



# Community Health Needs Assessment FY2019





**Healthy**  
WASHINGTON COUNTY

# Welcome!

Joseph P. Ross, President & CEO  
Meritus Medical Center, Inc.

Earl Stoner, Washington County Health Officer  
Maryland Department of Health

R. Lynn Rushing, CEO  
Brook Lane Health Services, Inc.





## CHNA Steering Committee

Allen Twigg, Meritus Medical Center - Chair  
Joelle Butler, Meritus Medical Center  
Shelby DeHaven, YMCA of Hagerstown  
Susan Delauter, Community member  
Diana Gaviria MD, Maryland Department of Health  
Adam Roberson, Community Free Clinic  
Erin Hershey, Meritus Health Board of Directors  
Susan Lopp, John R. Marsh Cancer Center  
Rod MacRae, Washington County Health Department  
Curt Miller, Brook Lane Health Services  
Jon Noyes, Meritus Medical Center  
Kathy Powderly, Hagerstown Area Religious Council  
Rick Rock, Washington County Mental Health Authority  
Guinn Rogers, United Way of Washington County  
Douglas Spotts MD, Meritus Health  
Shelley Steiner, Hospice of Washington County  
Cynthia Terl, Wells House  
Susan Walter, Tristate Community Health Center  
Melissa Minotti, Johns Hopkins Comstock Center  
Douglas Brown, Frostburg State University  
Brad Sell, Community Foundation of Washington County





***A public and private collaboration to help  
people living in our community  
understand their personal health status and  
how to make healthy lifestyle changes***





JOHNS HOPKINS  
UNIVERSITY



Brothers Who Care



Community Foundation  
of Washington County MD, Inc.  
*Looking forward...giving back*



# Community Health Needs Assessment Tri-annual Cycle



# Today's goal

***To identify and prioritize needs to improve the health of people in our community***

- Public policy
- Support for grant writing
- Strategic planning
  - Not for profit hospitals
  - Local Health Improvement Coalition (LHIC)
  - MD State Health Improvement Planning (SHIP)



# Prioritized Community Health Needs 2009 - 2018

**2009** Mental health, senior services, obesity, oral care

**2012** Obesity, diabetes, heart disease, cancer, mental health, teen pregnancy

**2015** Obesity & physical inactivity, mental health, diabetes, healthy lifestyles, substance abuse, heart disease & hypertension

**2018 ?**





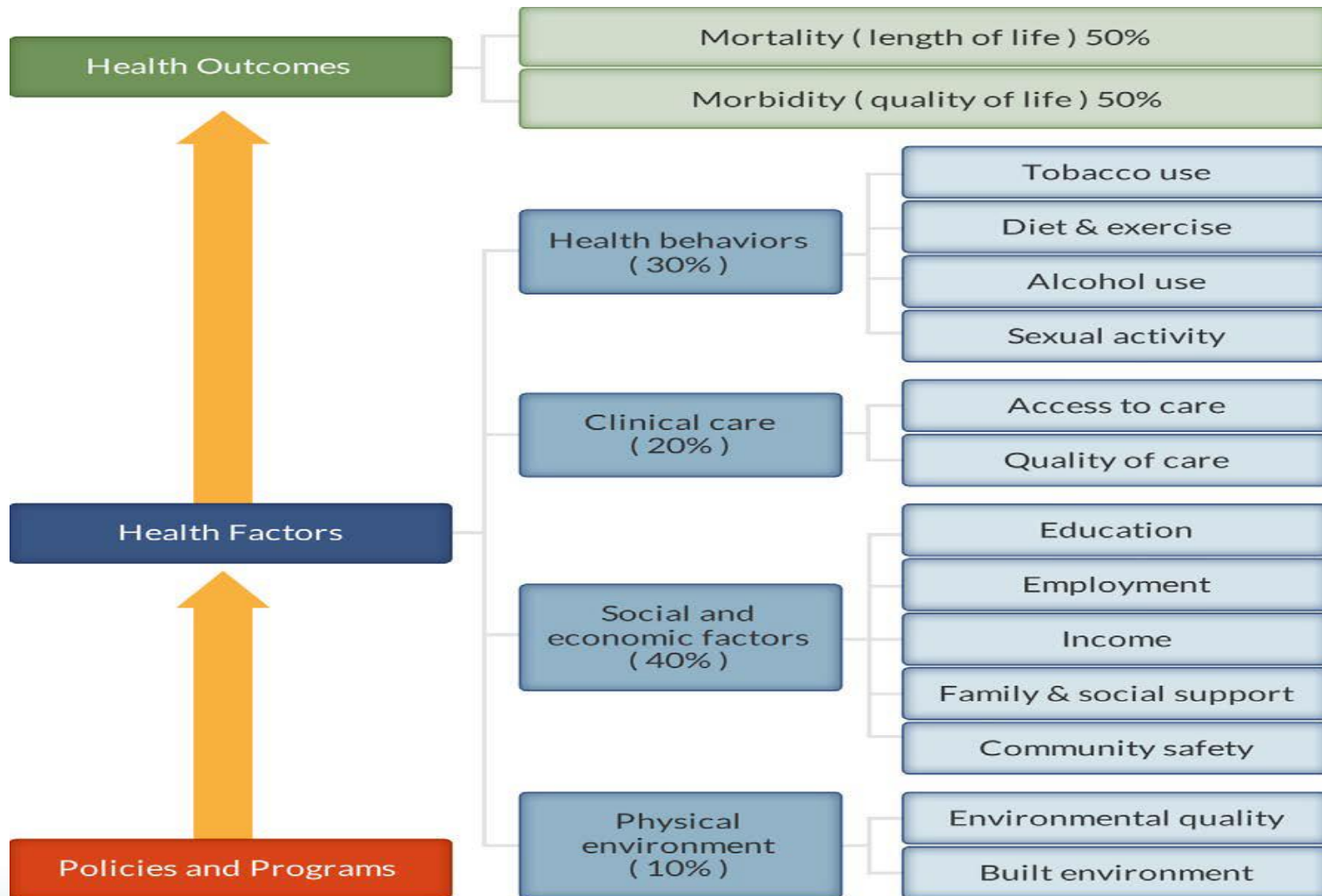
# Methodology

- **Community Health Steering Committee** January, 2018
- **Collection and Review of Secondary Data** February – May 2018
  - Behavioral Risk Factor Surveillance BRFSS (Centers for Disease Control)
  - Community Health Rankings (Robert Wood Johnson)
  - Maryland State Health Improvement Project (SHIP)
- **Conducted Community Health Needs Survey**
  - Sample Size = 1,514**; data collected June 25, 2018 to September 14, 2018
    - Online, YMCA, Community Free Clinic, WCDSS, Farmer's Markets
- **Complimentary Community Health Focus Groups & Interviews (n= 112)**
  - Senior's Focus Group August 28, 2018
  - Men's Focus Group, September 6, 2018
  - Physician Focused Interviews October 2 – 19, 2018
  - Hispanic Focused Interviews, September 23, 2018
  - African American Focus Group October 9, 2018
  - Behavioral Health Focus Group October 29, 2018
  - Care Management Focused Interviews October 18 - November 2, 2018
- **Data Analysis** October – November, 2018
- **Prioritization of Needs** November 20, 2018

