



# **SALEM REGIONAL MEDICAL CENTER**

Doctor driven healthcare.



## **2019-2022**

## **IMPLEMENTATION PLAN**

**Addressing the 2019 Columbiana  
County Health Needs Assessment**

**Salem Regional Medical Center  
1995 East State Street  
Salem, Ohio 44460**

**2019-2022 Community Health Needs Assessment's  
Implementation Plan for Salem Regional Medical Center  
As Required by Internal Revenue Code § 501(r)(3)**

**Name and EIN of Hospital Organization Operating Hospital Facility:  
34-1041385**

**Date Implementation Plan  
Approved By Authorized  
Governing Body:**

**November 15, 2019**

**Authorized Governing Body:**

**- Recommendation for Approval on November 12,  
2019 by the Strategic Development Committee of  
the Salem Regional Medical Center (SRMC) Board**

**- Approval Given November 15, 2019 by the  
Executive Committee of the SRMC Board**

**Comments:**

**Written comments about the Columbiana County  
Health Needs Assessment and/or the SRMC  
Implementation Plan may be submitted to Debbie  
Pietrzak at 1995 East State Street, Salem, OH 44460;  
or by email to [debbie.pietrzak@salemregional.com](mailto:debbie.pietrzak@salemregional.com)**

# **SALEM REGIONAL MEDICAL CENTER: 2019-2022 Implementation Plan**

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## I. INTRODUCTION

Salem Regional Medical Center (SRMC) collaborated with area health care providers to conduct the 2019-2022 Columbiana County Health Needs Assessment (CCHNA), which was developed as a multi-sector partnership that supports shared ownership of community health improvement activities; including assessment, planning, implementation and evaluation. The CCHNA was designed to assess the health status and needs of the residents of Columbiana County, Ohio; identify factors that affect population health; determine the availability of existing resources that can be mobilized to improve health status; and facilitate the development of evidence-based, population-wide interventions and measurable outcomes.

The CCHNA was conducted between Spring 2018 to April 2019, in a joint process led by the Columbiana County Health Needs Assessment Steering Committee, in partnership with East Liverpool City Hospital; the Community Action Agency of Columbiana County; Salem Regional Medical Center; the Columbiana County, East Liverpool City and Salem City Health Departments; the Columbiana County Mental Health and Recovery Services Board and other community providers. SRMC provided financial support and professional assistance throughout the development of the CCHNA.

Collaboration among the partners was essential to align interests and coordinate resources with the goal of effectively promoting better health outcomes in Columbiana County by leveraging multiple perspectives, community relationships and areas of expertise. The Steering Committee used both qualitative and quantitative data, including community survey data, key informant interviews, demographic data and other statistical secondary data; which was gathered to identify and prioritize health problems and risk factors for residents in the Columbiana County service area. The Steering Committee made significant efforts to ensure that all geographic regions of the county and socio-demographic groups, such as underserved and/or vulnerable populations, were represented in the CCHNA, along with broad, community input. (Note that the full report of the CCHNA is posted on Salem Regional Medical Center's website at [www.salemregional.com](http://www.salemregional.com), and was approved by SRMC's Board of Directors in May 2019.)

In addition to collaborating with other organizations when conducting its 2019-2022 CCHNA, SRMC must fulfill the IRS requirement to adopt a written Implementation Plan with respect to its own hospital facility. This written plan is intended to satisfy the requirements set forth in Internal Revenue Code Section 501(r)(3), as established within the Patient Protection and Affordable Care Act (PPACA), requiring that non-profit hospitals develop written implementation strategies within a defined implementation plan to address the needs identified in their most recent community health needs assessments. The overall purpose of the implementation strategy process is to align the Medical Center's limited resources, programs, services and activities with the findings of the 2019-2022 CCHNA.

**- Governance Approval Process:** Findings from the 2019-2022 CCHNA were presented in May 2019 to SRMC's Strategic Development Committee with a recommendation for approval to SRMC's Board of Directors as part of SRMC's strategic planning process. Following approval of the 2019-2022 CCHNA by the SRMC Board of Directors in May 2019, SRMC's implementation planning process was launched with significant input from the CCHNA Steering Committee via the joint development of a community health improvement plan (CHIP), created between April through July 2019, and published in August 2019.

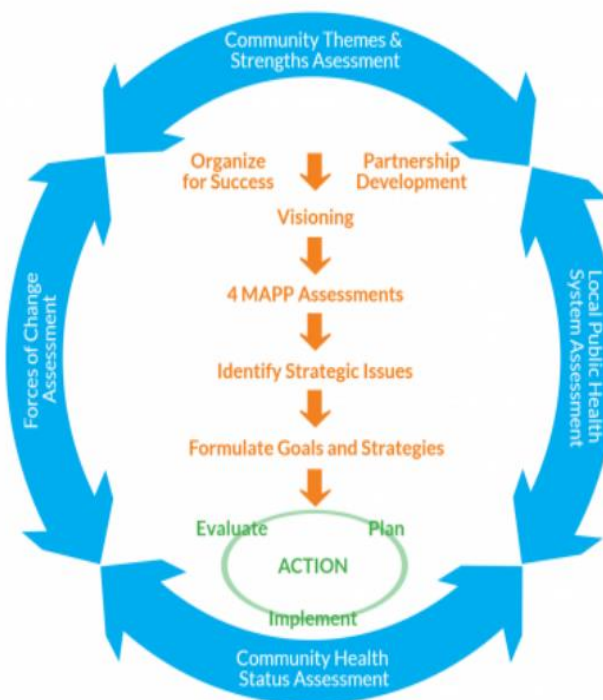
The Columbiana County 2019-2022 CCHNA was utilized as a vital tool for creating the County's 2019-2022 CHIP. A CHIP is designed to set priorities, direct the use of resources, and develop and implement projects, programs, and policies; with input obtained from a broad set of community stakeholders and partners. The Columbiana County General Health District contracted with the Hospital Council of Northwest Ohio (HCNO), a neutral, regional, nonprofit hospital association, to facilitate the CHIP; and invited various community stakeholders to participate in the community health improvement process, including Salem Regional Medical Center as an original member of the CCHNA Steering Committee.

Following publication of the 2019-2022 CHIP, significant findings and priorities from the 2019-2022 CCHNA and 2019-2022 CHIP were reviewed by SRMC's Board of Directors and management team as part of SRMC's strategic planning process. Selected strategies recommended in the Columbiana County 2019-2022 CHIP were then incorporated into SRMC's 2019-2022 Implementation Plan, presented to the Strategic Development Committee in November 2019 for a recommendation for approval, and to the SRMC Board of Directors for governing body approval in November 2019. (Note: SRMC's 2019 Implementation Plan was created after the 2019 CHIP findings were finalized, so that the county's population health improvement activities and resources can be integrated and coordinated to address identified community needs.)

## II. MOBILIZING FOR ACTION: ASSESSMENTS & PRIORITIZATION PROCESS

Data from the most recent CCHNA was carefully considered and categorized into community priorities with accompanying strategies. This was accomplished using the National Association of County and City Health Officials' (NACCHO) national framework, *Mobilizing for Action through Planning and Partnerships* (MAPP). MAPP is a community-driven strategic planning process for improving community health that helps prioritize public health issues and identify resources to address them.

Figure 1.1 The MAPP model



The MAPP framework includes 6 phases:

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

Phase 3 of the MAPP process also includes four assessments: Community themes and strengths, Forces of change, Local public health system assessment, and the community health status assessment. (See Figure 1.1) These four assessments were completed by the Columbiana County Health Partners workgroup for the purpose of identifying and prioritizing strategic health issues and vulnerable populations as the foundation for Columbiana County's 2019-2022 CHIP.

The prioritization findings were then categorized so that the 2019-2022 CHIP may serve as a catalyst going forward to develop community partnerships and implement evidence-based strategic interventions that address priority health needs as identified by the county and state. With the goal of further aligning SRMC's Implementation Plan to address these top local, state and national health priorities; SRMC has integrated the 2019-2022 CHIP's findings into its 2019-2022 Implementation Plan.

## **A. MAPP Assessment: Community Health Status Assessment (2019-2022 CCHNA)**

The data assessment model used for the CCHNA followed best practices as outlined by the Association of Community Health Improvement and was also designed to ensure compliance with current Internal Revenue Service guidelines for charitable 501(c)(3) tax-exempt hospitals and National Public Health Department accreditation prerequisites.

### **1. Primary CCHNA Data**

Primary qualitative data to reflect input from the broad community and vulnerable populations was collected through 377 written community surveys completed by individuals representing diverse constituent groups with this data gathered and analyzed by HCNO; and 34 stakeholder and focus group interviews, reflecting input from 115 participants with this data gathered and analyzed by the Partners' workgroup.

**- Community Survey:** As a first step in the community survey design process, health education researchers from the University of Toledo and staff members from HCNO chose to derive the majority of the community survey items from the Behavioral Risk Factor Surveillance System (BRFSS), due to the ability to compare local data with state and national data. The project coordinator from HCNO met with the Partners' workgroup to review banks of potential survey questions from the BRFSS survey and define the content, scope, and sequence of the survey.

The sampling frame for the community survey consisted of adults ages 19 and over living in Columbiana County, with the target sample size of 382 adults needed to ensure a 95% confidence level, with a corresponding margin of error of 5%.

**- Focus Groups and Stakeholder Interviews:** Community leaders and key stakeholders were identified by the Partners as experts in a particular field related to their background experience or professional position; and/or those who understand the needs of a particular community/geographic region or under-represented group, including the medically underserved and vulnerable populations defined in the CCHNA.

The Association for Community Health Improvement's Toolkit was used as a best-practice guide for developing community-based participatory research to reflect the experiences and opinions of community stakeholders. A standardized interview question guide was then used by the workgroup to conduct the interviews and facilitate focus group interviews with 115 participants from October-December 2018.

Community participants represented in the focus group and stakeholder interviews included:

- |  |   |
|--|---|
| - School Districts and Youth Services            | - Juvenile Justice System                         |
| - Community Resource Centers                     | - Food Pantries                                   |
| - Senior Services & Home Health Providers        | - Hispanic Community Members & Service Providers  |
| - Hospital Case Managers                         | - Local Government Officials/County Commissioners |
| - Health and Human Service Providers             | - Mental Health and Recovery Service Providers    |
| - Faith-Based Organizations Providing Assistance | - Veteran's Service Commission                    |

Findings from this source of primary data were obtained regarding factors impacting social determinants of health, top health care issues and priorities, community strengths and resources, opportunities to increase access to health care resources, and how to improve community supports. In addition to collecting and analyzing data from focus groups and stakeholder interviews, primary data input and

synthesis of conclusions were also performed by the community representatives, who served on the Columbiana County Health Partners' workgroup.

**2. Secondary Data:** HCNO collected secondary data from multiple websites, including county-level data, whenever possible. HCNO utilized sites such as the Behavioral Risk Factor Surveillance System (BRFSS), numerous CDC sites, U.S. Census data, and Healthy People 2020, among other national and local sources. The Partners collected additional epidemiological and population data to help establish benchmarks for health indicators and conditions at the county, state and national levels; representing a wide range of factors that impact community health, such as mortality rates, environmental factors and health care access issues. Data sources included the County Health Rankings, Association for Community Health Improvement's Community Health Assessment Toolkit, Truven Health Analytics' Community Need Index, etc. (See 2019-2022 CCHNA Appendix: "Health Assessment Information Sources")

**3. CCHNA Data Gaps/Limitations:** As with any assessment, it is important to consider the findings in light of possible limitations. The 2019-2022 CCHNA relied on multiple data sources and community input gathered between the summer of 2018 and April 2019. A number of data limitations should be recognized when interpreting results, such as some data only exists at a county-wide or state level, which does not allow for assessing needs at a more granular level. In addition, secondary data measures community health in prior years and may not reflect current conditions. The impacts of recent public policy developments, changes in the economy and/or other community developments are not reflected in those data sets.

The sampling frame for the adult community survey consisted of adults ages 19 and over living in Columbiana County, and the investigators conducted a power analysis to determine what sample size was needed to ensure a 95% confidence level, with a corresponding margin of error of 5%. A sample size of at least 382 adults was needed to ensure this level of confidence; however, the final survey results were compiled from 377 completed surveys, which reflected a high response rate but reduced the level of power and broadened the confidence interval to  $\pm 5.04\%$ . It should be noted that if any important differences existed between the respondents and non-respondents regarding the questions asked, this would represent a threat to the external validity of the results (the generalizability of the results to the entire County's adult population).

