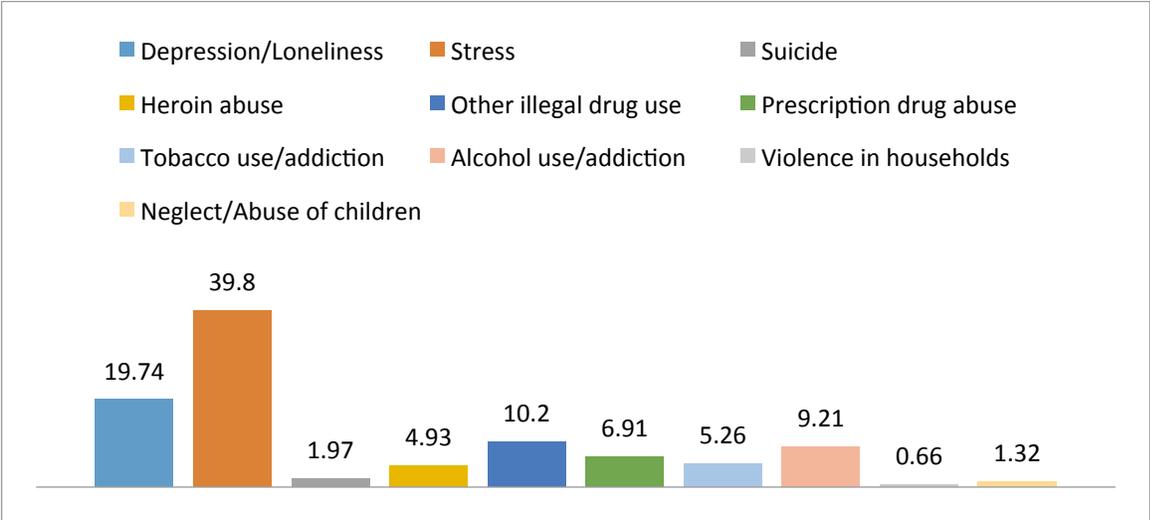


Figure 18 Survey responses (n = 304) to “Which of the following do you think is the most important behavioral health issue in your community?”

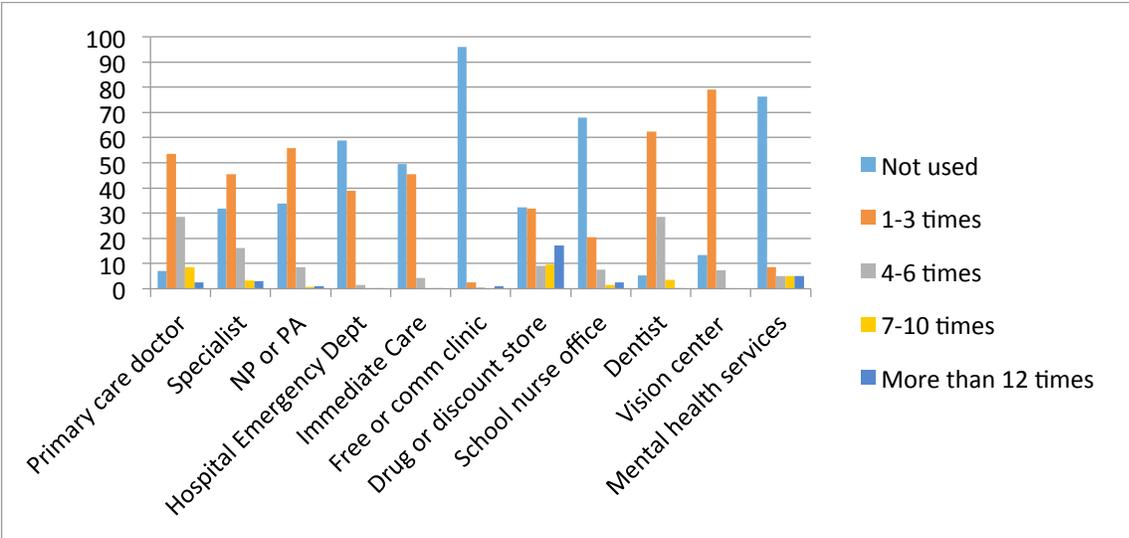


Figure 19 Survey responses (n = 320) to “In the past twelve months where did your household get care and how often?”