# DASHBOARDS



# County Health Rankings Dashboard (RWJ)

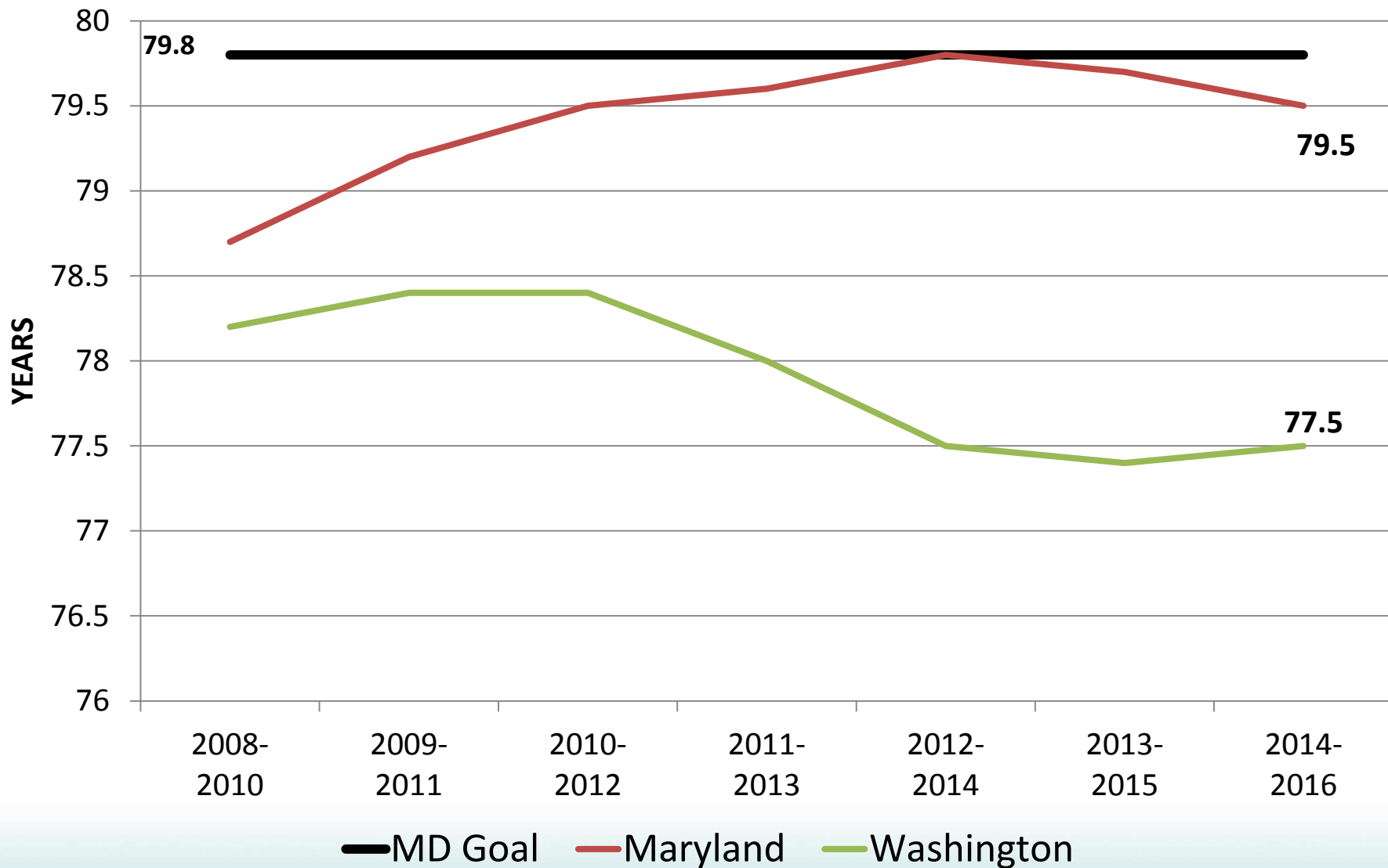


# Community Health Rankings MARYLAND

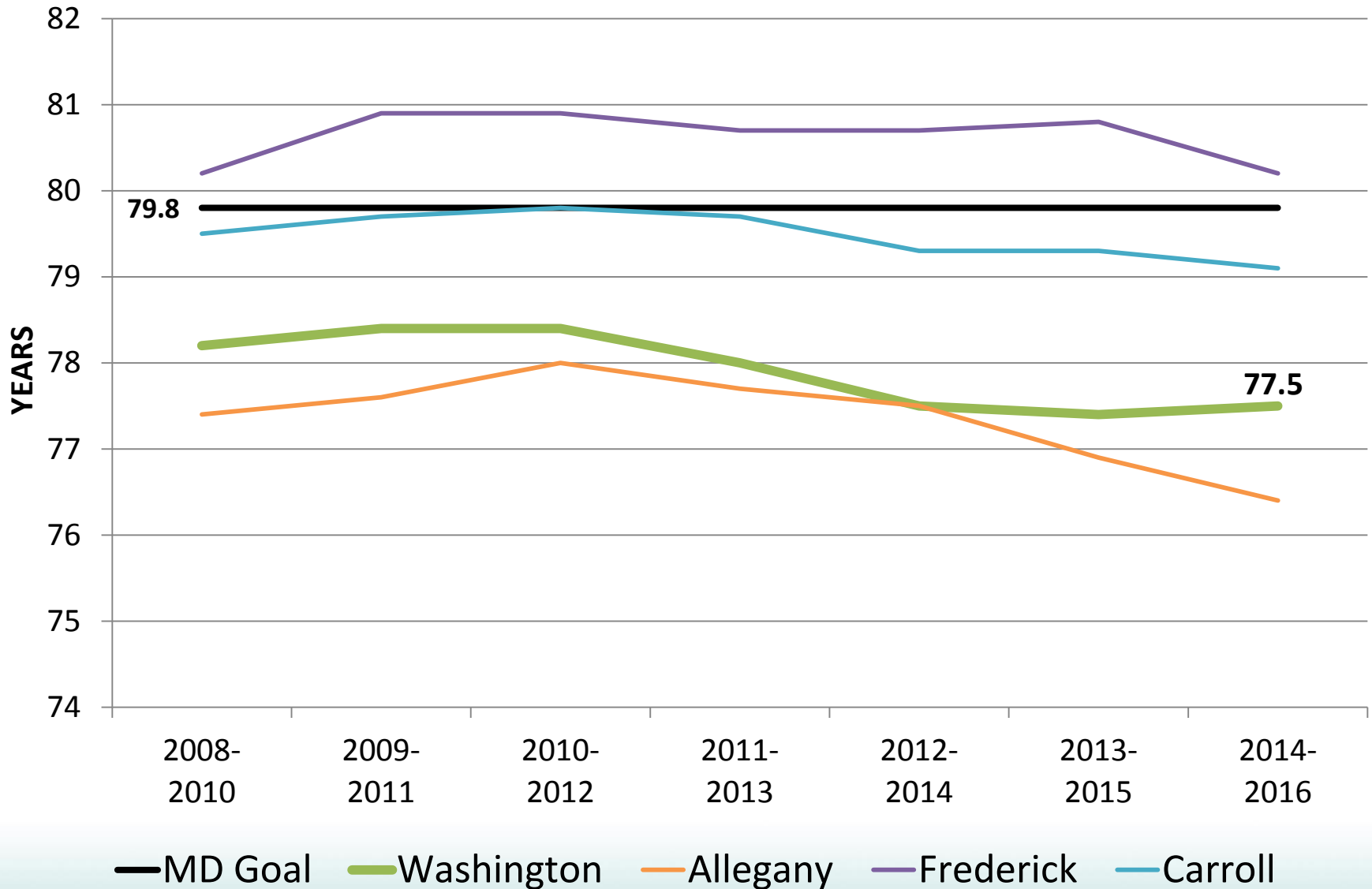
## 2012 vs. 2018

Rank	Health Outcomes		Rank	Health Factors	
	2012	2018		2012	2018
1	Howard	Montgomery	1	Howard	Howard
2	Montgomery	Howard	2	Montgomery	Montgomery
3	Queen Anne's	Carroll	3	Frederick	Carroll
4	Frederick	Calvert	4	Talbot	Frederick
5	Carroll	Frederick	5	Carroll	Calvert
6	Calvert	St. Mary's	6	Calvert	Queen Anne's
7	St Mary's	Anne Arrundel	7	Anne Arundel	Talbot
8	Talbot	Harford	8	Harford	Harford
9	Harford	Queen Anne's	9	Queen Anne's	Anne Arrundel
10	Anne Arrundel	Talbot	10	Baltimore	St Mary's
11	Charles	Charles	11	Charles	Baltimore
12	<b>Washington</b>	Worcester	12	St Mary's	Charles
13	Baltimore	Baltimore	13	Kent	Kent
14	Worcester	Prince George's	14	Garrett	Garrett
15	Prince George's	Garrett	15	Worcester	Worcester
16	Garrett	Kent	16	<b>Washington</b>	Prince George's
17	Kent	Cecil	<b>17</b>	Prince George's	<b>Washington</b> <b>-1</b>
<b>18</b>	Cecil	<b>Washington</b> <b>-6</b>	18	Allegany	Allegany
19	Wicomico	Wicomico	19	Wicomico	Wicomico
20	Caroline	Allegany	20	Cecil	Cecil
21	Somerset	Dorchester	21	Caroline	Caroline
22	Dorchester	Caroline	22	Dorchester	Dorchester
23	Allegany	Somerset	23	Somerset	Somerset
24	Baltimore City	Baltimore City	24	Baltimore City	Baltimore City

# Life Expectancy



# Life Expectancy County Comparison

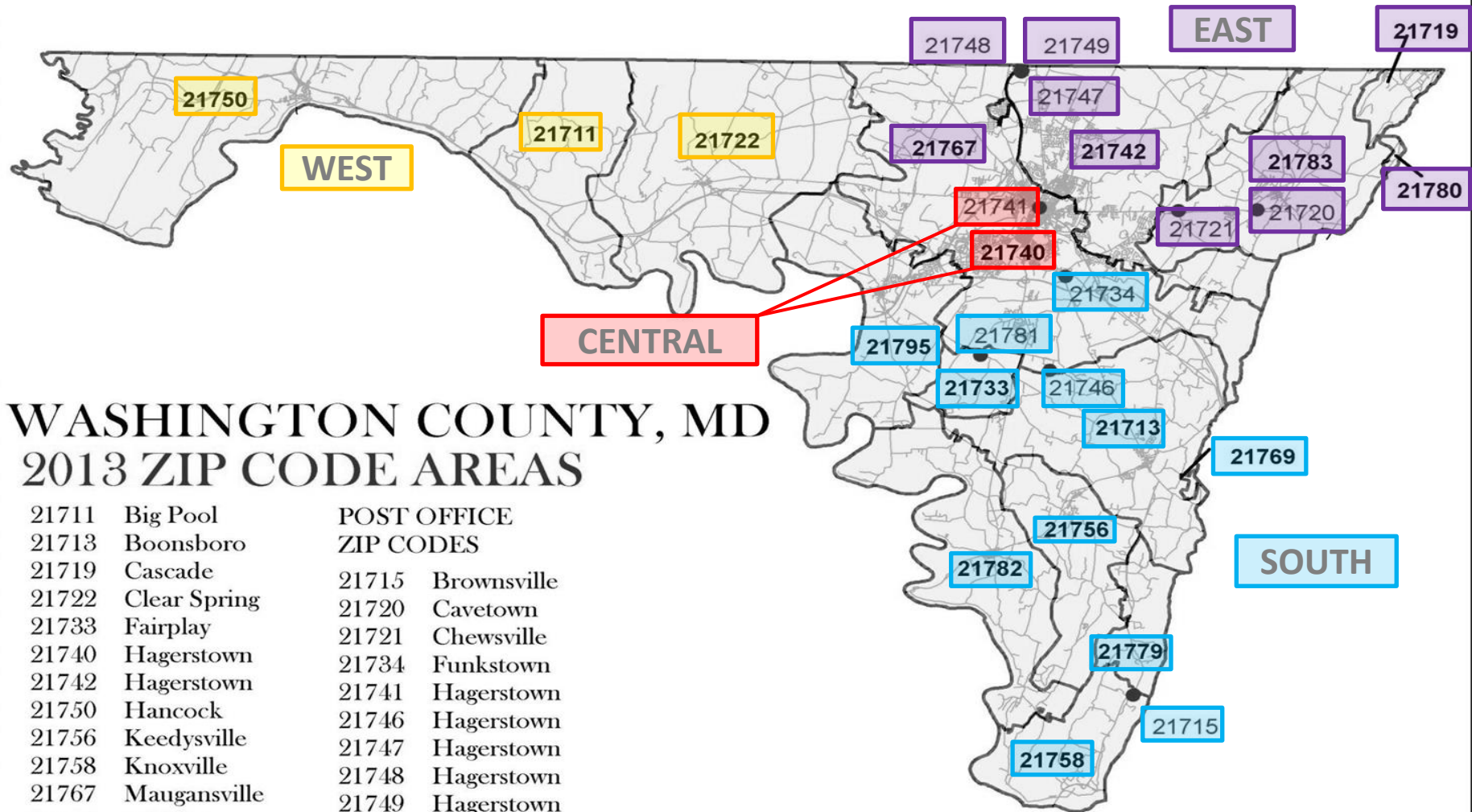


# COMMUNITY SURVEY

**1,514 responses**

*Who took the survey?*





# WASHINGTON COUNTY, MD 2013 ZIP CODE AREAS

- 21711 Big Pool
- 21713 Boonsboro
- 21719 Cascade
- 21722 Clear Spring
- 21733 Fairplay
- 21740 Hagerstown
- 21742 Hagerstown
- 21750 Hancock
- 21756 Keedysville
- 21758 Knoxville
- 21767 Maugansville
- 21769 Middletown
- 21779 Rohrsersville
- 21780 Sabillasville
- 21782 Sharpsburg
- 21783 Smithsburg
- 21795 Williamsport

- POST OFFICE  
ZIP CODES
- 21715 Brownsville
  - 21720 Cavetown
  - 21721 Chewsville
  - 21734 Funkstown
  - 21741 Hagerstown
  - 21746 Hagerstown
  - 21747 Hagerstown
  - 21748 Hagerstown
  - 21749 Hagerstown
  - 21781 Saint James