It is also important to note that although several questions were asked using the same wording as the Centers for Disease Control and Prevention (CDC) questionnaire, the data collection method differed. The CDC data was collected using a set of questions from the total question bank, and participants were asked the questions over the telephone rather than a mailed survey. Lastly, caution should be used when interpreting sub-group results, as the margin of error for any sub-group is higher than that of the overall survey sample.

**4. Forces of Change:** Findings from the primary data sources also indicated that there were "forces of change," defined as external trends, events and factors that positively or negatively are or will be impacting the health of Columbiana County residents. The following forces of change need to be accounted for in developing SRMC's implementation strategies including:

- Unknown impact of health reform, accountable care, and value-based payment models
- Engrained Appalachian cultural beliefs and lack of personal accountability for health outcomes
- Increased demand for accessible services due to aging population with higher rates of chronic disease
- Rising rate of prescription and non-prescription substance abuse

- Growing incidence of acute mental illness
- Increased language barriers and disparate access issues related to a growing “undocumented” Hispanic population in the northern part of Columbiana County
- Positive Impact: Strong collaborative infrastructure of health providers and engaged community organizations is already established

**5. Findings from Other Needs Assessments:** Findings from other health needs assessments that were conducted in the region and in the state of Ohio were also reviewed by the Partners to help inform the development of the CCHNA, including:

- The 2013-2016 CCHNA conducted by the Columbiana County Health Partners’ workgroup.
- The 2016 Akron General Medical Center CHNA, the Akron Children’s Hospital CHNA and 2016 Mercy Health- Youngstown CHNA (all conducted by Kent State University); and the 2016 Aultman Hospital CHNA conducted by the Center for Marketing & Opinion Research.
- Ohio’s 2017-2019 State Health Improvement Plan (SHIP), as informed by the 2016 State Health Assessment (SHA). Ohio’s 2016 SHA includes over 140 metrics, organized into data profiles, as well as information gathered through five regional forums, a review of local health department and hospital assessments and plans and key informant interviews.

The interconnectedness of Ohio’s greatest health challenges, along with the overall consistency of health priorities identified in the assessment, indicate many opportunities for collaboration between a wide variety of partners at and between the state and local level, including physical and behavioral health organizations and sectors beyond health.

### III. SRMC’S IMPLEMENTATION PLANNING PROCESS

#### A. Summary of Populations Served Through SRMC’s Implementation Plan

##### 1. CCHNA’s Definition of “Community” and Service Area Determination

In accordance with IRS and Public Health Accreditation Board (PHAB) guidelines, the Columbiana County Health Partners’ workgroup defined the 2019-2022 CCHNA’s “community” as Columbiana County, Ohio; by geographic location based on the shared primary service area of the workgroup. Columbiana County includes the zip codes listed in the following table:

43920	E. Liverpool	44413	E. Palestine	44432	Lisbon	44460	Salem
43945	Salineville	44423	Hanoverton	44441	Negley	44490	Washingtonville
43968	Wellsville	44427	Kensington	44445	New Waterford	44625	East Rochester
44408	Columbiana	44431	Leetonia	44455	Rogers	44634	Homeworth

##### 2. SRMC’s Implementation Plan’s Definition of “Community” and Service Area Determination

SRMC’s 2019-2022 Implementation Plan defines “community” as SRMC’s defined Service Area, which includes: Knox, Butler, Salem, Fairfield, Unity, West, Hanover, Center, Elkrum, Middleton, Franklin, Wayne, Madison, St. Clair and Washington townships in Columbiana County; and Smith, Goshen, Green, Beaver and Springfield townships in Mahoning County.

SRMC’s 2019-2022 Implementation Plan does not include the zip codes of East Liverpool (43920) and Wellsville (43968), which were included in the 2019-2022 CCHNA; because these communities lie beyond the Medical Center’s defined Service Area.



### 3. Inclusion of Vulnerable Populations (Health Disparities)

According to the National Institutes of Health, vulnerable populations include those who are racial or ethnic minorities, children, elderly, socioeconomically disadvantaged, underinsured or those with certain medical conditions. Members of vulnerable populations often have health conditions that are exacerbated by unnecessarily inadequate health care. Based on the demographics of Columbiana County's population and for the purposes of SRMC's Implementation Plan, the Partners' workgroup has identified vulnerable populations as being those living in poverty/socioeconomically disadvantaged, the Appalachian culture, children/youth, the elderly and those facing ethnic and literacy barriers.

### B. Identifying & Prioritizing Issues from the CCHNA for the CHIP (MAPP Phase 4)

The Partners used the 2019-2022 CCHNA data findings by key issue to identify, develop and prioritize a list of strategic health-related issues facing Columbiana County. This process included the development of a list of the most significant health issues identified during the CCHNA process, for evaluation during a nominal objective voting process by workgroup members.

The Partners then completed a ranking exercise for each issue identified, giving a score to the three prioritization criteria of: (i) magnitude of problem, (ii) seriousness of consequence, and (iii) feasibility of correcting. Scores for each issue were compiled to yield an average score, which was used to rank order the final priorities. Based on the highest scores as ranked by the workgroup, the top eight CCHNA issues were prioritized as follows and carried forward into the "alignment" evaluation process:

Prioritization of Key CHNA Issues	Average Score
1. Chronic disease	26.4
2. Mental health/trauma	24.0
3. Drug dependency/abuse	23.7
4. Obesity	23.3
5. Preventive medicine	23.3
6. Access to care	22.4
7. Tobacco use/vaping	21.6
8. Youth unintentional/intentional injury	21.0

## IV. ALIGNMENT WITH STATE, NATIONAL AND COUNTY PRIORITIES

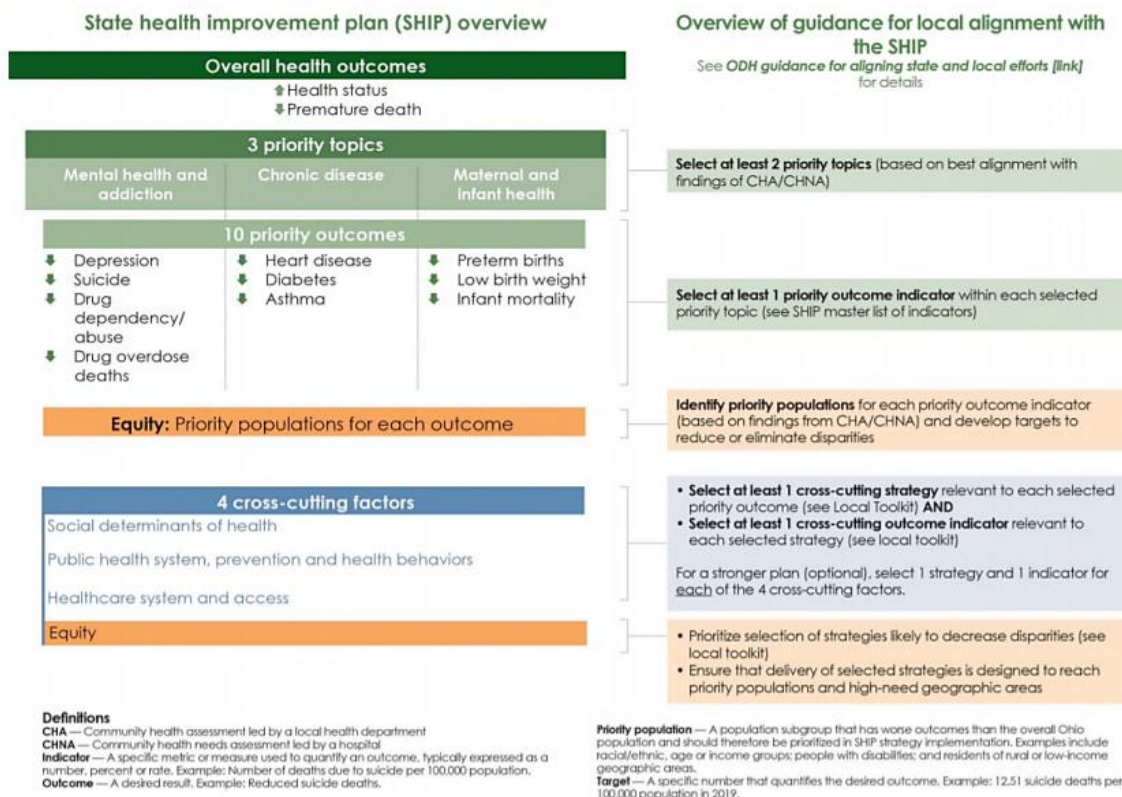
### A. Alignment with Ohio's State Health Improvement Plan

Following a discussion of the top eight 2019-2022 CCHNA issues, the Workgroup reviewed again the priority topics identified in Ohio's 2019 State Health Assessment (SHA) and 2017 State Improvement Plan (SHIP), and noted that local community health improvement efforts need to align with at least two of the three SHIP priority topics and their related health outcomes as listed within each respective topic area, and 1 cross-cutting outcome indicator (see Figure 1.4, 2016 SHIP excerpt below). The 2017 SHIP serves as a strategic menu of priorities, objectives, and evidence-based strategies to be implemented by state agencies, local health departments, hospitals and other community partners and sectors beyond health including education, housing, employers, and regional planning.

The SHA and SHIP identify cross-cutting factors that impact multiple outcomes versus disease-specific programs and focuses on underlying drivers of community wellbeing. This approach is designed to prompt state and local stakeholders to implement strategies that address social determinants of health and health behaviors, as well as approaches that strengthen connections between the clinical healthcare system, public health, community-based organizations and sectors beyond health.

Cross-cutting factors identified in the 2019 SHA include: poverty, transportation, physical activity and nutrition and access to care. Cross-cutting factors identified in the 2017 SHIP include: social determinants of health; public health system, prevention and health behaviors; healthcare system and access; and equity.

**Figure 1.4 2017-2019 State Health Improvement Plan (SHIP) Overview**



The Workgroup members then selected the top three CCHNA priority topics to best align locally with the findings from the 2019-2022 Columbiana County CHNA and Ohio's 2016 SHIP, to be addressed through the 2019-2022 CHIP. Both the 2019-2022 CCHNA and Ohio's SHIP identify access to health care, health disparities and equity issues as priorities; and focus on mental health and addiction and chronic disease as ways to improve community health. In addition, both highlight healthcare workforce needs as important to improving access to services.

Columbiana County's 2019-2022 Health Improvement Plan aligns with the two SHIP priority topics of: Mental Health and Addiction and Chronic Disease (with Obesity identified as a contributing factor to Chronic Disease); and the cross-cutting factor of Access to Health Care as follows:

Columbiana County 2019-2022 Columbiana County Health Needs Assessment's Three Priority Topics	Alignment with Ohio's 2016 SHIP Priorities
<b>1. Chronic Disease/Obesity</b> (includes heart disease, reactive airway, diabetes and cancer)	X
<b>2. Mental Health and Addiction/Substance Use</b> (includes trauma, suicide, depression, drug-related deaths & youth perception of drug use)	X
<b>3. Access to Health Care*</b> (includes health screenings, vaccination, provider availability, transportation and insurance coverage)	X-Alignment with 2016 SHIP's Cross-Cutting Factors

\*Note that Ohio's 2017 SHIP defines healthcare system and access as, "Health care refers to the system that pays for and delivers clinical health care services to meet the needs of patients. Access to health care means having timely use of comprehensive, integrated and appropriate health services to achieve the best health outcomes."

## **B. Alignment with Federal Population Health Planning Priorities**

### **- Healthy People 2020**

Columbiana County's CHNA priorities address specific Healthy People 2020 goals, including weight control objectives, mental health and mental disorders, substance abuse, tobacco use and cancer prevention; which are integrated within SRMC's implementation strategies. Examples include:

- Nutrition and Weight Status (NWS)-8: Increase the proportion of adults who are at a healthy weight
- Mental Health & Mental Disorders (MHMD)-11: Increase depression screening by primary care providers
- Substance Abuse (SA)-2: Increase the proportion of adolescents never using substances
- Tobacco Use (TU)-1: Reduce tobacco use by adults
- Cancer (C)-1: Reduce the overall cancer death rate

**- Health Resources & Services Administration (HRSA):** Priorities identified for the Columbiana County 2019-2022 CHIP also align with HRSA's top Public Health Priorities for the U.S. population as follows:

- Priority 1: Health Equity- Achieving health equity and improving health outcomes
- Priority 2: Primary Care & Public Health- Linking and integrating public health and primary care
- Priority 5: Collaboration- Increasing collaboration and alignment of programs...to expand capacity and improve HRSA's ability to achieve public health goals

For more information on HRSA's public health priorities, please go to <https://www.hrsa.gov/public-health>.