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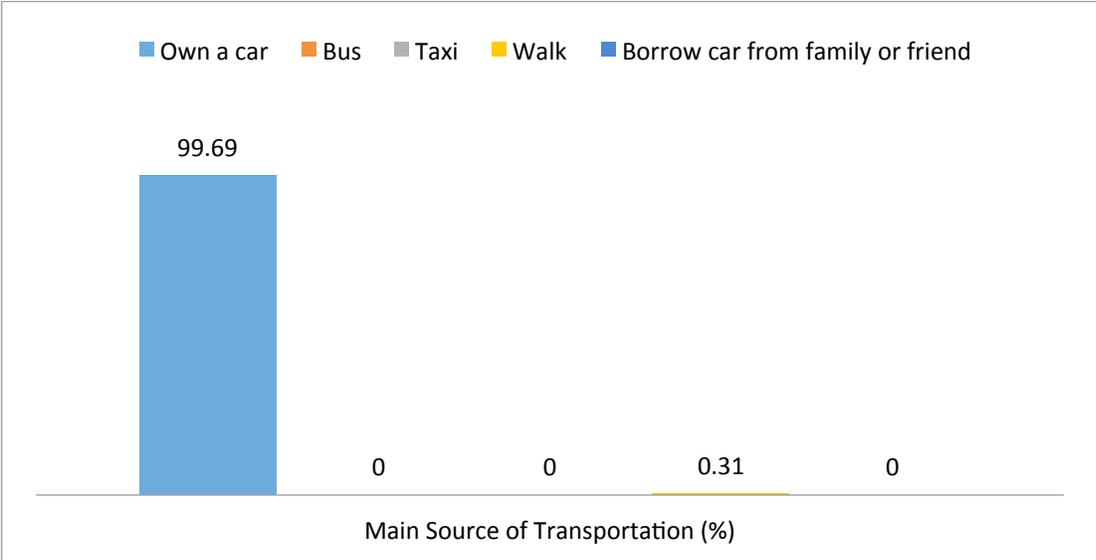


Figure 20 Survey responses (n = 325) to “What is your main source of transportation?”

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Hancock County- Key Informants

Introduction

Informant interviews were conducted with individuals from various organizations: Hancock Regional Hospital, Hancock Economic Development Council, Girl Scouts Central Indiana, Mt Vernon Trails Service Unit Director, Hancock County Soil and Water Conservation, and Hancock County Residents

Data sources

There were several data sources used to gather secondary data. These sources include: Indiana Indicators, SAVI, Hancock County Visitors Bureau, United States Census Bureau, and United States Department of Agriculture – Economic Research Service.

Definition of Community Assessed

Hancock County Indiana is located to the east of Indianapolis and contains several cities: Greenfield, New Palestine, Fortville, Shirley, Wilkinson, Spring Lake, Cumberland and McCordsville. This county spans across 306 square miles and has a population of almost 72,000 (United States Census Bureau, 2015). It has a strong economic root in agriculture and is the home to Hancock Regional Hospital.

Secondary Data

Demographics

The Hancock County community is comprised of mainly Caucasian individuals, accounting for 95.3% of the population (United States Census Bureau, 2015). 25.95% of the population is under 18 years of age, 61.18% is age 18 to 64, and 12.88% of the population is 65 years of age or older (SAVI, 2014). At 92.6%, a large portion of the population has a high school diploma (or equivalent) and 26.3% has a bachelor's degree or higher (United States Census Bureau, 2015). There are 28,542 housing units in Hancock County, with homeownership rates at 80.2%. The median value of these owner-occupied housing units is \$155,400 (United States Census Bureau, 2015). The average household size is 2.7 people (SAVI, 2014).

Economic Indicators

A large majority of Hancock County residents are employed; 93.45% of the population is employed (including the armed forces), and the remaining 6.55% of

the population is unemployed (SAVI, 2014). As of 2012, there were 1,333 private, nonfarm establishments in Hancock County (United States Census Bureau, 2015). The median household income is \$62,981, while the per capita personal income is \$47,342 (Indiana Indicators, 2013). The poverty rate in Hancock County is 7.6 and the poverty rate for children under the age of 18 is 9.9 (Indiana Indicators, 2013).