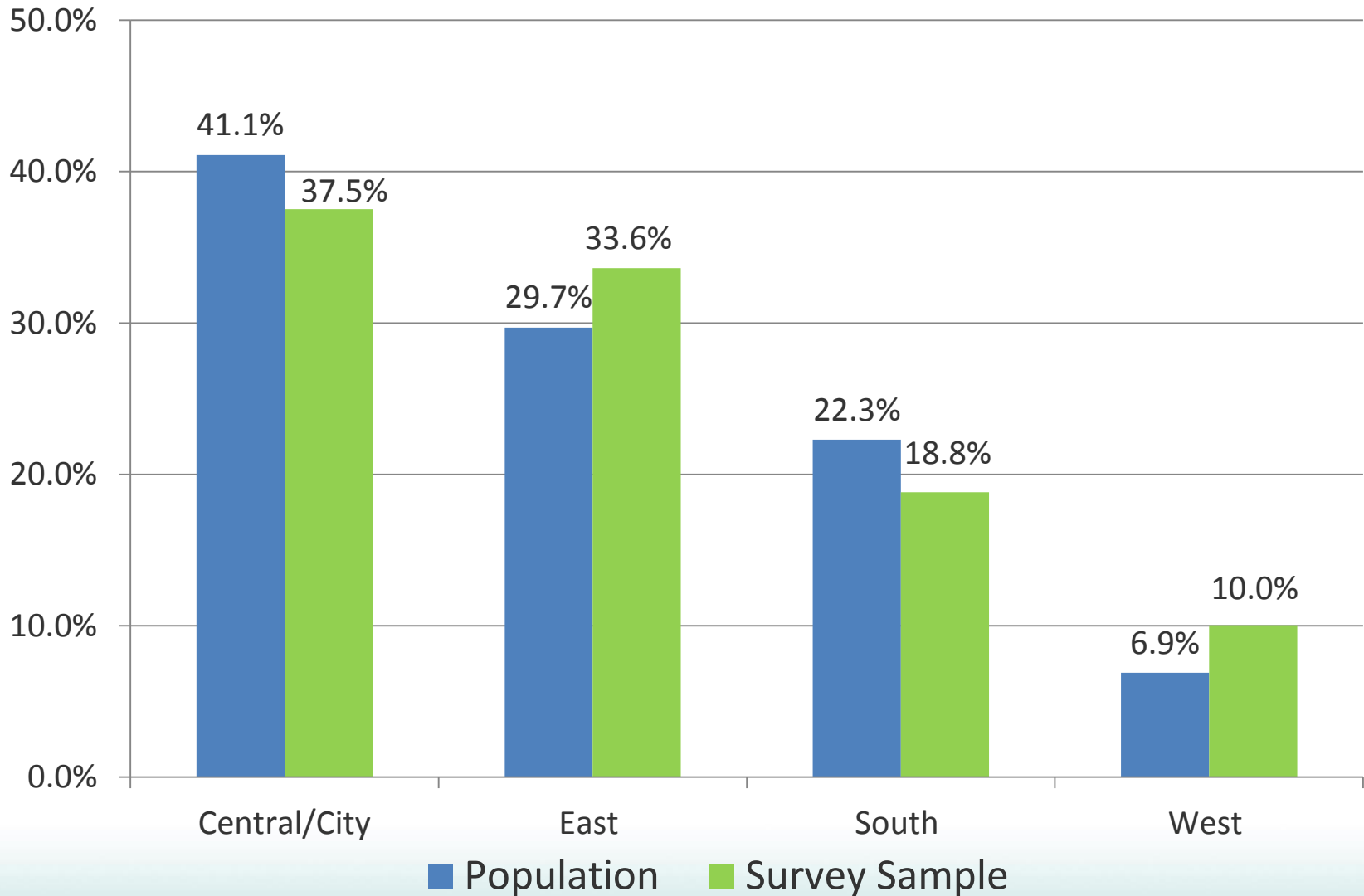


PREPARED BY  
THE MARYLAND DEPARTMENT OF PLANNING  
PLANNING DATA SERVICES DIVISION

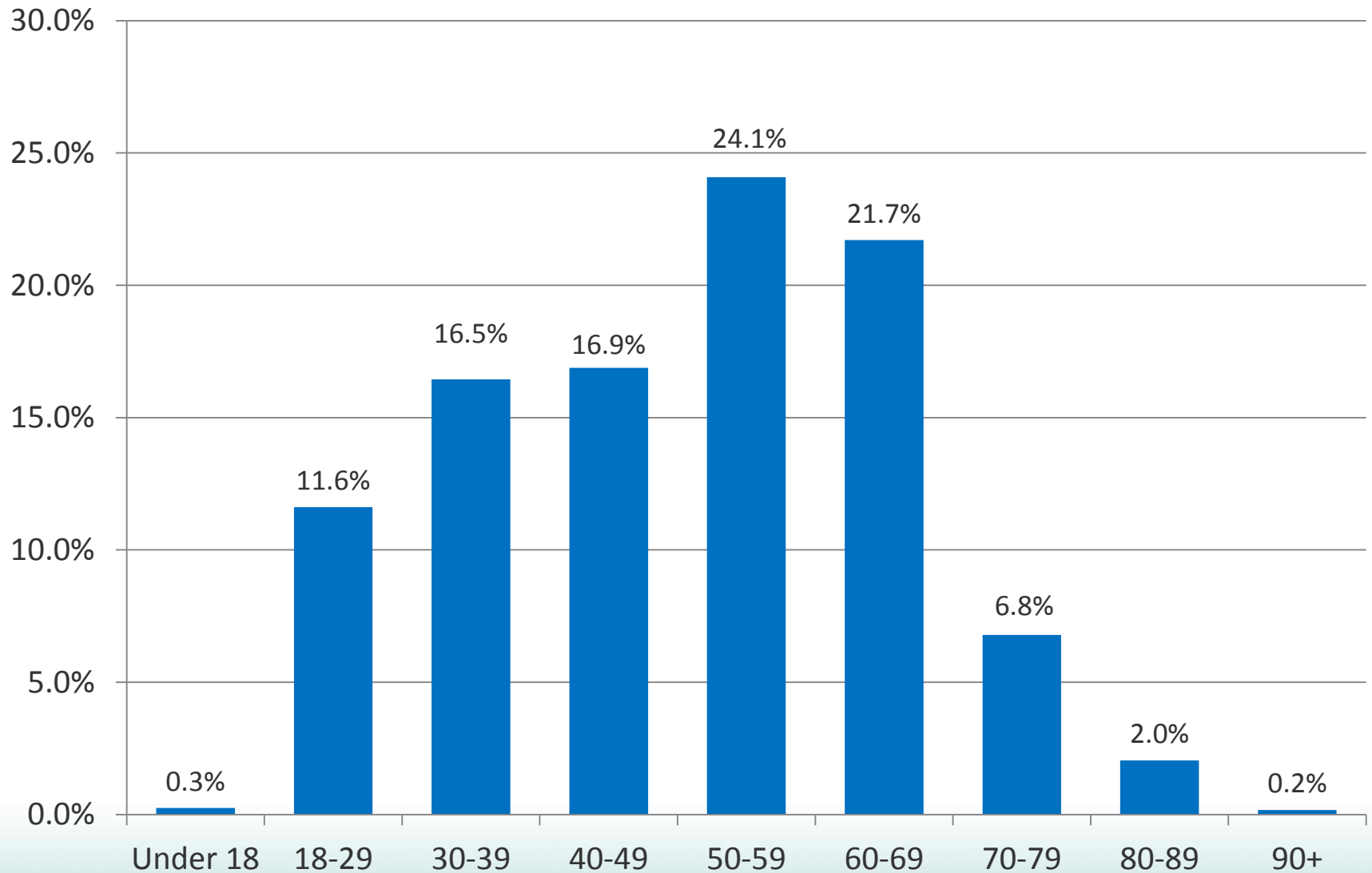




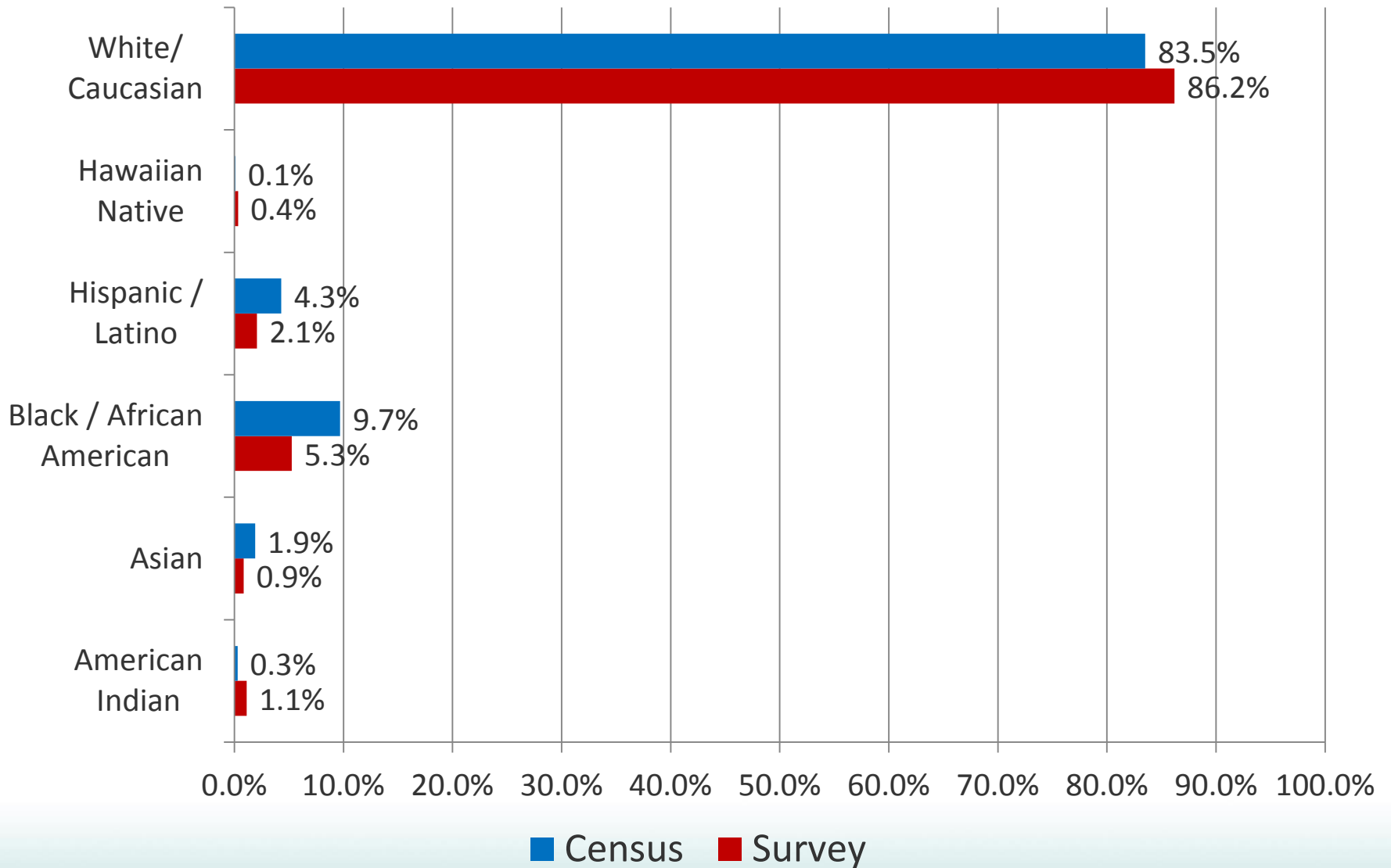
# Q1. Geographic Population vs. Survey Sample



## Q36. What is your age?



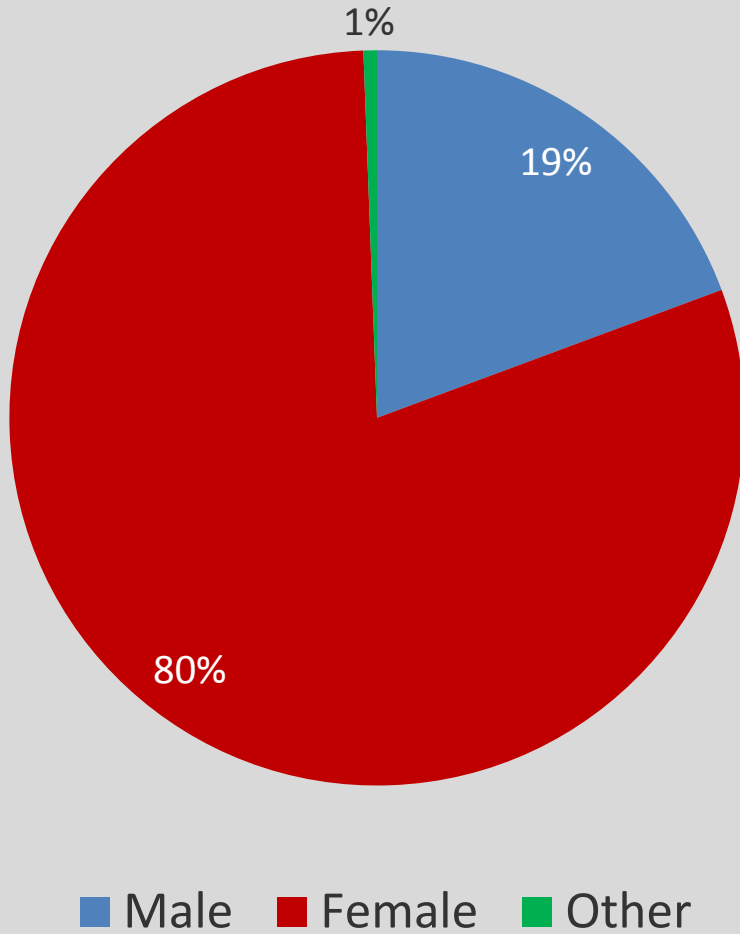
## Q40. What is your race / ethnicity?