**C. Alignment with Columbiana County's Population Health Improvement Priorities:** Salem Regional Medical Center's population health improvement activities will also continue to focus on the development of collaborative strategies as determined by the CCHNA Steering Committee for implementing evidence-based, community health improvement activities identified in the 2019-2022 Columbiana County CHIP.

In addition, with the completion of Columbiana County's 2019-2022 CHNA and CHIP, the Columbiana County Health Partners' workgroup was in compliance with the state of Ohio's mandate (ORC3701.981) that all hospitals must collaborate with their local health departments on community health assessments and community health improvement plans.

## **V. ACTION STEPS RECOMMENDED IN THE 2019-2022 CHIP**

A. To work toward decreasing **chronic disease and preventing obesity**, the following action steps are recommended:

1. Reduce the percentage of food insecure households
2. Increase awareness of diabetes prevention and self-management
3. Increase fruit and vegetable consumption through school-based nutrition education
4. Increase healthy eating and physical activity through school-based healthy choices campaign
5. Increase physical activity through community-based, family activities

B. To work toward improving **mental health** and decreasing **substance abuse**, the following actions steps are recommended:

1. Decrease drug overdose deaths via increased awareness of free naloxone distribution sites
2. Decrease drug dependency or abuse through community awareness campaigns
3. Educate community members on substance use issues and trends
4. Improve mental health outcomes and awareness of trauma-informed care

5. Reduce mental health stigma through Mental Health First Aid training
6. Integrate depression and suicide screening and treatment through provider knowledge
7. Decrease suicide deaths by screening for clinical depression using a standardized tool
8. Increase suicide awareness through school-based education
9. Implement school-based social and emotional instruction to improve youth social competence, behavior and resiliency

C. To work toward **improving access to health care**, the following actions steps are recommended:

1. Increase awareness of transportation options
2. Increase vaccination rates through specific information at all health promotion events
3. Increase awareness and access to existing health care services for preventive care

D. To develop **cross-cutting strategies** that address multiple priorities, the following action steps are recommended:

1. Initiate mass-reach communications to reduce tobacco use and vaping
2. Increase cultural understanding and skills through cultural competence training for providers
3. Increase health insurance enrollment and outreach
4. Expand awareness and education of early childhood education opportunities
5. Increase kindergarten readiness through early childhood home visitation programs.

## **VI. RESOURCES TO ADDRESS NEEDS**

### **A. Community Resource Inventory**

A strategic approach to community health improvement involves the collection and analysis of data regarding health status and factors contributing to poor health; combined with capacity building and collaborative efforts between diverse stakeholders to address both the symptoms and underlying causes of health needs. As such, hospitals are in a position to leverage their charitable resources and build greater capacity to address complex health concerns in a cost effective manner.

Acknowledging the many organizations and resources in place to address the health needs of our communities, SRMC will engage key community partners in implementing evidence-based<sup>1</sup> strategies across the Hospital's geographic Service Area. SRMC intends to implement these evidenced-based, preventive health activities to help reduce chronic disease rates, prevent the development of secondary conditions, address health disparities and the needs of vulnerable populations, and develop a stronger base of effective prevention programming.

As a not-for-profit hospital, SRMC will partner with local public health agencies to develop and implement a multi-pronged approach to impact these issues. Many of our community health improvement initiatives leverage substantial external resources and foster good working relationships with community stakeholders and other collaborative partners to achieve the strategic allocation of charitable resources, develop appropriate interventions, and establish metrics and systems to monitor community health improvement initiatives.

The CCHNA Steering Committee identified existing health care facilities and resources within Columbiana County and the region, which are available to respond to the significant health needs of the community. This information was compiled from resource directories currently utilized by area case managers and social service organizations, and includes a listing of community and hospital-based services (referenced in the 2019-2022 CCHNA's Appendix IX: Columbiana County Community Resources.)

## B. CHIP's Gap Analysis and Strategy Selection

**Purpose:** To determine discrepancies between community needs and viable community resources for addressing local priorities and identifying strategic solutions

A “gap” is an area where the community needs to expand its efforts to reduce a risk, enhance an effort, or address another target for change. A “strategy” is an action the community will take to fill the gap.

“Evidence” is information that supports the linkages between a strategy, outcome, and targeted impact area.

The Columbiana County Health Partners determined gaps in relation to each priority area identified in the CHIP (See Appendix 1-“Gaps and Strategies”), considered potential or existing resources, and then referenced a list of evidence-based strategies recommended by the Ohio SHIP as follows, to identify strategic actions:

- Evidence-based practice has compelling evidence of effectiveness. Participant success can be attributed to the program itself and have evidence that the approach will work for others in a different environment.
- A best-practice is a program that has been implemented and evaluation has been conducted. While the data supporting the program is promising, its scientific rigor is insufficient,


Salem Regional Medical Center has considered this information when developing the SRMC 2019-2022 Implementation Plan, so that the chosen strategies are in alignment with the Columbiana County CHIP and the Ohio SHIP.

## C. SRMC Resources

SRMC has developed an Implementation Plan that positions the Hospital in both a leadership and partnership role in coordinating county-wide collaboration and resources to analyze area healthcare utilization, explore barriers to access, identify partner needs and resources, plan/redesign services, measure outcomes against evidence-based benchmarks and share accountability in order to facilitate effective programming to improve the health of the residents within the Hospital's Service Area.

As a community leader in population health improvement, SRMC annually allocates budgeted funds and staff administrative hours through its Community Benefit initiatives for implementing the activities described in the following section of the 2019-2022 Implementation Plan.

## VII. SRMC IMPLEMENTATION STRATEGIES TO ADDRESS HEALTH NEEDS

Salem Regional Medical Center's Implementation Plan addresses the following priorities: **Chronic Disease/Obesity, Mental Health and Addiction/Substance Use**, and **Access to Health Care**, in tandem with the 2019-2022 CHIP. Note: This symbol  will be used when a priority, indicator, or strategy also directly aligns with the 2017-2019 SHIP.

### A. Priority #1: Chronic Disease/ Obesity Prevention

- **Description of Need:** Being overweight or obese contributes to numerous health conditions that limit the quality and length of life, including: hypertension, dyslipidemia (i.e. high total cholesterol or high levels of triglycerides), type 2 diabetes, coronary heart disease, stroke, gallbladder disease, depression, osteoarthritis, sleep apnea and respiratory problems and is linked to some cancers (endometrial, breast, and colon). Low physical activity and unhealthy eating are associated with a higher risk of these chronic diseases and result in overweight and obesity. The need for better nutrition and more exercise, and the

lack of affordable fitness facilities and indoor walking facilities were identified as top community needs related to physical activity and nutrition by survey respondents and interview participants.



**- SRMC's Obesity Prevention Goal:** To work with existing and/or develop new community partnerships to broaden access to recreational opportunities and promote existing resources for improved physical activity and nutrition to positively impact the rates of physical activity and consumption of healthy foods for residents within SRMC's Service Area.


**- Resources & Measurable Outcomes:** Budgeted funds for FY 2020-2022 will be dedicated to the physical activity, nutrition and obesity prevention action steps listed below. SRMC's community benefit program metrics will be tracked to determine the number of programs and participants reached.

**- SRMC's Chronic Disease/Obesity Prevention Initiatives to Support the 2019-2022 CHIP**

<b>Priority #1: Chronic Disease/ Obesity Prevention</b>		
<b>Strategy:</b> Diabetes Prevention Program (DPP) and prediabetes screening and referral		
<b>Goal:</b> Increase awareness of diabetes prevention and self-management		
<b>Priority Population:</b> Adults and vulnerable populations		
<b>Objective:</b> By July 1, 2022, increase county enrollment in diabetes education program by a target of 5%.		
<b>Action Steps &amp; Timeline</b>	<b>Indicator(s) to measure impact of strategy:</b>	<b>Lead Agency</b>
<b>Year 1 (By 7/1/20):</b> Continue to implement diabetes education programs carried over from the 2016-2019 CHIP. - Create an inventory of current diabetes education programs in the county. Determine the baseline number of organizations in the county that currently screen for prediabetes. - Consider developing a marketing plan to increase program participation. - Determine the baseline number of organizations in the county that currently screen for prediabetes. - Raise awareness of prediabetes screening, identification and referral through dissemination of the <i>Prediabetes Risk Assessment</i> (or a similar assessment) and/or the <i>Prevent Diabetes STAT Toolkit</i> .	1. Diabetes: Percent of adults who have been told by a health professional they have diabetes (BRFSS Baseline: 13%, 2019 CHNA) 2. Prediabetes screening: Number of patients screened for prediabetes - Not currently available via SHIP	Col. County Health District  E. Liverpool City Health Department  Salem City Health District
<b>Year 2 (By 7/1/21):</b> Continue efforts from years 1. - Increase enrollment in diabetes education programs toward target of 5%. - Partner with local organizations to administer the screening and/or raise awareness of prediabetes. - Promote and market free/reduced cost screening events within the county (ex: health fairs, hospital screening events, etc.).	2. Obesity: Percent of adults that report BMI greater than or equal to 30 (BRFSS Baseline: 38%. 2019 CHNA)	E. Liverpool City Hospital  Salem Regional Medical Center
<b>Year 3 (By 7/1/22):</b> Continue efforts from years 1 and 2. - Increase awareness of prediabetes screening, identification and referral. - Increase the number of individuals within Columbiana County that are screened for diabetes toward target of 5%. - If feasible, increase number of organizations that screen for prediabetes.		
<b>Type of Strategy:</b> - Public health system, prevention and health behaviors -Healthcare system and access		
<b>Strategy identified as likely to decrease disparities?</b> Yes		
<b>Resources to address strategy:</b> SRMC will provide dedicated resources and staff to support prediabetes/diabetes awareness education and screening events within its Service Area.		



Priority #1: Chronic Disease/ Obesity Prevention 		
Strategy: Community physical activities for children and families		
Goal: Increase physical activity.		
Priority Population: Adults, children and vulnerable populations		
Objective: By July 1, 2022, at least 3 walks and/or organized physical activities will have a child, family or senior component.		
Action Steps & Timeline	Indicator(s) to measure impact of strategy:	Lead Agency
<b>Year 1 (By 7/1/20):</b> Continue to promote organized physical activities carried over from the 2016-2019 CHIP, within SRMC's Service Area and in collaboration with community partners, i.e. "Walk With a Doc" programs - Encourage integration of child, family and senior components into current and future races and other organized physical activities within the county. Note: SRMC has conducted 3 community health walks in Summer of 2019, fulfilling this requirement for Year 1, which also included physician education	1. Obesity: Percent of adults that report BMI $\geq$ 30 (BRFSS Baseline: 38%. 2019 CHNA)   2. Columbiana Cty. 3 <sup>rd</sup> grade students classified as obese or overweight (baseline: 35.8%, 2016 Akron Children's Hospital Mahoning Valley Community Health Needs Assessment)	East Liverpool City Hospital  Salem Regional Medical Center
<b>Year 2 (By 7/1/21):</b> Increase child, family and senior participation at organized physical activity events by 5%.		
<b>Year 3 (By 7/1/22):</b> Increase child, family and senior participation at organized physical activity events by 10%.		
Type of Strategy: - Public health system, prevention and health behaviors		
Strategy identified as likely to decrease disparities? Yes, but not SHIP identified		
Resources to address strategy: SRMC will continue to provide resources, staff and physician support for organized physical activities within the county and encourage the involvement of children, families and seniors.		

Priority #1: Chronic Disease/ Obesity Prevention 		
Strategy: Awareness and access of existing health care services on preventive care		
Goal: Increase awareness of health care services		
Priority Population: Adults and vulnerable populations		
Objective: By July 1, 2022, one new community outreach initiative will be implemented to increase awareness and access of existing health care services.		
Action Steps & Timeline	Indicator(s) to measure impact of strategy:	Lead Agency
<b>Year 1 (By 7/1/20):</b> Coordinate efforts between SRMC and other community providers to increase community outreach and education on available preventive health services (i.e., free or at a reduced cost). - Offer and promote cancer screenings at the hospital and other health care organizations (lung/bronchus, colorectal, mammography, etc.). SRMC will offer a minimum of 1 free/reduced cost cancer screening and 1 cancer prevention activity per year, in tandem with the Commission on Cancer (CoC) requirement - Increase community education on the importance of preventive health care, awareness of health care services, cancer prevention and discontinuing tobacco use.	1. Colorectal cancer screening: Adults who had a colorectal cancer screening in the past 5 years (BRFSS Baseline: 33%, 2019 CHNA)  2. Lung cancer screening: Adults who had a lung cancer screening in the past 3 years (BRFSS Baseline: 3%. 2019 CHNA)	SRMC & Columbiana County Health Partners
<b>Year 2 (By 7/1/21):</b> Continue community education, screening and outreach efforts as above.	3. Breast cancer screening: Women who had a screening mammogram in past year BRFSS Baseline: 55%, 2019 CHNA)	
<b>Year 3 (By 7/1/22):</b> Increase efforts from years 1 and 2.		
Type of Strategy: - Public health system, prevention and health behaviors - Healthcare system and access		
Strategy identified as likely to decrease disparities? Yes		
Resources to address strategy: SRMC has an established annual budget and physicians/staff dedicated to fulfilling CoC-related cancer screening and prevention activities.		