Insurance Coverage

In Hancock County, 14.3% of adults age 18 to 64 currently lack health insurance coverage (Indiana Indicators, 2013). Of those that have insurance coverage, 63.39% has employer based health care insurance coverage, while 12.81% has Medicare coverage and 12.08% has direct purchase health insurance coverage (SAVI, 2014). In addition, 5.9% of children under the age of 18 lack healthcare insurance (Indiana Indicators, 2013).

County Health Rankings

Hancock County ranks 26th in health outcomes out of 92 Indiana counties. Hancock County ranks 6th in health behavior out of 92 Indiana counties (Indiana Indicators, 2013).

Community Health Status Indicators

The overall death rate in Hancock County is 809.7 deaths per 100,000 people. When looking at self-reported health status, 18.3% adults 18 years of age and older report having fair or poor health status (Indiana Indicators, 2013). In relation, it is reported that an average of 3.9 physically unhealthy days over the past 30 days and an average of 4.0 mentally unhealthy days over the past 30 days (Indiana Indicators, 2013). Another community health status indicator is infant mortality. Hancock County has an infant mortality rate of 6.0 infant deaths per 1,000 live births (Indiana Indicators, 2013). In addition, 10% of births considered premature and 7.5% of newborns are classified as having low birth weight (Indiana Indicators, 2013).

Zip Code-Level Health Access Indicators

The Community Need Index (CNI) created by Dignity Health assigns a score on a scale of one to five, with one indicating the least amount of need and five

indicating the most amount of need (Dignity Health, 2015). Based on Hancock County results, which can be found in Figure 1, the highest need is in in Zip Code 46140 (Greenfield), and the need is considered to be in the low-moderately low range. All other Zip Codes in Hancock County are considered to have a low need.

Figure 1. Community Need Index Scores for Hancock County

Mean(zipcode): 1.6 / Mean(person): 2		CNI Score Median: 1.7			CNI Score Mode: 1.8	
Zip Code	CNI Score	Population	City	County	State	
46040	1.8	10735	Fortville	Hancock	Indiana	
46055	1.8	11128	Mc Cordsville	Hancock	Indiana	
46117	1.2	546	Charlottesville	Hancock	Indiana	
46140	2.4	40018	Greenfield	Hancock	Indiana	
46163	1	11874	New Palestine	Hancock	Indiana	
46186	1.6	1643	Wilkinson	Hancock	Indiana	

Source: Dignity Health, 2015.

Medically Underserved Areas and Populations

Hancock County does not have any Medically Underserved Areas/Populations (Indiana State Department of Health, 2012).

Health Professional Shortage Areas

Hancock County does not have any Health Professional Shortage Areas (Indiana State Department of Health, 2012).

Description of Other Facilities and Resources within the Community

Hancock County has 4 grocery stores and 1 supercenter, which can play a role in access to and consumption of healthy foods (United States Department of Agriculture – Economic Research Service, 2015). In Hancock County, there are 8.4 grocery stores per 100,000 people and 6.6 fast food restaurants per 10,000 people (Indiana Indicators, 2013).

Hancock County is the home to Hancock Regional Hospital, and has recently become the home to the Jane Pauley Health Clinic. Hancock County also has a variety of nursing homes, dental providers, fitness centers, pharmacies, optometrists, and chiropractors (Hancock County Visitors Bureau, 2015). There are also a variety of health related supportive services listed in Table 1 below.

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Table 1. Health Related Supportive Services in Hancock County