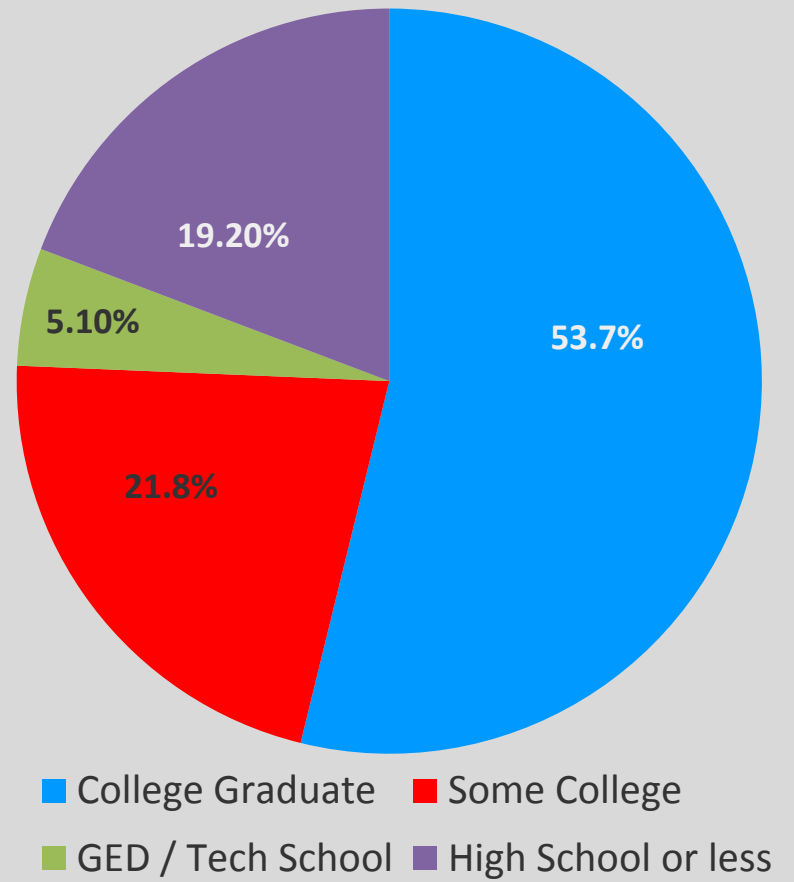
## Q39. How much total Combined money did all members of your HOUSEHOLD earn last year?



### Q35. What is your gender?



### Q37. What is your highest level of education?



# Economic Status

Kathy Saxman,

Washington County United Way





# DO YOU KNOW ALICE?

## WHAT DOES ALICE STAND FOR?

**ALICE** is a United Way acronym that stands for **A**sset **L**imited, **I**ncome **C**onstrained, **E**mployed.

ALICE is your child care worker, your parent on Social Security, the cashier at your supermarket, the gas attendant, the salesperson at your big box store, your waitress, a home health aide, an office clerk. ALICE cannot always pay the bills, has little or nothing in savings, and is forced to make tough choices such as deciding between quality child care or paying the rent. One unexpected car repair or medical bill can push these financially strapped families over the edge.

# What does it cost to afford the basic necessities?

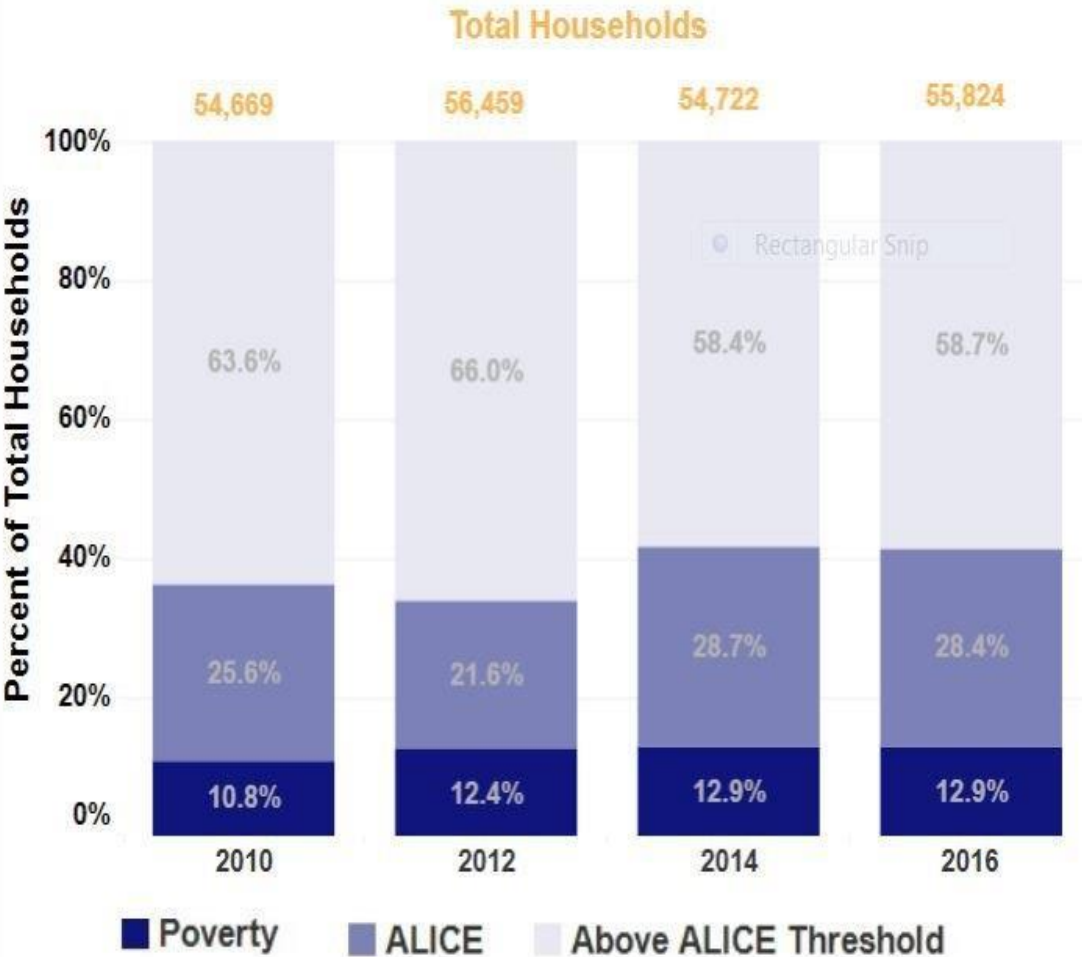
The Household Survival Budget gives the cost of housing, child care, food, transportation, and health care at a bare-minimum “survival” level. It does not include any savings, leaving households without a cushion for unexpected expenses and unable to invest in the future. Yet even this minimal budget was much higher than the adjusted Federal Poverty Level of \$11,880 for a single adult and \$24,300 for a family of four in 2016.

	Single Adult	2 Adults, 1 Infant, 1 Preschooler
Housing	\$554	\$898
Child Care	\$0	\$1,047
Food	\$182	\$603
Transportation	\$361	\$722
Health Care	\$229	\$860
Technology	\$55	\$75
Miscellaneous	\$165	\$478
Taxes	\$270	\$572
Monthly Total	\$1,816	\$5,255
<b>ANNUAL TOTAL</b>	<b>\$21,792</b>	<b>\$63,060</b>
Hourly Wage	\$10.90	\$31.53

Source: U.S. Department of Housing and Urban Development; U.S. Department of Agriculture; Bureau of Labor Statistics; Internal Revenue Service; Tax Foundation; and Maryland Family Network, 2016.



## Households by Income, 2010 to 2016 - Washington, Maryland



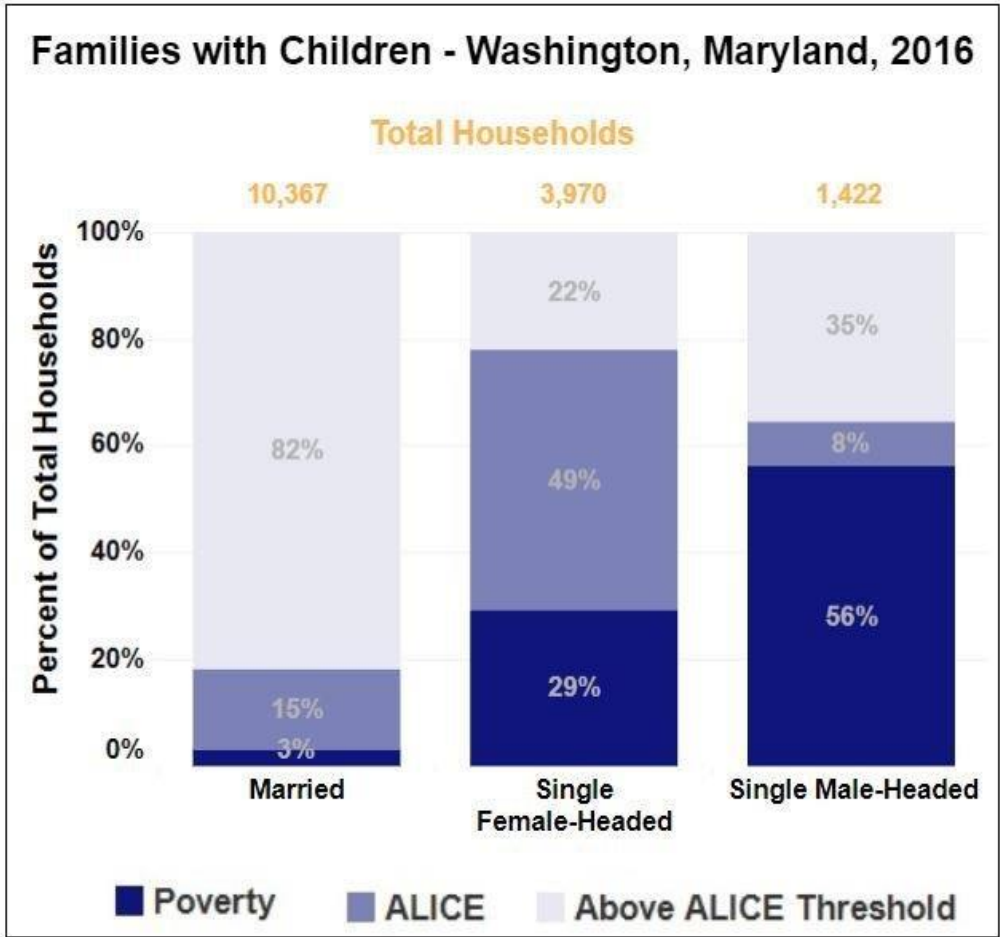
## How has the number of struggling households changed over time?

The number of households below the ALICE Threshold fluctuates throughout the year. Households move in and out of poverty and ALICE as their circumstances worsen or improve. The general trend has been a flat recovery since 2010, the end of the Great Recession. In many locations, the cost of basics has increased more than wages, leading to an increase in the number of ALICE households.

Source: American Community Survey, 2016, and the ALICE Threshold, 2016.