**- SRMC's Chronic Disease/ Obesity Prevention Initiatives Beyond the Scope of 2019-2022 CHIP:**

Priority #1: Chronic Disease/ Obesity Prevention		
Strategy: Increase nutrition education about and access to healthy eating choices for adults and youth		
Goal: Increase awareness of healthy food choices and good nutrition		
Priority Population: Adults, youth and vulnerable populations		
Objective: By July 1, 2022, one new community outreach initiative will be implemented to increase awareness and access of healthy food choices for adults and youth		
Action Steps & Timeline	Indicator(s) to measure impact of strategy	Lead Agency
<p><b>Year 1 (By 7/1/20):</b> Coordinate efforts between SRMC and other community providers to increase community outreach and education about healthy food choices.</p> <ul style="list-style-type: none"><li>- Provide minimum of 1 community presentation that includes nutrition education; Distribute healthy recipes/nutrition information at major community events. Begin preparations to host a healthy meal preparation class for vulnerable populations in Year 2.</li><li>- Enhance access to school-based programs promoting nutrition and physical activity in collaboration with the Coordinated Action for School Health (CASH) Coalition through annual community benefit grant funding.</li></ul>	<p>1. Obesity: Percent of adults that report BMI <math>\geq</math> 30 (BRFSS Baseline: 38%. 2019 CHNA)</p> <p>2. Columbiana Cty. 3<sup>rd</sup> grade students classified as obese or overweight (baseline: 35.8%, 2016 Akron Children's Hospital Mahoning Valley CHNA)</p>	SRMC
<p><b>Year 2 (By 7/1/21):</b> Continue community education &amp; outreach efforts as above.</p>		
<p><b>Year 3 (By 7/1/22):</b> Increase efforts from years 1 and 2.</p>		
Type of Strategy: -Public health system, prevention and health behaviors - Healthcare system and access		
Strategy identified as likely to decrease disparities? Yes		
Resources to address strategy: SRMC has established annual community benefit budget to support community obesity prevention education and school health initiatives within its Service Area.		





**B. Priority #2: Mental Health and Addiction (Substance Use)**

**- Description of Need:** The most frequently identified mental health and substance abuse needs in the CCHNA included mental health and substance abuse treatment services. The use of illegal drugs, especially related to opioid use was listed as a problem that is impacting the social determinants of community health. Participants indicated that more resources should be devoted to drug prevention activities and stronger law enforcement and judicial actions against offenders. More drug testing was also identified by several focus group participants as a future action that should be pursued, and they noted that medication abuse/misuse is a rising trend that needs to be closely monitored. According to stakeholders, the predominant and underlying factors of poverty and lack of education are major determinants of the mental health issues currently seen in Columbiana County; and several stakeholders stated that there is a need for additional mental health services in the County. They recommended that action needs to be taken to bring more awareness and prevention to this topic and that more psychiatrists and treatment alternatives are needed to provide mental health care.

**SRMC's Mental Health & Substance Abuse Prevention Goal:** To serve as a community partner in improving access to mental health and substance abuse treatment services through membership on the ADAPT and CASH Coalitions, as well as facilitating the coordination of and access to community-based, post-acute treatment resources.

**Indicator/Measurable Outcome:** - Budgeted funds for FY 2020-2022 will be dedicated to the mental health and substance abuse prevention and treatment action steps listed below.  
 - SRMC's community benefit program metrics will be tracked to determine the number of programs and participants reached.



Priority #2: Mental Health and Addiction (Substance Use) 		
Strategy: Integrate information about depression and suicide screening and treatment in primary care curriculum 		
Goal: Increase provider resources and support regarding mental health and/or substance abuse issues		
Priority Population: Adults, youth, vulnerable populations		
Objective: By July 1, 2022 provide mental health resources and training to at least 50% of Columbiana County providers on how to better support their efforts in providing better care for their patients with mental health and/or substance abuse issues.		
Action Steps &Timeline	Indicator(s) to measure impact of strategy	Lead Agency
<p><b>Year 1 (By 7/1/20):</b> Work with ER, primary care providers, or office staff to assess what information and/or materials they are lacking to provide better care for patients with mental health issues.</p> <ul style="list-style-type: none"><li>- Continue to provide post-discharge community support and follow-up to patients at high-risk for suicide ideation.</li><li>- Limit access to prescription and non-prescription medications by continuing support of the DEA’s medication take back events and drop-off lock-boxes.</li></ul>	<p>1. Suicide deaths: Number of deaths due to suicide per 100,000 populations (age-adjusted) (baseline: 17.8 for Columbiana County, 2017 ODH Data Warehouse) </p> <p>2. Suicide ideation (adult): Percent of adults who report that they ever seriously considered attempting suicide within the past 12 months (baseline: 4%, 2019 CHNA) </p> <p>3. Youth who attempted suicide one or more times (baseline: 20%, 2018 Columbiana County Profiles of Student Life: Attitudes and Behavioral Survey)</p>	Mental Health & Recovery Services Board  East Liverpool City Hospital  Salem Regional Medical Center
<p><b>Year 2 (By 7/1/20):</b> Offer depression and suicide-specific trainings and/or education for ER, primary care physicians, and office staff to provide better care for patients and/or clients with mental health issues.</p> <ul style="list-style-type: none"><li>- Continue to provide post-discharge community support and follow-up to patients at high-risk for suicide ideation</li><li>- Limit access to prescription and non-prescription medications by continuing support of the DEA’s medication take back events and drop-off lock-boxes.</li></ul>	<p>4. Youth who felt depressed most or all of the time within the last month (baseline: 26%, 2018 Columbiana County Profiles of Student Life: Attitudes and Behavioral Survey)</p>	
<p><b>Year 3 (By 7/1/20):</b> Offer additional trainings to reach at least 50% of providers in Columbiana County.</p> <ul style="list-style-type: none"><li>- Continue to provide post-discharge community support and follow-up to patients at high-risk for suicide ideation.</li><li>- Limit access to prescription and non-prescription medications by continuing support of the DEA’s medication take back events and drop-off lock-boxes.</li></ul>		
Type of Strategy: - Public health system, prevention and health behaviors    - Healthcare system and access		
Strategy identified as likely to decrease disparities? Yes, but not SHIP identified		
<p><b>Resources to address strategy:</b> SRMC will continue to coordinate Case Management services in the ED and inpatient units and potential community-based intervention strategies targeting high-level resource users and coordination of care for patients at high-risk for suicide ideation. SRMC will continue to host and promote the semi-annual DEA drug take back event.</p> <p><b>Year 2:</b> Continue the work of Year 1 and cultivate a workgroup of community providers to establish goals that increase primary care education and resources and maximize community coordination of services.</p> <p><b>Year 3:</b> Continue the work of Year 1 and 2 to increase resources and maximize community coordination of services.</p>		

Priority #2: Mental Health and Addiction (Substance Use)		
Strategy: Universal school-based suicide awareness and education programs		
Goal: Increase awareness of suicide prevention among youth.		
Priority Population: Youth		
Objective: By July 1, 2022 all school districts will have at least one school-based suicide awareness and education program.		
Action Steps & Timeline	Indicator(s) to measure impact of strategy:	Lead Agency
<b>Year 1 (By 7/1/20):</b> Continue to promote and implement the following programs in Columbiana County schools: <ul style="list-style-type: none"><li>• Signs of Suicide (SOS)</li><li>• QPR (Question, Persuade, Refer)</li><li>• Red Flags</li></ul> If applicable, expand current programming to additional districts or grade levels.	1. Suicide deaths: Number of deaths due to suicide per 100,000 populations (age-adjusted) (baseline: 17.8 for Columbiana County, 2017 ODH Data Warehouse)	Columbiana County Mental Health & Recovery Services Board
<b>Year 2 (By 7/1/20):</b> Continue efforts from years 1.	2. Youth who attempted suicide one or more times (baseline: 20%, 2018 Columbiana County Profiles of Student Life: Attitudes and Behavioral Survey)	Columbiana County Educational Service Center/CASH Coalition (SRMC is member of CASH Coalition)
<b>Year 3 (By 7/1/20):</b> Continue efforts from years 1 and 2.	3. Youth who felt depressed most or all of the time within the last month (baseline: 26%, 2018 Columbiana County Profiles of Student Life: Attitudes and Behavioral Survey)	
Type of Strategy: - Healthcare system and access		
Strategy identified as likely to decrease disparities? Yes, but not SHIP identified		
<b>Resources to address strategy:</b> SRMC will increase community awareness and education regarding mental health and substance abuse issues and trends by serving as a community advocate for greater access to mental health and substance abuse resources through membership on the ADAPT and CASH Coalitions; and facilitating the delivery of evidence-based programs to Columbiana County school districts.		
<b>Year 1:</b> Provide funding and staff support through a minimum of 1 local school's mini-grant and support of the asset development surveys and community data roll-out as a community awareness campaign to increase education and awareness of youth suicide and depression.		
<b>Year 2:</b> Continue work of Year 1 and support mini-grant funding for a minimum of one local school's mini-grant, involve youth in planning awareness programs/workshops on different "hot topics" and risky behavior trends. Solicit media coverage for all programs/workshops		
<b>Year 3:</b> Continue work of Year 1 and 2		

#### **- SRMC's Mental Health and Addiction Initiatives Beyond the Scope of 2019-2022 CHIP:**

Salem Regional Medical Center operates the Behavioral Medicine and Wellness Center as an intensive outpatient and partial hospitalization program designed to meet individual and group needs for mental health services in Columbiana and other surrounding counties.

SRMC's professionally certified social workers will continue to support patient treatment and coordination of care through all of the appropriately identified treatment plans for inpatients and outpatients.

The Medical Center does not offer specific programs to address "substance abuse" issues in the community, but appropriate staff members and providers can refer patients to professionally recognized providers in the region.

#### **C. Priority #3: Access to Medical Care**

**Description of Need:** Columbiana County is identified as an underserved area with disparities related to being an Appalachian county, and has a high ratio of the population to primary care physicians, dentists and mental health providers; indicating the potential for greater access to care challenges. Barriers to health care access at the level of the individual and community were identified consistently across the

CCHNA process and included deficits in income, education, lack of health insurance, lack of providers and lack of transportation.

**SRMC's Access Goal:** To reduce barriers to health care through the collaborative recruitment of providers to underserved areas, explore alternate delivery of care models, and increase health literacy interventions to increase patients' health-related knowledge.

**Indicator/Measurable Outcome:** - Budgeted funds for FY 2020- 2022 will be dedicated to decreasing barriers to access in the action steps listed below.

- SRMC's community benefit program metrics will be tracked to determine the number of programs provided and participants reached.

**SRMC's Access to Care and Cross-Cutting Initiatives Beyond the Scope of 2019-2022 CHIP:**

Salem Regional Medical Center will implement the following evidence-based practices:


**- Provide Higher Education Financial Incentives for Health Professionals Serving Underserved**

**Areas:** Financial incentives such as scholarships, educational loans with a service option, and loan repayment or forgiveness programs encourage health care providers to serve in rural or other underserved areas. The expected beneficial outcome is increased availability of healthcare professionals in underserved areas, increased access to care and likeliness to decrease disparities:


[www.countyhealthrankings.org/policies/higher-education-financial-incentives-health-professionals-serving-underserved-area](http://www.countyhealthrankings.org/policies/higher-education-financial-incentives-health-professionals-serving-underserved-area).