Child Care Providers	Social Services	Community Organizations	Senior Resources	Food Pantries
Alpha & Omega Day Care	Alternatives Inc.	Greenfield Historic Landmarks	Alzheimer's Support Group	Hancock County Food Pantry
Celebrations Childcare, Ministry & Preschool	American Red Cross	Greenfield Main Street	Greenfield Senior Citizens Center	McCordsville United Methodist Church
Crosstower Daycare	Connect2Help	Hancock County Historical Society	Grief Support Group	Fortville Christian Church
Geist Orchard Co-op Preschool	Court-Appointed Special Advocates	Hancock County Arts & Cultural Council	Hancock County Council on Aging	
Greenfield Parks Department Preschool	Division of Child Service	Hancock County Community Foundation	Hancock County Senior Services	
Little Bear Daycare	Division of Family Resources	Regreening of Greenfield, Inc.	Hancock Area Rural Transit	
Kids' Kingdom	Family Service	Riley Festival Association, Inc.	Hancock Regional Hospital Reflections Unit	
Lucky's Daycare	First Steps	Riley Old Home Society	Meals on Wheels	
Noah's Ark	F.U.S.E.	Sister Cities of Greenfield, Inc.	Mental Health America of Hancock County	
Shining Stars Child Care Academy	Goodwill of Central Indiana		Red Hat Society	
	Greenfield Learning Center		Senior Health Insurance Information (SHIIP)	
	Hancock Hope House			
	Head Start			
	Healthy Families			
	Hoosier Healthwise			
	Hospice Program			
	Interlocal Community Action Program (ICAP)			
	Love Inc. of Greater Hancock County			
	Mental Health America of Hancock County			
	Planned Parenthood			
	Pregnancy Care Center of Greenfield			
	State Health Insurance Assistance Program			
	United Way of Hancock County			

Source: Hancock County Visitors Bureau, 2015.

Summary of Key Informant Interviews

Identification of Persons Providing Input

Carla Stoneberg – Resident of Hancock County, Retired Hospice Nurse

Linda Garrity – Community Education Coordinator at Hancock Regional Hospital

Nolan “Skip” Kuker – Executive Director of Hancock Economic Development Council

Teri Anderson – Girl Scouts Central Indiana, Mt Vernon Trails Service Unit Director (volunteer), Resident of Hancock County

Cindy Newkirk – Hancock County Soil and Water Conservation District Administrator

Susan Powell – Business Office Manager at an Assisted Living Community

Prioritization Process and Criteria

To obtain a more complete picture of the factors that play into Hancock County community’s health, input from residents, community leaders, and healthcare workers in the community were gathered via individual interviews.

Each interviewee was asked what the most pressing community and health issues were in Hancock County. In order to determine what the community priorities were, all responses were collected, aggregated, and ranked. The rankings were determined based on the number of interviews in which the issue was identified as a priority.

Description of Prioritized Needs

Lack of healthy food choices and education around making healthy food choices

There are continually new fast food restaurants opening. This leads to many families eating fast food on a regular basis, and can be tied to the rates of diabetes and obesity. There are not many individuals or families that cook meals on a regular basis, so offering cooking classes and educating families on healthy food choices has potential to decrease the amount of fast food consumed by residents.

High rates of alcohol abuse and smoking

Alcohol abuse in Hancock County is an issue, but not always identified as an issue because it has been more socially acceptable to drink in excess. In addition, many doctors do not want to address alcohol use, as it is a “touchy” subject. Educating doctors about the signs, as well as how to

approach their patients if they suspect alcohol abuse, could possibly bring down the abuse/overuse rates.

Hancock County already has a worrisome rate of smoking, but a new trend that is alarming is the extreme increase in e-cigarette use rates. Many young teens have reported using e-cigarettes, and some even report using them on a regular basis. Education around the harmful effects is needed, but it is not clear if this is enough to make residents change their smoking behaviors.

Less family time/ activities to do as a family

While the community has made a decent stride in providing more parks and trails, there is not a fitness center, sports complex, or public pool that are free to residents. Not only is there an absence of family based recreational events, there is just not a strong sense of family-time importance. Having dinners together and participating in activities together can help promote a stronger family relationship, in addition to creating a healthier, more active community.

Note: There were some issues that were brought up in interviews, but were only mentioned once, so they were not determined to be a priority. These topics included: mental health illness rates, drug use rates, decrease in quality of public school education, maternal child health, cancer, and accessibility to health care.

Electronic Community Survey Findings

5,006 respondents from Indiana, 455 respondents from Hancock County

9 questions specific to Hancock County

Only 3 of the 9 questions specific to Hancock County had any responses to them

Types of services used and where they are obtained

Residents get the services they need

Residents get a majority of social services, health care specialist services, and mental health care outside of Hancock County

Residents utilizing primary care, dental/oral healthcare, and eye/vision care resources in Hancock County

Preferred method of communication with provider (in order of most preferred to least preferred) – Face to face, phone, email, telecommunication

The most common ways to access technology were via personal internet and cell phone

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