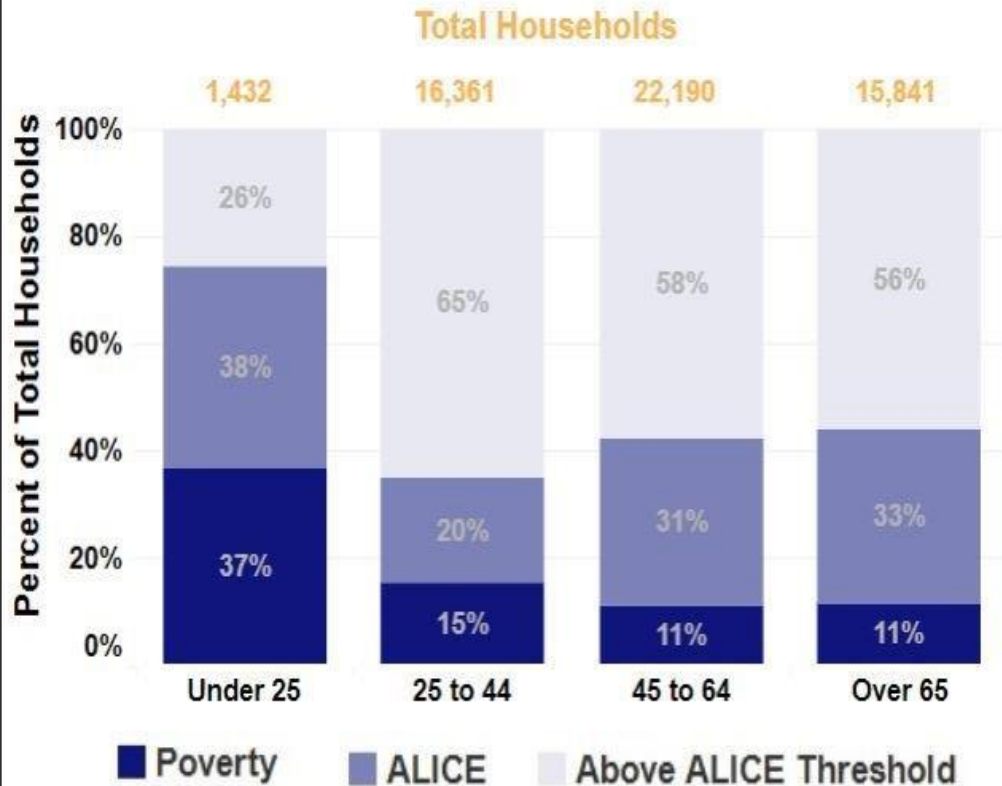
# How many families with children are struggling?

Children add significant expense to a family budget, so it is not surprising that many families with children live below the ALICE Threshold. Though more families are headed by married parents, those families with a single parent are more likely to have income below the ALICE Threshold.



Source: American Community Survey, 2016, and the ALICE Threshold, 2016.

## Households by Age - Washington, Maryland, 2016



## What are the differences in ALICE households by age?

There are ALICE households in every age bracket. The youngest group (people under 25) is more likely to be in poverty, and both the youngest and the oldest (people 65 and older) are more likely to be ALICE.

Source: American Community Survey, 2016, and the ALICE Threshold, 2016.

# AFFORDABLE HOUSING

Allen Twigg, Meritus Medical Center



## Housing and Living Arrangements

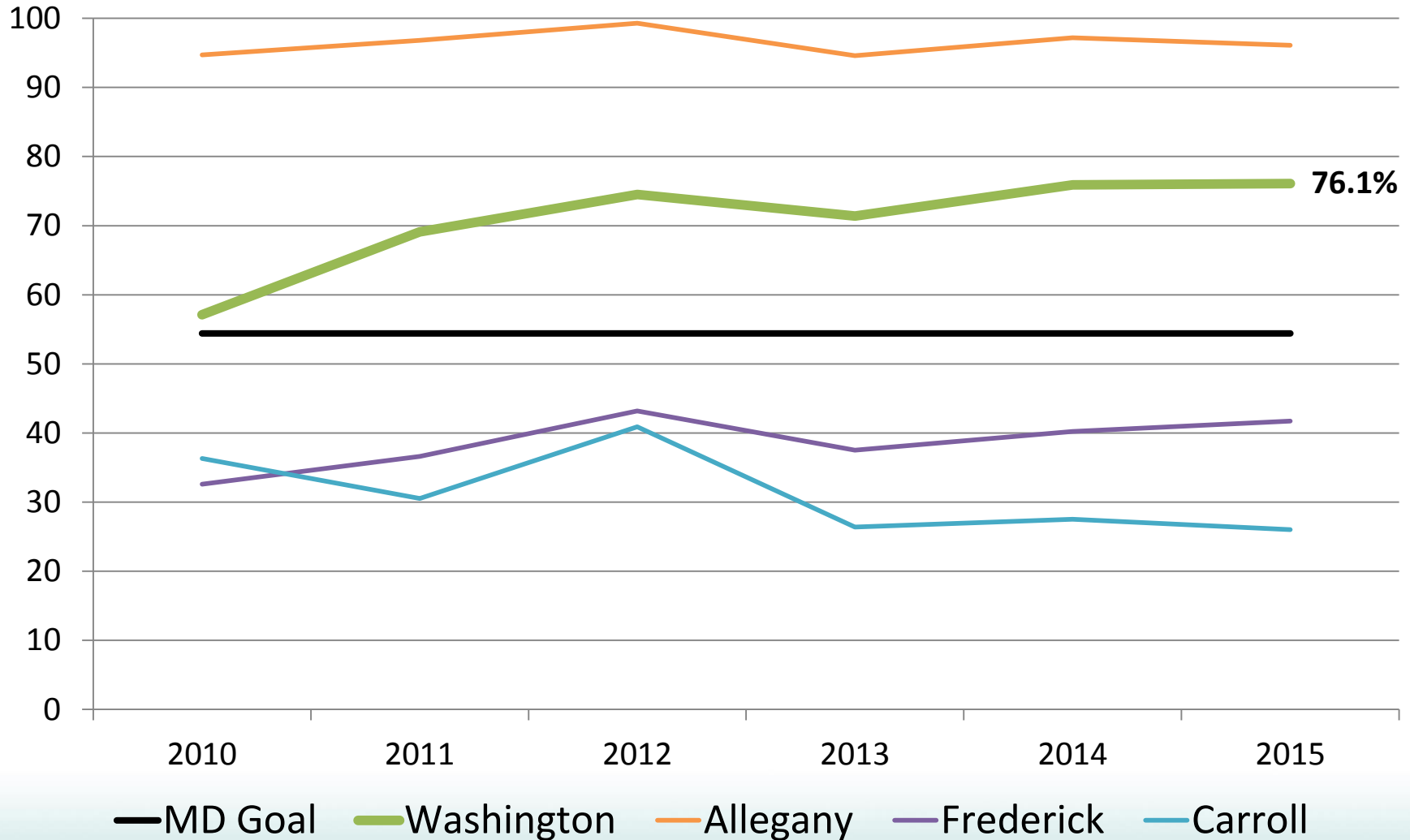
### Housing

Housing units, July 1, 2017, (V2017)	61,488
Owner-occupied housing unit rate, 2012-2016	64.50%
Median value of owner-occupied housing units, 2012-2016	\$198,900
Median monthly owner costs -with a mortgage, 2012-2016	\$1,498
Median monthly owner costs -without a mortgage, 2012-2016	\$429
Median gross rent, 2012-2016	\$869
Building permits, 2017	308

### Families & Living Arrangements

Households, 2012-2016	56,094
Persons per household, 2012-2016	2.51
Living in same house 1 year ago, percent of persons age 1 year+, 2012-2016	85.80%
Language other than English spoken at home, percent of persons age 5 years+, 2012-2016	7.30%

# % of Affordable Housing Units Sold County Comparison



# Housing & Shelter Requests 2017 - 2018



LAST 365 DAYS

TOTAL CALLS  
**216,818**

TOTAL REQUESTS  
**215,370**

## TOP HOUSING & SHELTER REQUESTS

UNMET ⓘ

Shelters ⓘ **9,730**

7%

Low-cost housing ⓘ **3,852**

3%

Home repair/ maintenance ⓘ **1,267**

3%

Rent assistance ⓘ **10,540**

6%

Mortgage assistance ⓘ **196**

2%

Landlord/ tenant issues ⓘ **937**

1%

Contacts ⓘ **756**

<1%

Other housing & shelter ⓘ **174**

0%

0 = No requests made  
Not Available = Data not collected  
Some requests are only computed at the category level