Priority #3: Improving Access to Care		
<b>Strategy:</b> Provide Higher Education financial incentives to recruit key health professionals within SRMC's rural/underserved Service Area		
<b>Goal:</b> Increase availability of healthcare professionals		
<b>Priority Population:</b> Adults, vulnerable populations		
<b>Objective:</b> Continue recruitment efforts for key healthcare professionals, including offering higher education financial incentives		
Action Steps & Timeline	Indicator(s) to measure impact of strategy:	Lead Agency
<b>Year 1 (By 7/1/20):</b> Continue to recruit key healthcare professionals in accordance with community needs. Work with higher educational organizations to identify collaborative recruitment/placement opportunities	Ratio of PCPs to Population (baseline: 2250:1 for Columbiana County, 2019 RWJF County Health Rankings )	SRMC
<b>Year 2 (By 7/1/21):</b> Continue efforts from years 1.		
<b>Year 3 (By 7/1/22):</b> Continue efforts from years 1 and 2.		
<b>Type of Strategy:</b> - Healthcare system and access		
<b>Strategy identified as likely to decrease disparities?</b> Yes, but not SHIP identified		
<b>Resources to address strategy:</b> SRMC will continue to provide funding and staffing resources to the recruitment of key healthcare professionals within its Service Area, based on identified community needs		

**- Telemedicine:** The use of telecommunications technology to remotely deliver consultative, diagnostic and health care treatment services can supplement health care services for patients who would benefit from frequent monitoring or provide services to individuals in areas with limited access to care. Once telemedicine technology is in place, providing care through telemedicine may be less costly than standard medical care. However, high initial implementation costs and limited payment policies can be barriers to establishing effective and efficient telemedicine programs. Telemedicine's expected beneficial outcome is to increase local access to care, reduce mortality and improve health outcomes; while likely decreasing disparities: [www.countyhealthrankings.org/policies/telemedicine](http://www.countyhealthrankings.org/policies/telemedicine).

Priority #3: Improving Access to Care 		
<b>Strategy:</b> Develop feasibility of using and/or expanding telecommunications technology to remotely deliver consultative, diagnostic and health care treatment services		
<b>Goal:</b> Increase local access to healthcare professionals		
<b>Priority Population:</b> Adults, vulnerable populations		
<b>Objective:</b> Increase local access to care and improve health outcomes		
Action Steps & Timeline	Indicator(s) to measure impact of strategy:	Lead Agency
<b>Year 1 (By 7/1/20):</b> Evaluate feasibility of and resources required for implementing telemedicine services	New or enhanced access to telemedicine-related technology	SRMC
<b>Year 2 (By 7/1/21):</b> Continue efforts from years 1.		
<b>Year 3 (By 7/1/22):</b> Continue efforts from years 1 and 2.		
<b>Type of Strategy:</b> - Healthcare system and access		
<b>Strategy identified as likely to decrease disparities?</b> Yes		
<b>Resources to address strategy:</b> SRMC will continue to provide staff support to evaluate the feasibility of developing telemedicine services within SRMC's Service Area, based on identified community needs and available resources		

**- Addressing Health Literacy through Patient and Family Engagement:** SRMC continues to review its discharge process to reduce hospital readmissions and post-hospital ED visits, along with strengthening its medication education and communication process for patients, which is likely to decrease disparities among vulnerable populations. Interventions that combine various approaches, such as enhancing written materials and interpersonal interactions appear to increase patients' comprehension and appropriate health care use, and promote improved communication between patients and providers. Evidence-based discharge planning tools used include the Agency for Healthcare Research and Quality's (AHRQ) *Guide to Patient and Family Engagement in Hospital Quality and Safety* and the Institute for Healthcare Improvement's SMART protocol: [www.ahrq.gov/professionals/system/hospital/engagingfamilies/guide](http://www.ahrq.gov/professionals/system/hospital/engagingfamilies/guide).

Priority #3: Improving Access to Care 		
Strategy: Improve health literacy through improved discharge planning and medication education		
Goal: Improve health outcomes for vulnerable populations		
Priority Population: Adults, vulnerable populations		
Objective: Improve patients' ability to understand make appropriate health decisions for improved outcomes		
Action Steps & Timeline	Indicator(s) to measure impact of strategy	Lead Agency
Year 1 (By 7/1/20): Continue to evaluate and implement evidence-based discharge planning and pharmacy literacy tools and support processes to decrease patient readmissions and post-hospital ED visits.	- Readmission rates (baseline: 9.93% Medicare, Jan.-Sept. 2019)	SRMC
Year 2 (By 7/1/21): Continue efforts from years 1.		
Year 3 (By 7/1/22): Continue efforts from years 1 and 2.		
Type of Strategy: - Healthcare system and access		
Strategy identified as likely to decrease disparities? Yes		
Resources to address strategy: SRMC will continue to provide staff and resource support to enhance discharge planning processes and house-wide communication and training efforts		

Priority #3: Improving Access to Care		
Strategy: Cultural competence training for healthcare professionals		
Goal: Increase cultural understanding and skills		
Priority Population: Adults, vulnerable populations		
Objective: Collaborate with community providers to adopt culturally competent principles, policies and/or practices within their organizations by July 1, 2022		
Action Steps & Timeline	Indicator(s) to measure impact of strategy	Lead Agency
<b>Year 1 (By 7/1/20):</b> Assess county data related to demographics, determinants of health and health equity, measures of mortality, health behaviors, etc. - Research evidence-based cultural competency training opportunities with other community providers, such as Bridges Out of Poverty; and AHRQ's Improving Cultural Competence to Reduce Health Disparities	Cultural understanding and skills: Not currently available via SHIP or CHIP  The number of Healthcare professionals trained in Bridges Out of Poverty. 2018 number trained as baseline	SRMC & The Columbiana County Health Partners
<b>Year 2 (By 7/1/21):</b> Educate a minimum of 1-2 health care providers and/or health care organizations on county demographics and the importance of becoming culturally competent (program focus may include: culture, language and health literacy). - Encourage organizations to adopt culturally competent principles, policies and/or practices within their organization. - Consider developing and providing cultural competency trainings.		
<b>Year 3 (By 7/1/22):</b> Continue efforts from years 1 and 2.		
<b>Priority area(s) the strategy addresses:</b> <div><input checked="" type="checkbox"/> Mental Health and Addiction</div> <div><input checked="" type="checkbox"/> Chronic Disease</div>		
Strategy identified as likely to decrease disparities? Yes		
Resources to address strategy: None noted.		

**Other: Improve community-based coordination and delivery of services through implementation of Columbiana County's Health Improvement Plan (CCHIP)**

- **Year 1:** Select appropriate strategies for intervention that fall within SRMC's mission and role as a healthcare leader and community partner to reduce chronic disease, prevent obesity, improve access to mental health care, reduce substance abuse, and improve access to care. Meet at least quarterly with CCHIP workgroup to assess progress and adjust work plan accordingly.
- **Year 2:** Continue work of year 1 and meet with CCHIP workgroup to evaluate outcomes at least semi-annually.
- **Year 3:** Continue work of year 1 and 2, and begin preparations for conducting next community health needs assessment.

#### D. Priority 4: Cross-Cutting Factor: Public Health System, Prevention and Health Behaviors

Cross-Cutting Factor: Public Health System, Prevention and Health Behaviors		
Strategy: Mass-reach communications		
Goal: Reduce tobacco use and vaping.		
Priority Population: Adults, youth, vulnerable populations		
Objective: By July 1, 2022, Columbiana Cty. Health Partners will launch at least 2 mass-reach communication campaigns.		
Action Steps & Timeline	Indicator(s) to measure impact of strategy:	Lead Agency
<p><b>Year 1 (By 7/1/20):</b> Consider implementing the following mass-marketing strategies:</p> <ul style="list-style-type: none"><li>• Share messages and engage audiences on social networking sites like Facebook and Twitter.</li><li>• Deliver messages through different websites and stakeholders communications.</li><li>• Generate free press through public service announcements.</li><li>• Pay to place adds on TV, radio, billboards, online platforms and/or print media.</li></ul> <p>Strategies may focus on motivating tobacco users to quit, protecting people from the harm of secondhand smoke exposure, and preventing tobacco use and vaping initiation.</p> <p><b>Note:</b> SRMC provided social media posts re: vaping in Summer 2019</p>	Percentage of adults who are current smokers (2016) (CHR) (Baseline: 22% 2019 CHR)	Columbiana County Health District
<p><b>Year 2 (By 7/1/21):</b> Continue efforts from year 1.</p> <p>Promote and raise awareness of the Ohio Tobacco Quit Line.</p> <p>Promote the available cessation services and programs in the county.</p>		East Liverpool City Health Department
<p><b>Year 3 (By 7/1/22):</b> Continue efforts from years 1 and 2.</p> <p>Implement one mass-reach communication strategy.</p>		Salem City Health District
<b>Priority Areas the Strategy Addresses:</b> -Mental Health and Addiction -Chronic Disease		
Strategy identified as likely to decrease disparities? No		
Resources to address strategy: SRMC's Public Relations and Marketing staff's resources		

#### VIII. NEEDS NOT ADDRESSED IN IMPLEMENTATION PLAN

SRMC's 2019-2022 Implementation Plan advocates strategies to address many of Ohio's top health priorities as listed on page 7; and also integrates and coordinates SRMC's resources to help achieve the goals that are outlined in Columbiana County's 2019-2022 Health Improvement Plan.

However, the prevalence of clinical health issues is also frequently related to: residents' access to health services, environmental and behavioral factors that impact health, and the awareness of and personal choices of consumers. Columbiana County has a high percentage of poverty among children, families, and the general population as compared to other U.S. counties; along with a high unemployment rate, low health literacy and low proportion of adults with a college degree as compared to other U.S. counties.

The top environmental needs identified in the Community Survey portion of the CCHNA included not enough money, lack of access to employment/better jobs, safe water/clean air/fracking/agricultural run-off, poor housing conditions and crime/violence. In addition, focus group participants identified the weather, chemical waste and unemployment as environmental determinants that impact community health.



Stakeholders interviewed cited multi-faceted and intertwined demographic and socio-economic issues related to income, the poor economy, drug abuse, lack of education, and unemployment as key environmental drivers of the unhealthy status of the community.

Each of the needs listed above could be addressed by various independent, county, state and/or federal organizations. However, due to their societal magnitude and SRMC's limited resources and capacity to meaningfully impact the environment and economic foundation of the county, SRMC has chosen to allocate significant resources to the priority health needs which yield the greatest opportunities to affect a positive change, as outlined in this 2016-2019 Implementation Plan.

A summary of the environmental and social determinants of health needs not addressed in SRMC's Implementation Plan include:

<b>Physical Environment</b> (Natural environment that impacts health)	<ul style="list-style-type: none"> <li>- Quality of air and water supply</li> <li>- Septic systems, mold and environmental hazards</li> </ul>
<b>Certain Social Determinants of Health</b>	<ul style="list-style-type: none"> <li>- Poverty/generational poverty and dependence on financial assistance</li> <li>- Poor economy/lack of job opportunities</li> <li>- Lack of transportation</li> <li>- Lack of adequate housing</li> <li>- Single-parent households</li> <li>- Lack of parenting skills</li> <li>- Growing number of non-traditional families</li> <li>- Low educational attainment</li> <li>- Lack of personal accountability/motivation</li> </ul>


In addition, there are several health indicators in which Columbiana County residents have exceeded state and national population health benchmarks. Recognizing that Salem Regional Medical Center is not the only medical resource in the Hospital's Service Area, Hospital leadership felt that the most effective strategy to further decrease the prevalence of clinical health issues and improve population health is through a multi-faceted approach that:

- 1) Maintains current SRMC programs and services while evaluating their effectiveness
- 2) Evaluates new programs and services that are based in best practices and are proven effective at treating clinical health issues experienced by residents in the communities served by SRMC
- 3) Continues to explore partnership opportunities with external organizations to implement best practices that effectively and efficiently address regional health issues

## IX. PROGRESS AND MEASURING OUTCOMES

Progress in meeting the priorities identified in SRMC's 2019-2022 Implementation Plan will be monitored via measurable indicators that are evaluated on a minimum of an annual basis by SRMC's Senior Leadership team, including an annual status update provided to the SRMC Board of Directors.

In addition, SRMC will be collaborating on the implementation of the Columbiana County Health Improvement Plan (CHIP), so that population health improvement initiatives and resources can be coordinated and integrated throughout the county. The CHIP Steering Committee, of which SRMC is a key member, will meet at least semi-annually for the first year of the CHIP's implementation and depending on the progress, may meet annually after that to evaluate and report outcomes. Action steps, accountable person/organization, and timelines will be reviewed at the end of each year by the Steering Committee; with revisions made to the CHIP accordingly. Beyond outcome evaluation, process evaluation will also be used on an ongoing basis to focus on how well action steps are being implemented.