Requests >100  
AND > 50%

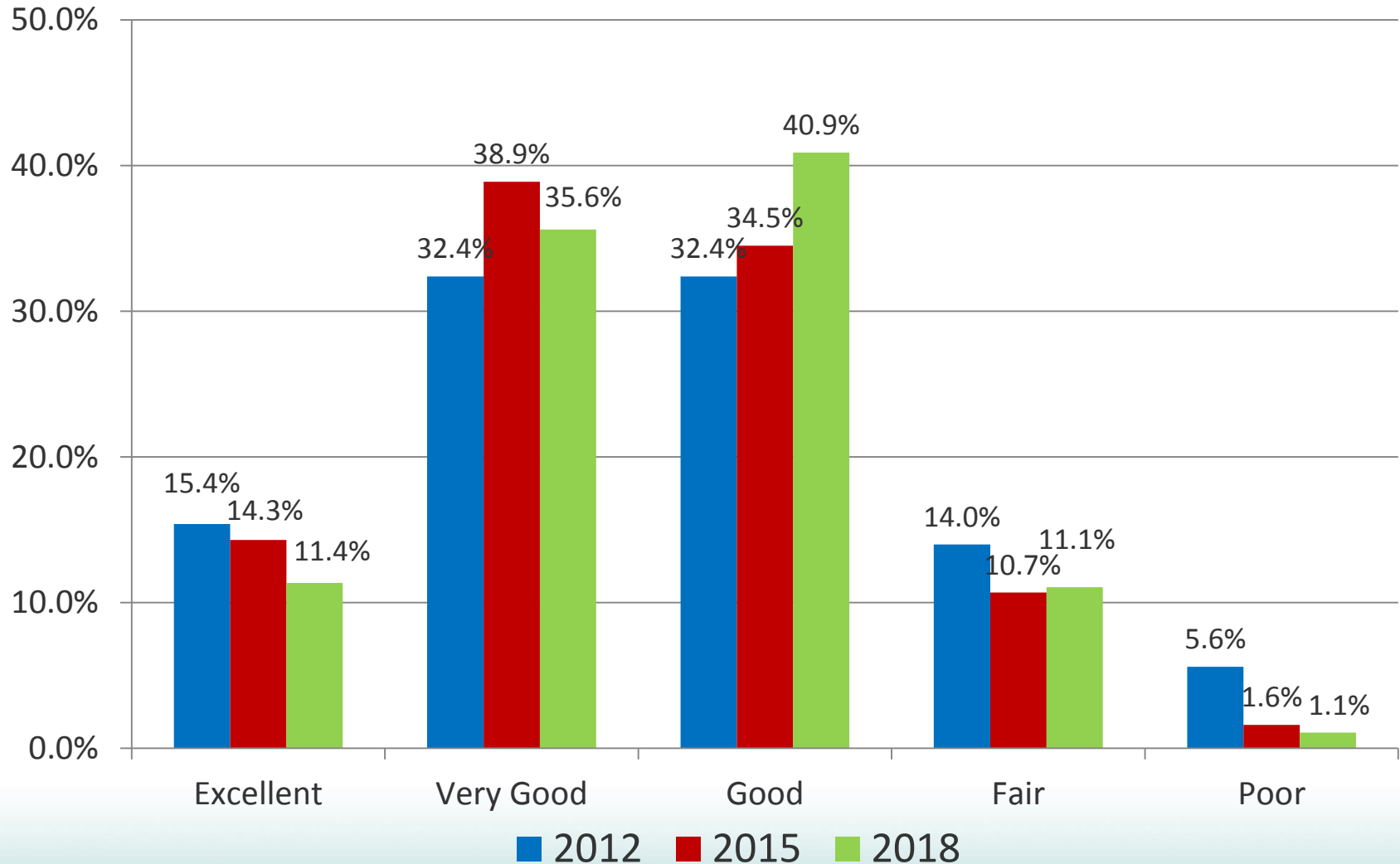
# HEALTH ACCESS

Allen Twigg, Meritus Medical Center

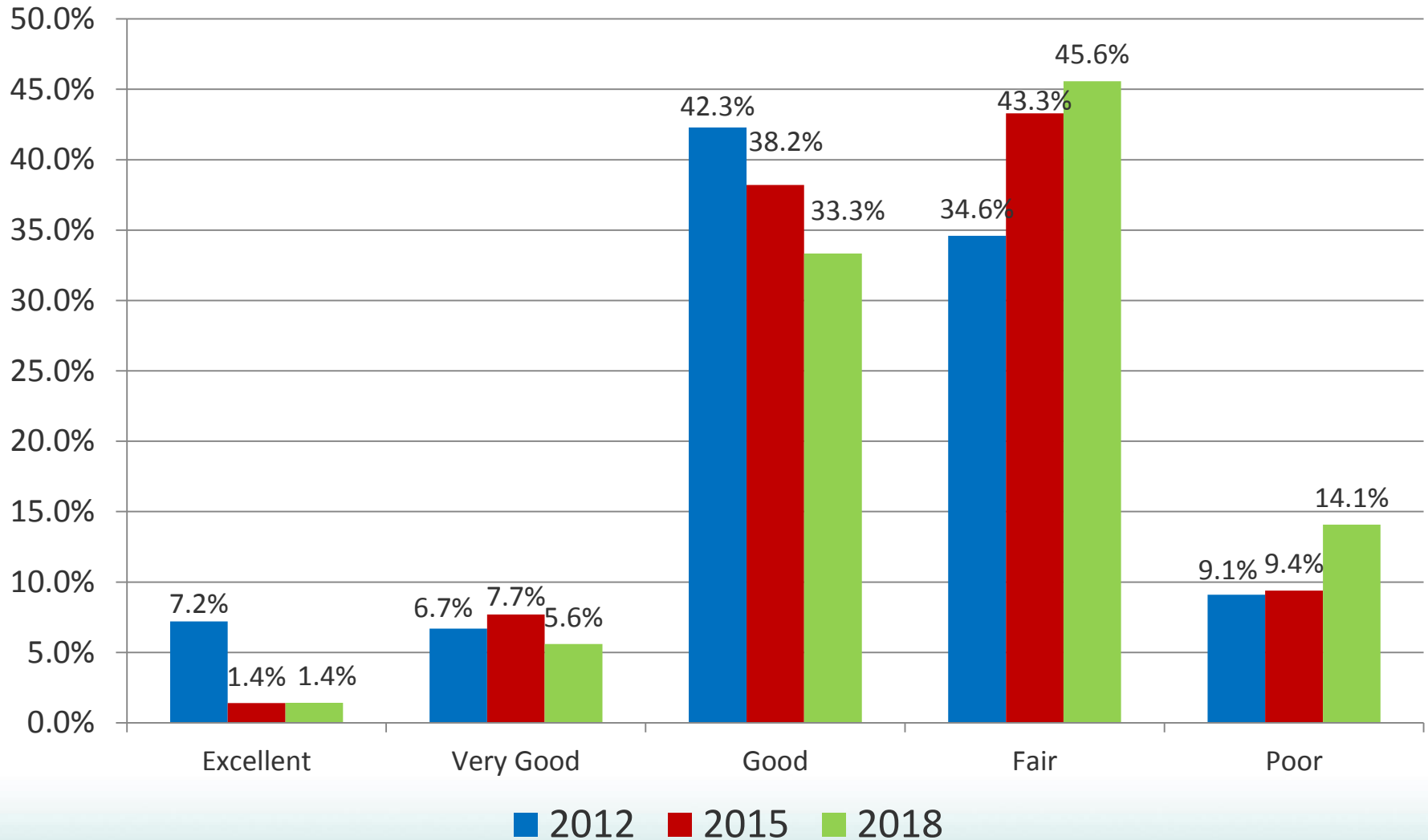




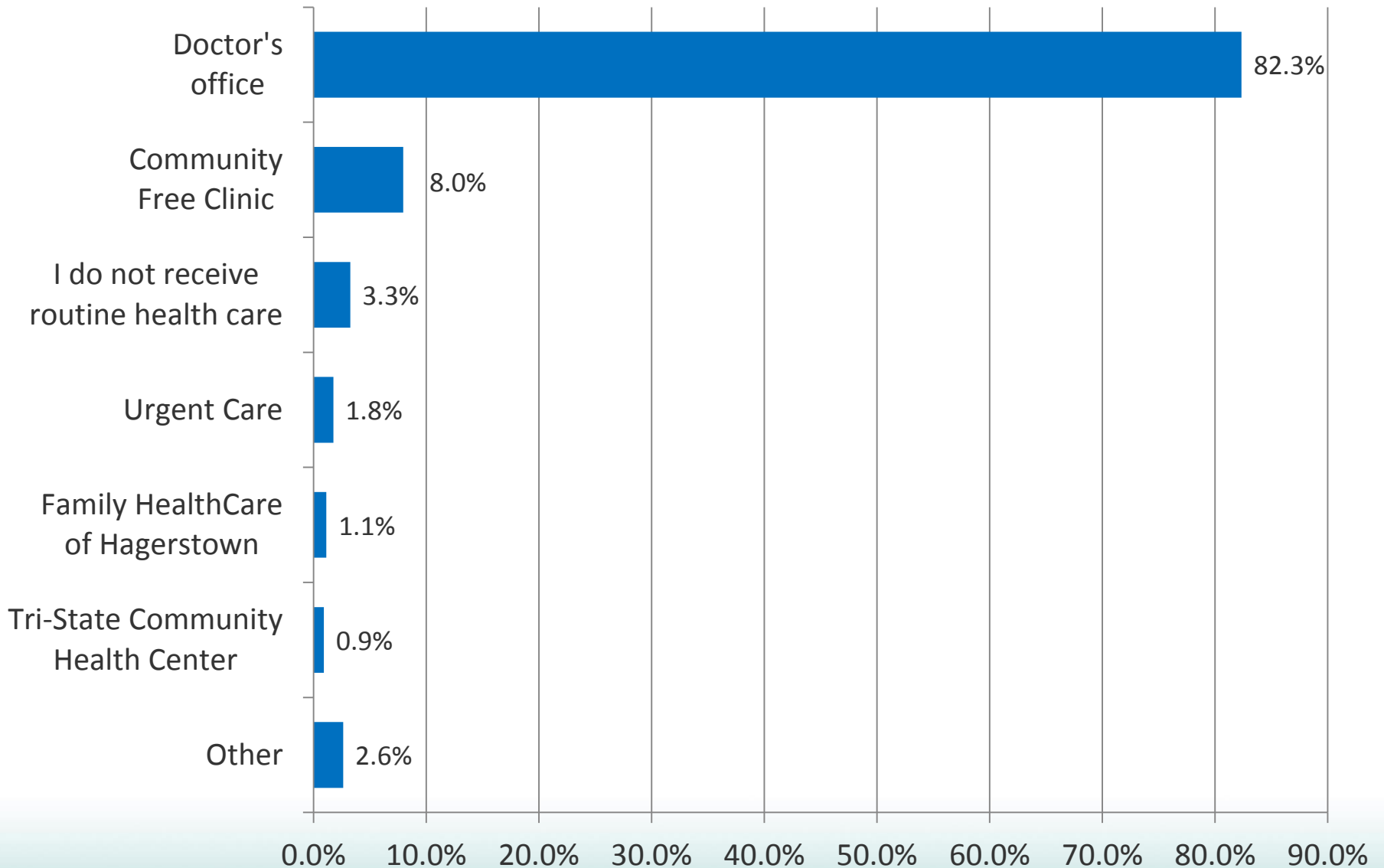
## Q2. In general, how would you rate your overall health?



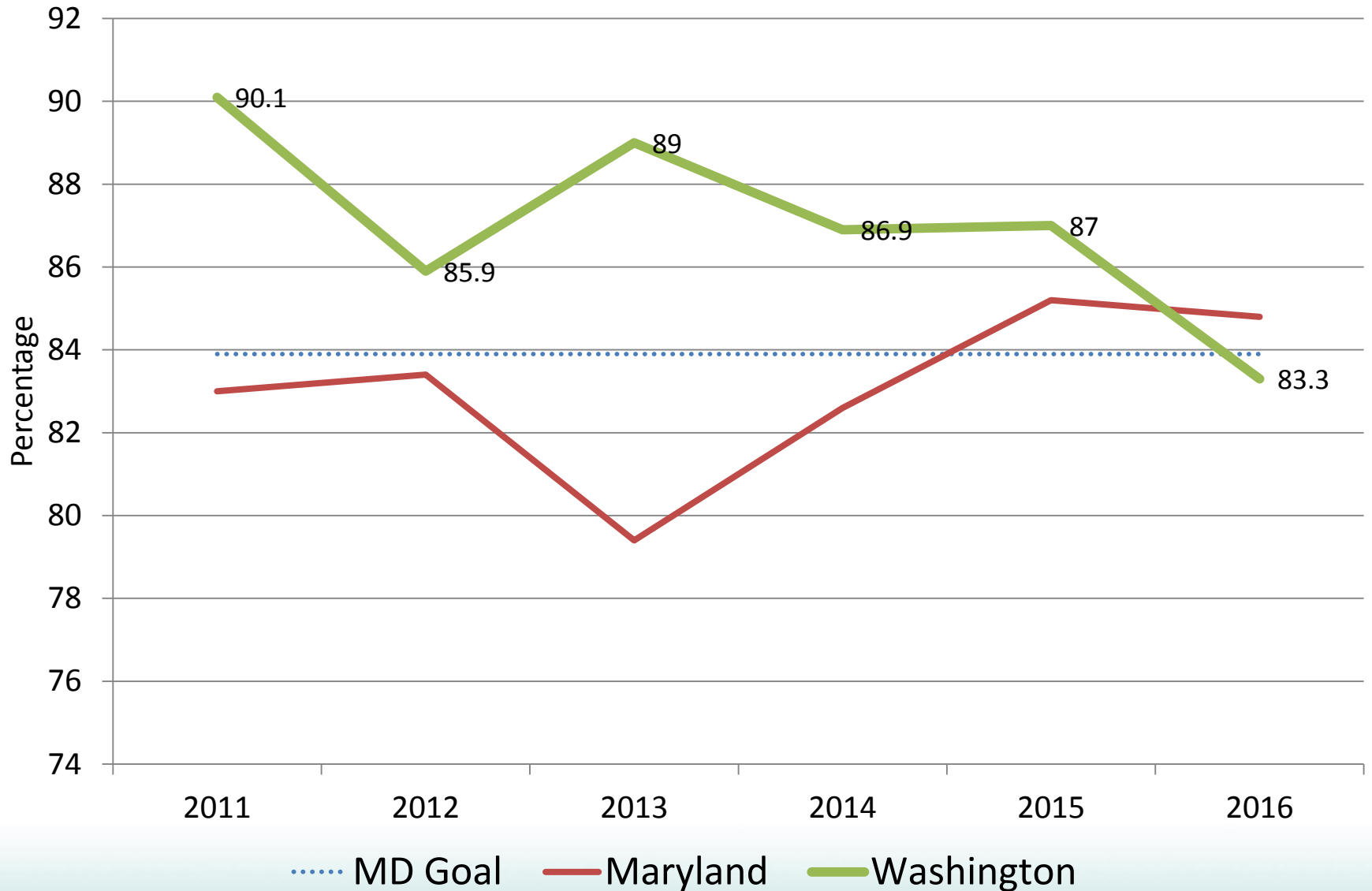
## Q4. Overall, how would you rate the health status of the community?