The Columbiana County Health Partners will also continue to facilitate a community health needs assessment every three years to collect data for determining community needs and trends. Primary data will be collected for adults using national sets of questions to not only compare trends in Columbiana County, but also be able to compare to the state and nation. This data will serve as measurable outcomes for each priority area. Indicators have already been defined throughout this report and are identified with the  icon.

#### **APPENDIX I: Gaps and Strategies**

The following tables indicate mental health and addiction (substance use), chronic disease (obesity prevention), and access to health care gaps with potential strategies that were compiled by the Columbiana County Health Partners.

<b>Chronic Disease/Obesity Gaps</b>	<b>Potential Strategies</b>
<b>1. Diabetes specific education</b>	<ul style="list-style-type: none"> <li>- Focus on nutrition education/ community-based education</li> <li>- Consider implementing a program or campaign on developing cooking skills</li> <li>- Consider the National Diabetes Prevention Program (DPP)</li> </ul>
<b>2. Compliance is an issue among people with chronic disease(s) (i.e., high blood pressure, high blood cholesterol, obesity, diabetes)</b>	<ul style="list-style-type: none"> <li>- Focus on nutrition education and community-based education</li> <li>- Consider implementing a program or campaign on developing cooking skills</li> </ul>
<b>3. Asthma readmission for chronic obstructive pulmonary disease (COPD) in the aging population</b>	<ul style="list-style-type: none"> <li>- Asthma prevention education</li> </ul>
<b>4. Lack of access to healthy foods</b>	<ul style="list-style-type: none"> <li>- Research ways to incorporate healthy, fresh foods in local food pantries (rather than shelf-stable foods)</li> <li>- Determine the feasibility of getting farmers markets to accept SNAP/EBT</li> </ul>
<b>5. Low usage of WIC (Women, Infants, and Children Program) vouchers</b>	<ul style="list-style-type: none"> <li>- Increase more opportunities to use vouchers for healthier foods including cheese, yogurt and milk</li> </ul>
<b>6. Decrease in health screenings among Men</b>	<ul style="list-style-type: none"> <li>- Education for cancer prevention (lung/bronchus and colorectal cancer)</li> <li>- Offer free services or screenings</li> </ul>
<b>7. Misconception surrounding signs &amp; symptoms of heart disease among the elderly, women and diabetics</b>	<ul style="list-style-type: none"> <li>- Consider developing messaging to educate the public on the signs and symptoms of heart disease</li> </ul>
<b>8. Lack of exercise/motivation</b>	<ul style="list-style-type: none"> <li>- Foster increased use of sidewalks/ school walking programs</li> <li>- Consider implementing a county-wide safe streets program</li> <li>- Address the cultural aspects of being active – make it normal to exercise and participate in physical activity</li> </ul>



### ***Mental Health and Addiction/Substance Use***

<b>Gaps</b>	<b>Potential Strategies</b>
<b>1. Access to mental health providers</b>	<ul style="list-style-type: none"> <li>- Change funding policies</li> <li>- Increase recruitment for providers who accept Medicaid patients</li> </ul>
<b>2. Stigma/community perception of substance use and mental health</b>	<ul style="list-style-type: none"> <li>- Continue to implement Mental Health First Aid (MHFA) trainings throughout the county</li> <li>- Continue to implement Project Dawn</li> <li>- Peer supporter training - <i>See something, say something</i></li> <li>- Continue to market and promote the Run Away from Drugs 5K</li> </ul>
<b>3. Parent education/parental skills and life skills</b>	<ul style="list-style-type: none"> <li>- Community educational seminars and classes</li> </ul>
<b>4. Lack of residential treatment facilities, specifically among youth</b>	<ul style="list-style-type: none"> <li>- Determine the feasibility of increasing the number of detox facilities in county</li> <li>- Gateway currently Ohio Medicaid (detox and residential)</li> <li>Mental health crisis destabilization</li> </ul>
<b>5. Trauma education</b>	<ul style="list-style-type: none"> <li>- Pax Good Behavior Game – currently rolling out PAX tools and have three community educators</li> <li>- Consider developing Trauma Informed Care brochures or 1-page handouts defining trauma and where to find help</li> </ul>

### ***Access to Health Care Gaps***

<b>Gaps</b>	<b>Potential Strategies</b>
<b>1. Transportation</b>	<ul style="list-style-type: none"> <li>- Work with the mobility manager in the county</li> <li>- Look at what other communities (with similar demographics of Columbiana) have done to improve public transportation within their community (i.e. use of buses in West Virginia)</li> </ul>
<b>2. Provider location and availability</b>	<ul style="list-style-type: none"> <li>- Consider adapting hours so they are more suitable for patients' needs/more convenient hours</li> </ul>
<b>3. Lack of prenatal care and family planning</b>	<ul style="list-style-type: none"> <li>- Continue to work with Community Action Agency (CAA)</li> <li>- Increase family planning efforts and community engagement and outreach</li> <li>- Increase access to OB/GYNs (currently 2 OBGYN's in county)</li> <li>- Consider recruiting advanced practice providers (i.e., nurse practitioners)</li> </ul>
<b>4. Insurance coverage</b>	<ul style="list-style-type: none"> <li>- Increase education on how to obtain insurance</li> <li>- Increase community outreach and bring services to the uninsured</li> </ul>
<b>5. Education on available vaccines</b>	<ul style="list-style-type: none"> <li>- Send home updated CDC vaccination schedule in the book bag to parents</li> <li>- Update community and educate adults on new recommendations for vaccines like Tdap, HPV (human papillomavirus), flu, etc.</li> </ul>

## APPENDIX II: Columbiana County Community Resources

Agency	Address	City	State	Zip	Phone Number
<b>Assistance Programs</b>					
A.I.D., Inc. (Action, Information, Direction)		Salem	OH	44460	330-332-1373
Catholic Charities Regional Agency Emergency Assistance	319 West Rayen Avenue	Youngstown	OH	44502	330-744-3320 800-670-6089
Columbiana County Department of Job & Family Services	7989 Dickey Drive Suite 2	Lisbon	OH	44432	330-424-1471
Columbiana County Veteran's Service Commission	7989 Dickey Drive Suite 1	Lisbon	OH	44432	330-424-7214
Columbiana Meals on Wheels	865 East Park	Columbiana	OH	44408	330-482-0366
Community Action Agency of Columbiana County	7880 Lincole Place	Lisbon	OH	44432	330-424-7221
Family & Community Services, Inc.	705 Oakwood Street Suite 221	Ravenna	OH	44266	330-297-7027
Mahoning-Youngstown Community Action Partnership (MYCAP)	1325 5th Avenue	Youngstown	OH	44504	330-747-7921
Making Kids Count	7178 West Boulevard Suite E	Youngstown	OH	44512	330-758-3434
United Way Services of Northern Columbiana County FamilyWize-Discount Drug Program	713 East State Street	Salem	OH	44460	330-337-0310
WIC (Women, Infants, Children) Columbiana County	7876 Lincole Place	Lisbon	OH	44432	330-424-7293
<b>Assisted Living</b>					
Copeland Oaks	800 South 15th Street	Sebring	OH	44672	330-938-1093
Crossroads at Beaver Creek	13280 Echo Dell Road	East Liverpool	OH	43920	330-385-2211
Grace Woods Senior Living, LLC	730 Youngstown Warren Road	Niles	OH	44446	330-652-4177
Grace Woods Senior Living of Salem, LLC	1166 Benton Road	Salem	OH	44460	330-332-1104
Senior Center of Mahoning County	1110 5th Avenue	Sebring	OH	44672	330-744-5071
Whispering Pines Village	937 East Park Avenue	Columbiana	OH	44408	844-305-8813
<b>Children's Services</b>					
Akron Children's Hospital Beeghly Campus	6505 Market Street	Boardman	OH	44512	330-746-8100
Akron Children's Hospital Pediatrics Lisbon	330 North Market Street	Lisbon	OH	44432	330-424-9866
Alta Behavioral Healthcare Early Childhood Mental Health	711 Belmont Avenue	Youngstown	OH	44502	330-793-2487
Alta Head Start	142 Javit Court	Austintown	OH	44515	330-736-0071
Belmont Pines Hospital Children's Behavioral Health Hospital and Residential Treatment Center	615 Churchill-Hubbard Road	Youngstown	OH	44505	330-759-2700 800-423-5666
Boy Scouts of America Buckeye Council	2301 13th Street NW	Canton	OH	44708	330-580-4272 800-589-9812
Camp Fire Tayanoka		East Liverpool	OH	43920	330-385-0645
Columbiana County Department of Job & Family Services	7989 Dickey Drive Suite 2	Lisbon	OH	44432	330-424-1471
Columbiana County Educational Service Center	38720 Saltwell Road	Liston	OH	44432	330-424-9591
Columbiana County Help Me Grow-Columbiana County Board of Developmental Disabilities	34947 State Route 172	Lisbon	OH	44432	330-424-0288
Columbiana County Juvenile Court Charles A. Pike Center	260 West Lincoln Way	Lisbon	OH	44432	330-424-4071
Community Action Agency of Columbiana County	7880 Lincole Place	Lisbon	OH	44432	330-424-7221
Community Action Agency of Columbiana County Community Health Center-East Liverpool	16687 Saint Clair Avenue, Suite 203	East Liverpool	OH	43920	330-386-7777
Community Action Agency of Columbiana County Community Health Center-Lisbon	7880 Lincole Place	Lisbon	OH	44432	330-424-5686
Community Action Agency of Columbiana County Salineville Community Health Center at Melhorn	103 West Main Street	Salineville	OH	43945	330-679-2640

Agency	Address	City	State	Zip	Phone Number
Community Resource Center	940 Pennsylvania Avenue	East Liverpool	OH	43920	330-385-1301
Counseling Center of Columbiana County	40722 State Route 154	Lisbon	OH	44432	330-424-9573
Counseling Center of Columbiana County East Liverpool Branch Office	15613 Pineview Drive Suite A	East Liverpool	OH	43920	330-386-9004
Counseling Center of Columbiana County Salem Branch Office	188 North Lincoln Avenue	Salem	OH	44460	330-332-1514
Easter Seals of Mahoning, Trumbull, and Columbiana	299 Edwards Street	Youngstown	OH	44502	330-743-1168
Family & Children First of Columbiana County	38720 Saltwell Rd	Lisbon	OH	44432	330-424-9591
Girl Scouts of North East Ohio- Youngstown	8580 South Avenue	Youngstown	OH	44514	330-652-5876 800-852-4474
Louis Tobin Attention Center	8363 County Home Rd.	Lisbon	OH	44432	330-424-9809
Making Kids Count	7178 West Boulevard Suite E	Youngstown	OH	44512	330-758-3434
Salem City Health District	230 North Lincoln Avenue #104	Salem	OH	44460	330-332-1618
Salem Comprehensive Pediatric Health Center	1076 East State Street	Salem	OH	44460	330-332-2710
Second Harvest Food Bank of Mahoning Valley BackPack food program		Youngstown	OH	44509	330-792-5522
United Way Services of Northern Columbiana County	713 East State Street	Salem	OH	44460	330-337-0310
United Way Services of Northern Columbiana County FamilyWize-Discount Drug Program	713 East State Street	Salem	OH	44460	330-337-0310
<b>Counseling and Mental Health Services</b>					
Alta Behavioral Healthcare	711 Belmont Avenue	Youngstown	OH	44502	330-793-2487
Belmont Pines Hospital Children's Behavioral Health Hospital and Residential Treatment Center	615 Churchill-Hubbard Road	Youngstown	OH	44505	330-759-2700 800-423-5666
Belmont Pines Hospital Children's Behavioral Health Hospital and Residential Treatment Center	615 Churchill-Hubbard Road	Youngstown	OH	44505	330-759-2700 800-423-5666
CAA Health & Behavioral Health Center at Lisbon	7880 Lincole Place	Lisbon	OH	44432	330-424-5686
CAA East Liverpool Campus Building #1	16480 St. Clair Ave.	East Liverpool	OH	44432	330-386-7777
CAA East Liverpool Campus Building #2	16494 St. Clair Ave	East Liverpool	OH	44432	330-386-7870
Catholic Charities Regional Agency	319 West Rayen Ave.	Youngstown	OH	44502	330-744-3320 800-670-6089
Catholic Charities Regional Agency Christina Center	115 East Washington Street	East Liverpool	OH	44432	330-420-0845
Catholic Charities Regional Agency Christina House (undisclosed domestic violence shelter)					24 hr Crisis Line: 330-420-0037
Cleveland Clinic Akron General Acute Care In-Patient Psychiatric Treatment	1 Akron General Avenue	Akron	OH	44307	330-344-6000
Columbiana County Mental Health and Recovery Services Board	27 Vista Drive	Lisbon	OH	44432	330-424-0195
Counseling Center of Columbiana County	40722 State Route 154	Lisbon	OH	44432	330-424-9573
Counseling Center of Columbiana County East Liverpool Branch Office	15613 Pineview Drive Suite A	East Liverpool	OH	43920	330-386-9004
Counseling Center of Columbiana County Salem Branch Office	188 North Lincoln Avenue	Salem	OH	44460	330-332-1514
East Liverpool City Hospital Behavioral Health Inpatient Center	425 West 5th Street	East Liverpool	OH	43920	330-386-3590
Family Recovery Center Administrative, Counseling & Criminal Justice Office	964 North Market Street	Lisbon	OH	44432	330-424-1468
Family Recovery Center- East Liverpool Office	416 Jackson Street	East Liverpool	OH	43920	330-424-1468
Family Recovery Center- Fleming House	1300 Rose Drive	Lisbon	OH	44432	330-420-3760
Family Recovery Center- Oxford House	320 Benton Road	Salem	OH	44460	330-337-7501
Family Recovery Center- Prevention Office	966 North Market Street	Lisbon	OH	44432	330-424-0531

Agency	Address	City	State	Zip	Phone Number
	Lower Level				
Family Recovery Center- Renaissance House	855 Newgarden Road	Salem	OH	44460	234-567-4746
Help Hotline Crisis Center, Inc.		Youngstown	OH	44501	330-424-7767 800-427-3606
Louis Stokes Cleveland VA Medical Center East Liverpool/Calcutta Multi-Specialty Outpatient Clinic	5655 State Route 170 Suite A	Calcutta	OH	43920	330-386-4303
National Alliance on Mental Illness (NAMI) of Columbiana County	42549 North Avenue	Lisbon	OH	44432	330-424-5772
Neil Kennedy Recovery Clinic	2151 Rush Boulevard	Youngstown	OH	44507	330-744-1181 800-228-8287
Behavioral Medicine and Wellness Center Intensive Outpatient Mental Health Services	Salem Regional Medical Center 2020 E. State Street, Suite J	Salem	OH	44460	330-337-4935
St. Elizabeth Youngstown Hospital Acute Care In-Patient Psychiatric Treatment	1044 Belmont Avenue	Youngstown	OH	44501	Main Number: 330-746-7211
Dr. Katherine Stutzman, Ph.D.	425 West Fifth Street	East Liverpool	OH	43920	330-386-2047
Summa St. Thomas Hospital Behavioral Health Services Acute Care In-Patient Psychiatric Treatment	444 North Main Street	Akron	OH	44310	330-379-9841
<b>Drug and Alcohol Services</b>					
CAA East Liverpool Campus Building #1	16480 St. Clair Ave.	East Liverpool	OH	44432	330-386-7777
Counseling Center of Columbiana County	40722 State Route 154	Lisbon	OH	44432	330-424-9573
Counseling Center of Columbiana County East Liverpool Branch Office	15613 Pineview Drive Suite A	East Liverpool	OH	43920	330-386-9004
Counseling Center of Columbiana County Salem Branch Office	188 North Lincoln Avenue	Salem	OH	44460	330-332-1514
Crisis Intervention and Recovery Center, Inc. Crisis Intervention Center Detoxification Unit	832 McKinley Avenue NW	Canton	OH	44703	Crisis Hotline: 330-452-6000
Crisis Intervention and Recovery Center, Inc. Recovery Center	2421 13th Street NW	Canton	OH	44708	330-452-9812 800-956-6630
East Liverpool City Hospital Drug & Alcohol Medical Stabilization New Vision	425 West 5th Street	East Liverpool	OH	43920	330-386-3193 800-939-2273
Family Care Ministries	119 W. 6 <sup>th</sup> Street	East Liverpool	OH	43920	330-368-0725
Family Recovery Center Administrative, Counseling & Criminal Justice Office	964 North Market Street	Lisbon	OH	44432	330-424-1468
Family Recovery Center- East Liverpool Office	416 Jackson Street	East Liverpool	OH	43920	330-424-1468
Family Recovery Center- Fleming House	1300 Rose Drive	Lisbon	OH	44432	330-420-3760
Family Recovery Center- Oxford House	320 Benton Road	Salem	OH	44460	330-337-7501
Family Recovery Center Prevention Office	966 North Market Street Lower Level	Lisbon	OH	44432	330-424-0531
Family Recovery Center- Renaissance House	855 Newgarden Road	Salem	OH	44460	234-567-4746
Louis Stokes Cleveland VA Medical Center East Liverpool/Calcutta Multi-Specialty Outpatient Clinic	5655 State Route 170 Suite A	Calcutta	OH	43920	330-386-4303
Neil Kennedy Recovery Clinic	2151 Rush Boulevard	Youngstown	OH	44507	330-744-1181 800-228-8287
New Start Treatment Center St. Joseph Warren Hospital	1296 Tod Avenue NW Suite 205	Warren	OH	44485	330-306-5010
Trinity Health System Behavioral Medical Center Drug and Alcohol Rehabilitation Center	380 Summit Avenue	Steubenville	OH	43952	740-283-7024
<b>Emergency Assistance</b>					
American Red Cross of Lake to River	3530 Belmont Avenue Suite 7	Youngstown	OH	44505	330-392-2551
Catholic Charities Regional Agency Emergency Assistance	319 West Rayen Avenue	Youngstown	OH	44502	330-744-3320 800-670-6089

Agency	Address	City	State	Zip	Phone Number
Christians' Concern of Leetonia	764 Columbia Street	Leetonia	OH	44431	330-427-6827
Salvation Army- East Liverpool Corps	413 East 4th Street	East Liverpool	OH	43920	330-385-2086
Salvation Army- Salem	1249 North Ellsworth Avenue	Salem	OH	44460	330-332-5624
<b>Food Banks, Pantries, and Programs</b>					
Community Action Agency of Columbiana County	7880 Lincole Place	Lisbon	OH	44432	330-424-7221
Farmers and Hunters Feeding the Hungry Northeast Ohio Chapter					330-424-7221
Making Kids Count	7178 West Boulevard Suite E	Youngstown	OH	44512	330-758-3434
Salem Community Pantry	794 East 3rd Street	Salem	OH	44460	330-332-5166
Second Harvest Food Bank Food Assistance Columbiana County					330-747-2696 330-424-7767
Second Harvest Food Bank of Mahoning Valley Backpack food program		Youngstown	OH	44509	330-792-5522
Second Harvest Food Bank of Mahoning Valley Mobile Pantry Program Fellowship of the Beloved	13696 Bethesda Road	Hanoverton	OH	44423	
Salvation Army- East Liverpool Corps	413 East 4th Street	East Liverpool	OH	43920	330-385-2086
Salvation Army- Salem	1249 North Ellsworth Avenue	Salem	OH	44460	330-332-5624
Waystation	125 W. 5 <sup>th</sup> Street	East Liverpool	OH	43920	330-932-0353
<b>Free or Low-Cost Clinics</b>					
Columbiana County Health District	7360 State Route 45	Lisbon	OH	44432	330-424-0272
CAA (Community Action Agency) East Liverpool Campus Building #1	16480 St. Clair Ave.	East Liverpool	OH	43920	330-386-7777
CAA East Liverpool Campus Building #2	16494 St. Clair Ave.	East Liverpool	OH	44432	330-386-7870
CAA Health & Behavioral Health Center at Lisbon	7880 Lincole Place	Lisbon	OH	44432	330-424-5686
CAA Dental Center at Lisbon	38722 Saltwell Road	Lisbon	OH	44432	330-424-4192
CAA Health and Dental Center, Melhorn, Salineville	103 West Main Street	Salineville	OH	43945	330-679-2640
The Dental Van East Liverpool Department of Health (at the Community Resource Center twice a month)	940 Pennsylvania Avenue	East Liverpool	OH	43920	Call for Appointment: 330-385-1301
Quota Club International of Salem, Inc. Salem Area Speech and Hearing Clinic		Salem	OH	44460	330-337-8136
<b>Home Care</b>					
Columbiana County Senior Services Levy Board	7989 Dickey Drive	Lisbon	OH	44432	330-420-6695
Community Caregivers	888 Boardman-Canfield Road, Suite D	Boardman	OH	44512	330-533-3427
OVHH-Richard Atkins, Interim Executive Director	15549 State Route 170, Suite 7	East Liverpool	OH	43920	330-385-2333 X6105
Home Care Advantage, Inc.	718 East 3rd Street Suite C	Salem	OH	44460	330-337-HOME (4663)
mvi HomeCare & mvi Hospice Care (Salem)	2350 East State Street	Salem	OH	44460	330-332-1272
mvi HomeCare (Youngstown)	4891 Belmont Avenue	Youngstown	OH	44505	330-759-9487 800-449-4684
Salem Area Visiting Nurse Association	718 East 3rd Street Suite A	Salem	OH	44460	330-332-9986 800-879-6070
<b>Hospice</b>					
All Caring Hospice	6715 Tippecanoe Road Suite B-101	Canfield	OH	44406	330-286-3435 855-286-3435
Grace Hospice Ohio	7206 Market Street	Youngstown	OH	44512	330-729-2924
Hospice of the Valley Columbiana County	2388-B Southeast Boulevard	Salem	OH	44460	330-337-3182
Hospice of the Valley The Hospice House	9803 Sharrott Road	Poland	OH	44514	330-549-5850



Agency	Address	City	State	Zip	Phone Number
mvi HomeCare & mvi Hospice Care (Salem)	2350 East State Street	Salem	OH	44460	330-332-1272
<b>Hospitals</b>					
Akron Children's Hospital in Boardman	6505 Market Street	Boardman	OH	44512	330-746-8040
Aultman Alliance Community Hospital	200 East State Street	Alliance	OH	44601	330-596-6000
East Liverpool City Hospital	425 W 5 <sup>th</sup> Street	East Liverpool	OH	43920	330-385-7200
Mercy Health- Boardman	8401 Market Street	Boardman	OH	44512	330-729-2929
Mercy Health- Youngstown	1044 Belmont Avenue	Youngstown	OH	44501	330-746-7211
Salem Regional Medical Center	1995 East State Street	Salem	OH	44460	330-332-1551
The Surgical Hospital at Southwoods	7630 Southern Blvd.	Boardman	OH	44512	330-729-8000
<b>Hotline &amp; Resource Numbers</b>					
AIDS National Hotline					800-342-2437
AIDS Treatment Information Services					800-448-0440
Alcoholics Anonymous Youngstown Area Intergroup	3373 Canfield Road	Youngstown	OH	44511	330-270-3000
Al-Anon Family Group Headquarters, Inc.					800-356-9996
Al-Anon/Alateen Hotline					800-344-2666
Alzheimer's Association					800-272-3900
American Cancer Society					800-227-2345
American Lung Association					800-548-8252
American Red Cross of Lake to River	3530 Belmont Avenue Suite 7	Youngstown	OH	44505	330-392-2551
Autism Society					800-328-8476
Gay & Lesbian National Hotline					888-843-4564
Gay, Lesbian, Bisexual, and Transgender (GLBT) Youth Support Line					800-850-8078
National Adolescent Suicide Hotline					800-621-4000
National Alcoholism and Substance Abuse Information Center					800-784-6776
National Child Abuse Hotline					800-4-A-CHILD
National Cocaine Hotline					800-COCAINE
National Domestic Violence Hotline					800-799-7233 TTY: 800-787- 3224
National Heroin Hotline					800-9-HEROIN
National Runaway Hotline					800-621-4000
National Suicide Prevention Lifeline					800-273-8255
National Teen Dating Abuse Hotline					866-331-9474
National Youth Crisis Hotline					800-HIT-HOME
Panic Disorder Information Hotline					800-64-PANIC
Poison Control					800-222-1222
Substance Abuse and Mental Health Services Administration National Helpline					800-784-6776
Vet2Vet Veteran's Crisis Line					877-838-2838
Veterans Crisis Line					800-273-8255 and Press 1
<b>Housing Assistance</b>					
Catholic Charities Regional Agency Housing Counseling	319 West Rayen Avenue	Youngstown	OH	44502	330-744-3320 800-670-6089
Community Action Agency of Columbiana County	7880 Lincole Place	Lisbon	OH	44432	330-424-7221
Family & Community Services, Inc.	705 Oakwood Street Suite 221	Ravenna	OH	44266	330-297-7027
Habitat for Humanity of Northern Columbiana County	468 Prospect Street	Salem	OH	44460	330-337-1003
<b>Medical and Dental Care Services</b>					
Adult Endocrinology-Saira Mammen, M.D.	St. Clair Ave. Suite 2	East Liverpool	OH	43920	330-385-9670
Akron Children's Hospital Beeghly Campus	6505 Market Street	Boardman	OH	44512	330-746-8100
Akron Children's Hospital Pediatrics- Lisbon	330 North Market Street	Lisbon	OH	44432	330-424-9866