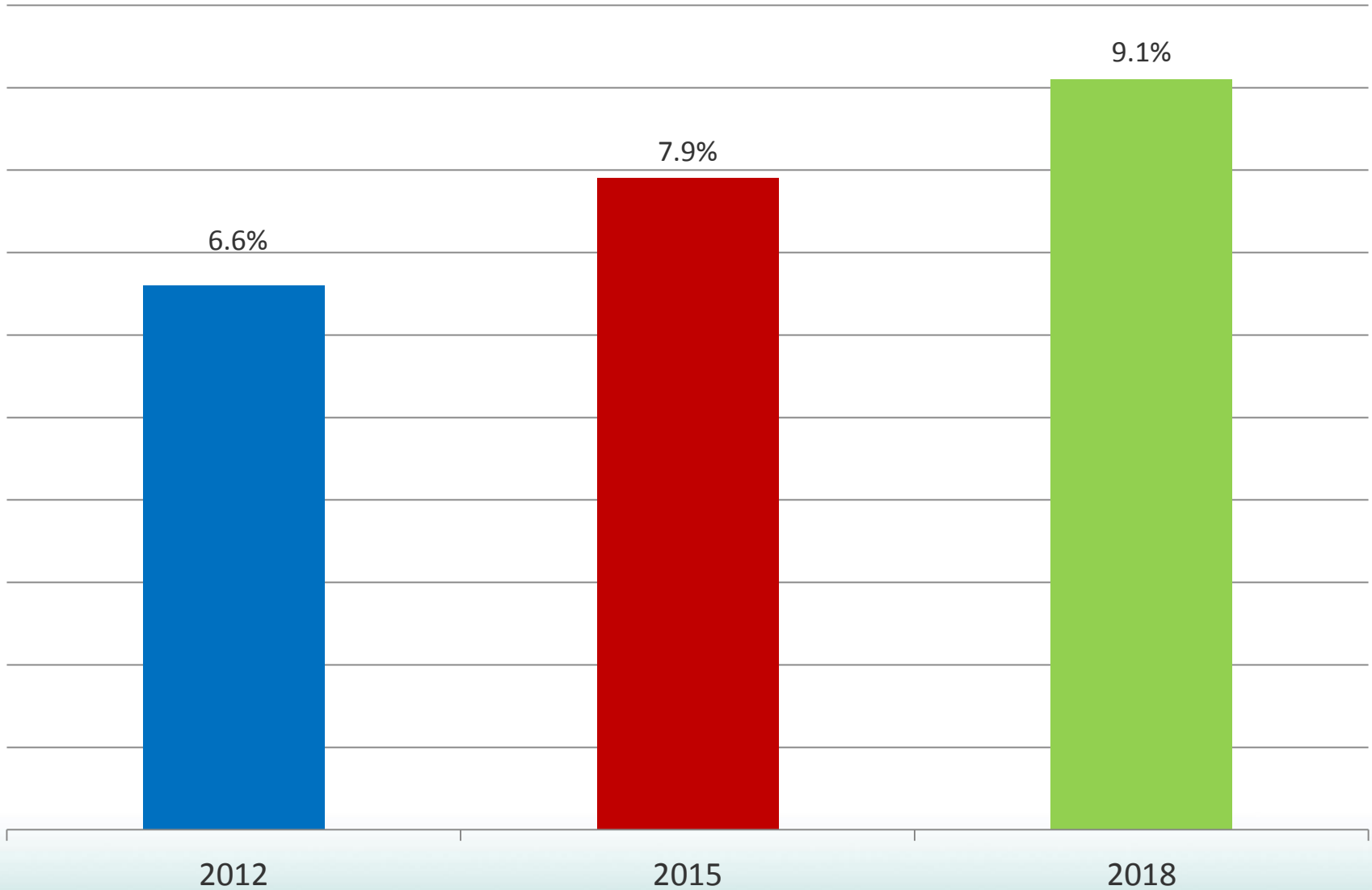
## Q5. Where do you go for routine health care?



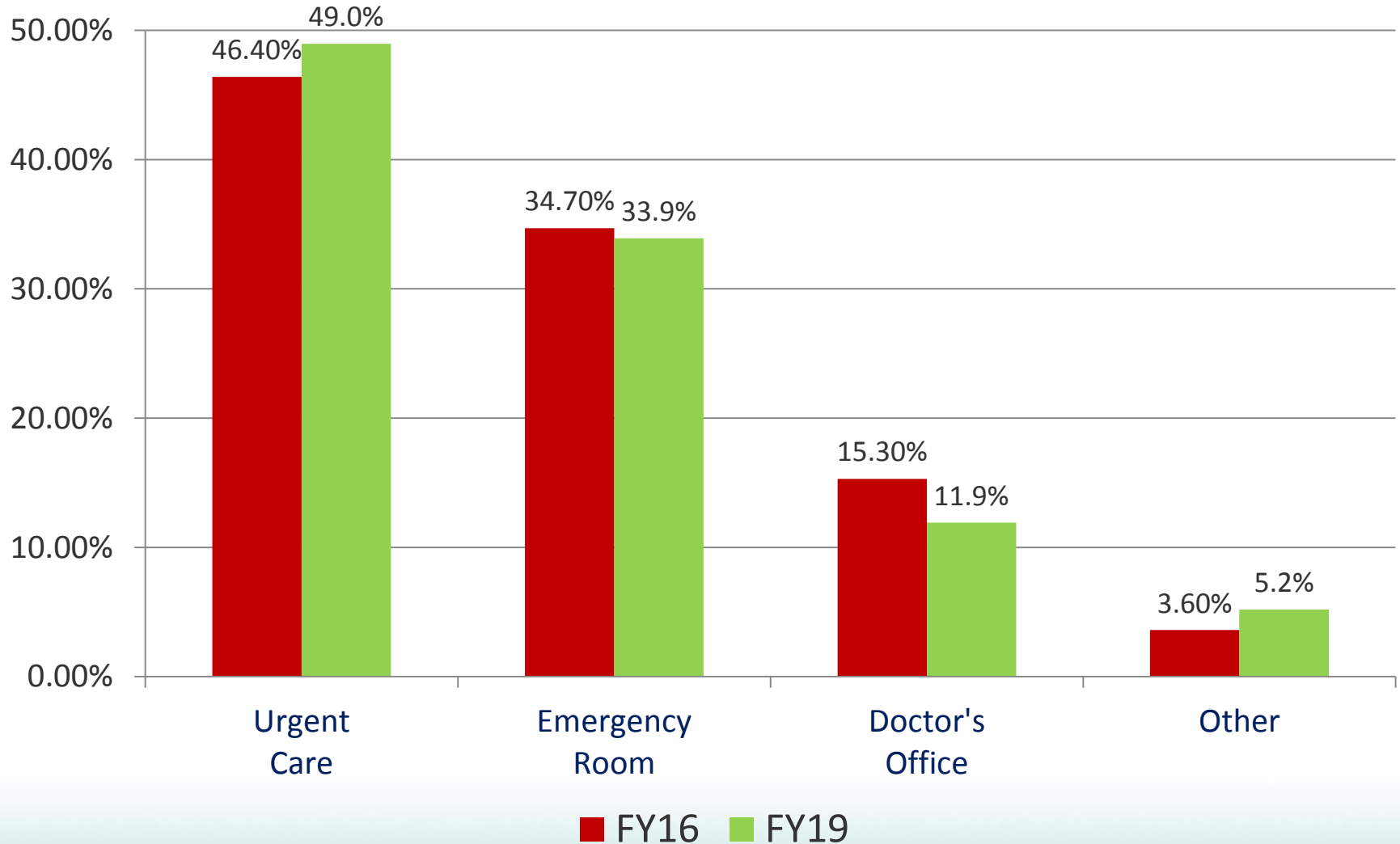
# Persons with a Usual Primary Care Provider



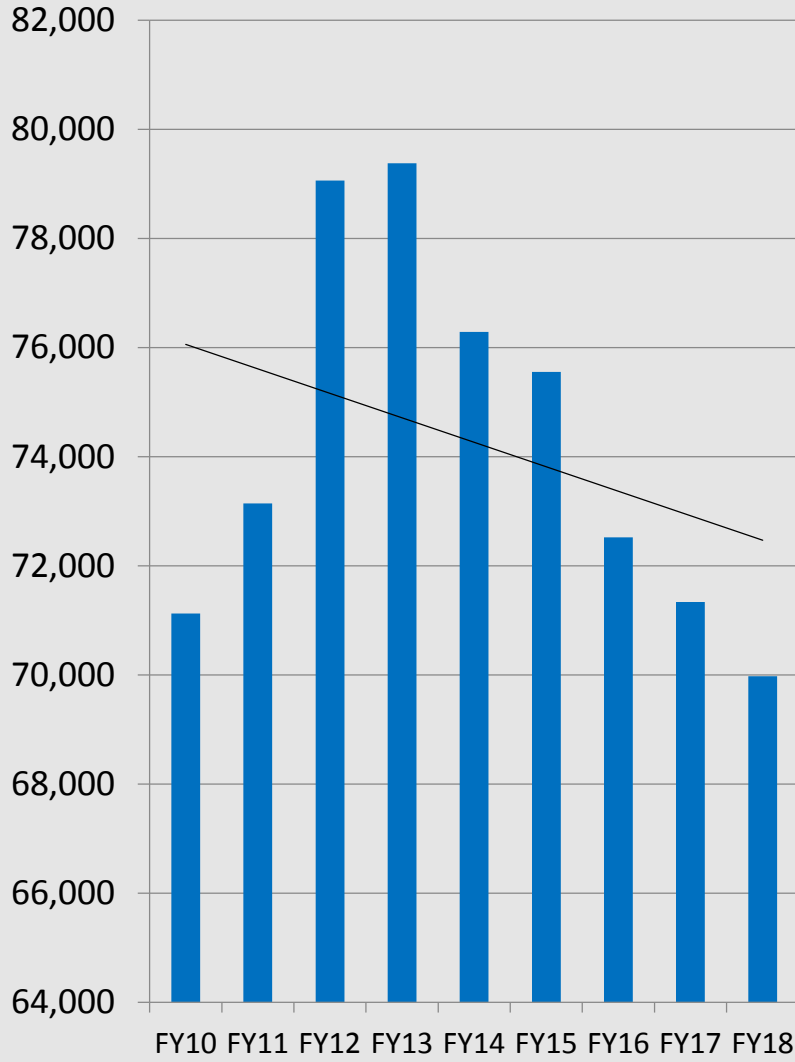
# No personal health care provider



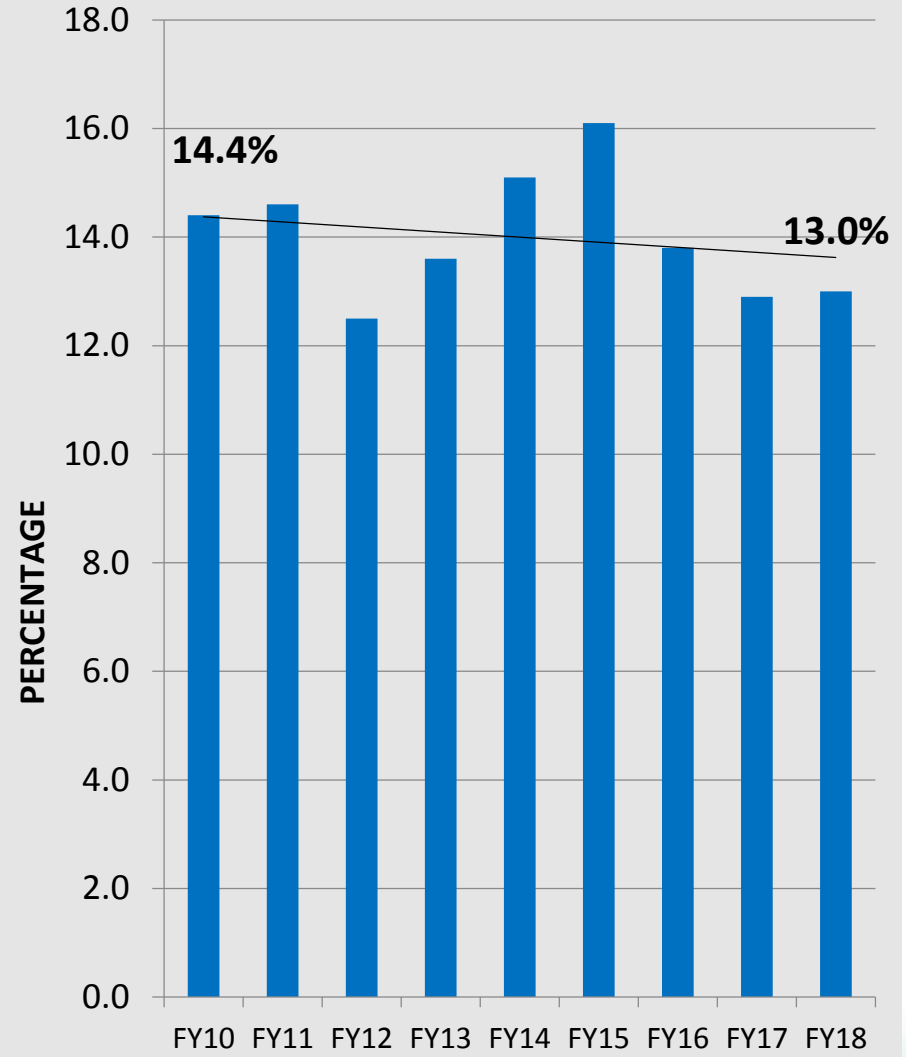
## Q6. If you experienced an immediate medical need, where would you go?