Agency	Address	City	State	Zip	Phone Number
American Cancer Society Reach to Recovery	525 North Broad Street	Canfield	OH	44406	Regional Office: 888-227-6446 Natl. Cancer Info. Center: 800-227-2345
American Heart Association Great Rivers Affiliate: Youngstown Metro	840 Southwestern Run	Youngstown	OH	44514	330-965-9230
Arthritis Foundation, Great Lakes Region, Northeastern Ohio Chapter	4630 Richmond Road Suite 240,	Cleveland	OH	44128	800-245-2275 Ext. 114
Belmont Pines Hospital: Children's Behavioral Health Hospital and Residential Treatment Center	615 Churchill-Hubbard Road	Youngstown	OH	44505	330-759-2700 800-423-5666
CAA (Community Action Agency) East Liverpool Campus Building #1	16480 St. Clair Ave.	East Liverpool	OH	43920	330-386-7777
CAA East Liverpool Campus Building #2	16494 St. Clair Ave.	East Liverpool	OH	44432	330-386-7870
CAA Health & Behavioral Health Center at Lisbon	7880 Lincole Place	Lisbon	OH	44432	330-424-5686
CAA Dental Center at Lisbon	38722 Saltwell Road	Lisbon	OH	44432	330-424-4192
CAA Health and Dental Center, Melhorn, Salineville	103 West Main Street	Salineville	OH	43945	330-679-2640
Columbiana County General Health District	7360 State Route 45	Lisbon	OH	44432	330-424-0272
Columbiana County General Health District Cancer Detection Clinic	7360 State Route 45	Lisbon	OH	44432	330-424-0272
Columbiana Medical Center affiliated with Salem Regional Medical Center	750 East Park Avenue	Columbiana	OH	44408	330-482-3871
Easter Seals of Mahoning, Trumbull, and Columbiana - J. Ford Crandall Rehabilitation Center - Youngstown Hearing and Speech Center	299 Edwards Street	Youngstown	OH	44502	330-743-1168
East Liverpool City Health District	126 West 6th Street	East Liverpool	OH	43920	330-385-5123
East Liverpool City Hospital (See website for a full list of services: <a href="http://www.elch.org">http://www.elch.org</a> )	425 West 5th Street	East Liverpool	OH	43920	330-385-7200
Family Practice- Dr. Rikita Sharma, M.D.	TBA	East Liverpool	OH	43920	
Healthy Start & Healthy Families Columbiana Columbiana County Department of Jobs & Family Services	7989 Dickey Drive Suite 2	Lisbon	OH	44432	330-424-1471
Salem City Health District	230 North Lincoln Avenue #104	Salem	OH	44460	330-332-1618
Salem Regional Medical Center (See website for a full list of services: <a href="http://www.salemregional.com">www.salemregional.com</a> )	1995 E. State Street	Salem	OH	44460	330-332-1551
Louis Stokes Cleveland VA Medical Center East Liverpool/Calcutta Multi-Specialty Outpatient Clinic	5655 State Route 170 Suite A	Calcutta	OH	43920	330-386-4303
Salem Area Visiting Nurse Association	718 East 3rd Street Suite A	Salem	OH	44460	330-332-9986 800-879-6070
Sleep Clinic- Dr. Aziz	16218 St. Claire Ave.	East Liverpool	OH	43920	330-382-9355
SRMC at Firestone Farms	116 Carriage Drive Town Center at Firestone Farms	Columbiana	OH	44408	330-482-3871
SRMC Primary Care	38506 Saltwell Road	Lisbon	OH	44432	330-424-1404
Wound Healing Center	Salem Regional Medical Center 1995 East State Street	Salem	OH	44460	330-332-7415
Wound Care Clinic	425 West 5 <sup>th</sup> Street	East Liverpool	OH	43920	330-386-5870
<b>Nutrition</b>					
Community Action Agency of Columbiana County Elderly Nutrition Program	7880 Lincole Place	Lisbon	OH	44432	330-424-7221
Community Resource Center	940 Pennsylvania Ave.	East Liverpool	OH	43920	330-385-1301
East Liverpool City Hospital Dietician- Debra Wick, RD	425 West Fifth Street	East Liverpool	OH	43920	330-386-2079
<b>Recreation</b>					

Agency	Address	City	State	Zip	Phone Number
Beaver Creek State Park	12021 Echo Dell Rd.	East Liverpool	OH	43920	330-385-3091
Boy Scouts of America Buckeye Council	2301 13th Street NW	Canton	OH	44708	330-580-4272 800-589-9812
Camp Fire Tayanoka		East Liverpool	OH	43920	330-385-0645
The Firestone Pool	338 East Park Avenue	Columbiana	OH	44408	330-482-1026
Girl Scouts of North East Ohio- Youngstown	8580 South Avenue	Youngstown	OH	44514	330-652-5876 800-852-4474
Salem Community Center	1098 N. Ellsworth Ave.	Salem	OH	44460	330-332-5885
Salem World Wars Memorial Building	785 East State Street	Salem	OH	44460	330-332-5512
Scenic Vista Park	11523 Township Hwy 764	Lisbon	OH	44460	330-424-9078
Thompson Park	2626 Park Way	East Liverpool	OH	44460	330-385-2255
<b>Senior Services</b>					
Area Agency on Aging 11	5555 Youngstown Warren Rd., Suite 2685	Niles	OH	44446	800-686-7367
Catholic Charities Senior Center	600 East 4th Street	East Liverpool	OH	43920	330-385-4732
Ceramic City Senior Center	600 East 4th Street	East Liverpool	OH	43920	330-385-4732
Community Action Agency of Columbiana County Elderly Nutrition Program	7880 Lincole Place	Lisbon	OH	44432	330-424-7221
Columbiana County Senior Services Levy Board	7989 Dickey Drive	Lisbon	OH	44432	330-420-6695
Columbiana County Department of Job & Family Services	7989 Dickey Drive Suite 2	Lisbon	OH	44432	330-424-1471
Columbiana Meals on Wheels	865 East Park	Columbiana	OH	44408	330-482-0366
Columbiana Metropolitan Housing Authority	325 Moore Street	East Liverpool	OH	43920	330-386-5970
Community Caregivers	888 Boardman-Canfield Road, Suite D	Boardman	OH	44512	330-533-3427
Community Resource Center	940 Pennsylvania Ave.	East Liverpool	OH	43920	330-385-1301
Counseling Center of Columbiana County	40722 State Route 154	Lisbon	OH	44432	330-424-9573
Counseling Center of Columbiana County East Liverpool Branch Office	15613 Pineview Drive Suite A	East Liverpool	OH	43920	330-386-9004
Counseling Center of Columbiana County Salem Branch Office	188 North Lincoln Avenue	Salem	OH	44460	330-332-1514
Family & Community Services, Inc. Medication Assistance Program (MAP)	705 Oakwood Street Suite 221	Ravenna	OH	44266	330-297-7027
Family & Community Services, Inc. R.S.V.P. (Retired Senior Volunteer Program)		Lisbon	OH	44432	330-424-7877
Home Care Advantage, Inc.	718 East 3rd Street Suite C	Salem	OH	44460	330-337-HOME (4663)
Lifeline- East Liverpool City Hospital Women's Auxiliary	425 West Fifth Street	East Liverpool	OH	43920	330-386-2003
Mobile Meals of Salem, Inc.	1995 East State Street	Salem	OH	44460	330-332-2160
mvi HomeCare & mvi Hospice Care (Salem)	2350 East State Street	Salem	OH	44460	330-332-1272
mvi HomeCare (Youngstown)	4891 Belmont Avenue	Youngstown	OH	44505	330-759-9487 800-449-4684
Quota Club International of Salem, Inc. Salem Area Speech and Hearing Clinic		Salem	OH	44460	330-337-8136
Salem Area Adult Daycare Center	718 East 3rd Street Suite B	Salem	OH	44460	330-332-9986 800-879-6070
Salem Area Visiting Nurse Association	718 East 3rd Street Suite A	Salem	OH	44460	330-332-9986 800-879-6070
Salem Community Center Silver & Fit	1098 North Ellsworth Avenue	Salem	OH	44460	330-332-5885
Salem Worlds War Memorial Building	785 East State Street	Salem	OH	44460	330-332-5512
Senior Center of Mahoning County	1110 5th Avenue	Sebring	OH	44672	330-744-5071
Senior Link Adult Day Services	16351 State Route 267	East Liverpool	OH	43920	330-385-5111
Social Security Office- East Liverpool	120 East 4th Street	East Liverpool	OH	43920	800-772-1213
Wellsville Area Resource Center	1335 Main Street	Wellsville	OH	43968	330-532-4507
<b>Shelters</b>					



Agency	Address	City	State	Zip	Phone Number
Catholic Charities Regional Agency Christina House (undisclosed domestic violence shelter)					24 hr Crisis Line: 330-420-0037
Community Action Agency of Columbiana County Homeless Prevention Program	7880 Lincole Place	Lisbon	OH	44432	330-424-5686
<b>Support Groups</b>					
Autism Support Group East Liverpool City Hospital	425 West 5th Street	East Liverpool	OH	43920	330-386-2054
CAUSE (Connection, Autism, Understanding, Support, & Education) Salem Public Library-Quaker Meeting Room	821 East State Street	Salem	OH	44460	330-337-6193
Coping With Cancer SRMC Behavioral Medicine & Wellness Center	2020 East State Street Suite J	Salem	OH	44460	330-337-4935
Families Coping With Cancer SRMC Behavioral Medicine & Wellness Center	2020 East State Street Suite J	Salem	OH	44460	330-337-4935
HIV Support Group Counseling Center of Columbiana County	260 West Lincoln Way	Lisbon	OH	44432	330-424-0604
National Alliance on Mental Illness (NAMI) of Columbiana County	42549 North Avenue	Lisbon	OH	44432	330-424-5772
Survivors of Suicide Support Group Meets at Columbiana County Counseling Center	40722 State Route 154	Lisbon	OH	44432	330-747-5111
<b>Transportation</b>					
Ambulance Service Inc. Ambulette Service	231 Webber Way	East Liverpool	OH	43920	330-385-4903
CARTS (Community Action Rural Transit System)	7880 Lincole Place	Lisbon	OH	44432	330-424-4015
Life Team EMS Ambulette Services	740 Dresden Ave.	East Liverpool	OH	43920	330-396-5505
<b>Women's Health</b>					
The Center for Women	4139 Boardman- Canfield Road	Canfield	OH	44406	330-702-1281
Columbiana County Health District-Cancer Detection Clinic (screenings)	7360 State Route 45	Lisbon	OH	44432	330-424-0272
Community Action Agency of Columbiana County Community Health Center-East Liverpool	16687 Saint Clair Avenue, Suite 203	East Liverpool	OH	43920	330-386-7777
Community Action Agency of Columbiana County Community Health Center-Lisbon	7880 Lincole Place	Lisbon	OH	44432	330-424-5686
Community Action Agency of Columbiana County Salineville Community Health Center at Melhorn	103 West Main Street	Salineville	OH	43945	330-679-2640
Comprehensive Women's Health Partners Dr. Priya N. Patel	2364 Southeast Blvd.	Salem	OH	44460	330-337-1134
East Liverpool City Hospital OB/GYN Sara Nicholas , D.O., OB/GYN Heather Hissom,WHNP,OB/GYN	16761 St. Claire Avenue, Suite#2	East Liverpool	OH	43920	330-385-9670
Gynecology- Constantine G. Economus, M.D.	2020 E. State, Suite G	Salem	OH	44460	330-884-2400
Louis Stokes Cleveland VA Medical Center East Liverpool/Calcutta Multi-Specialty Outpatient Clinic	5655 State Route 170 Suite A	Calcutta	OH	43920	330-386-4303

Submitted for SRMC Board approval by:  
Deborah Pietrzak, VP, Marketing/Planning  
November 12, 2019