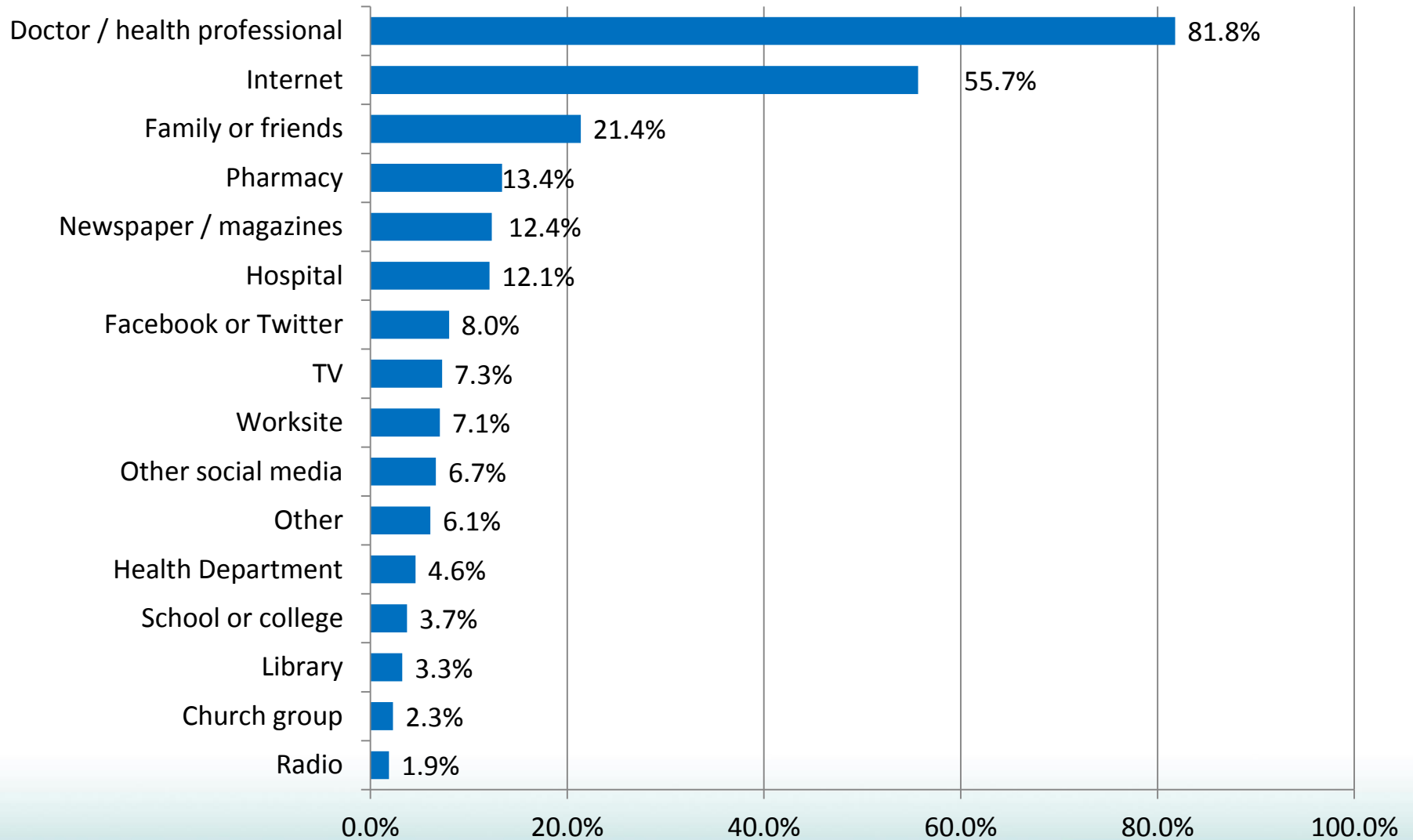
## Total ED Visits



## ER Admitted to Inpatient

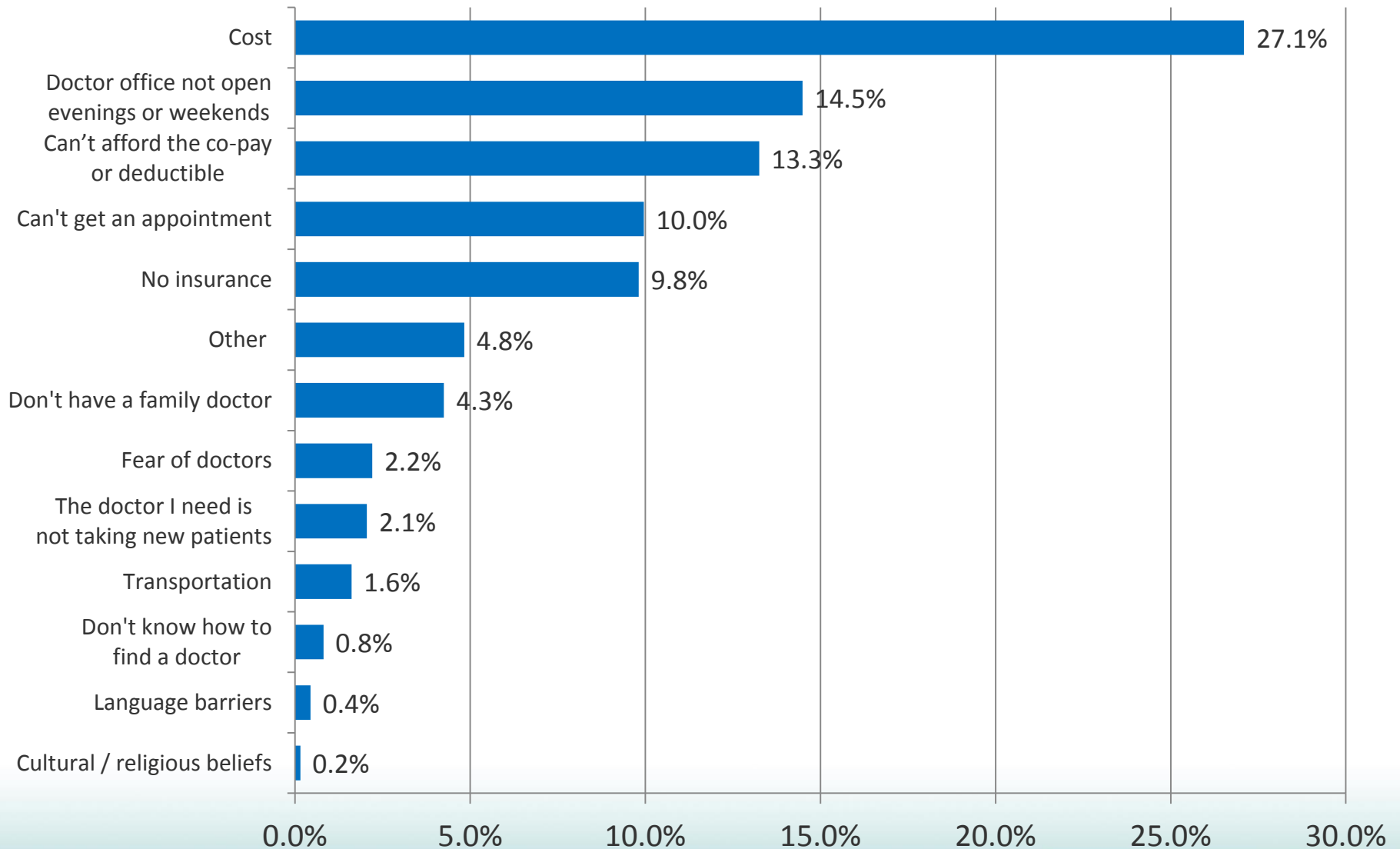


# Q15. Where do you get MOST of your health information?

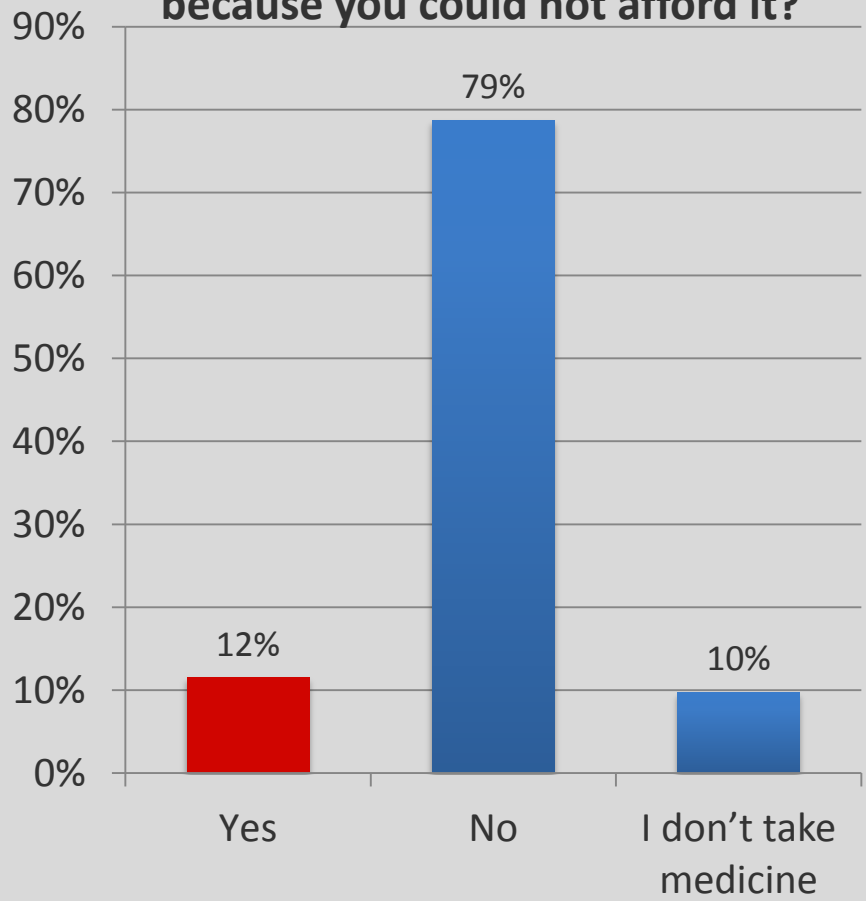




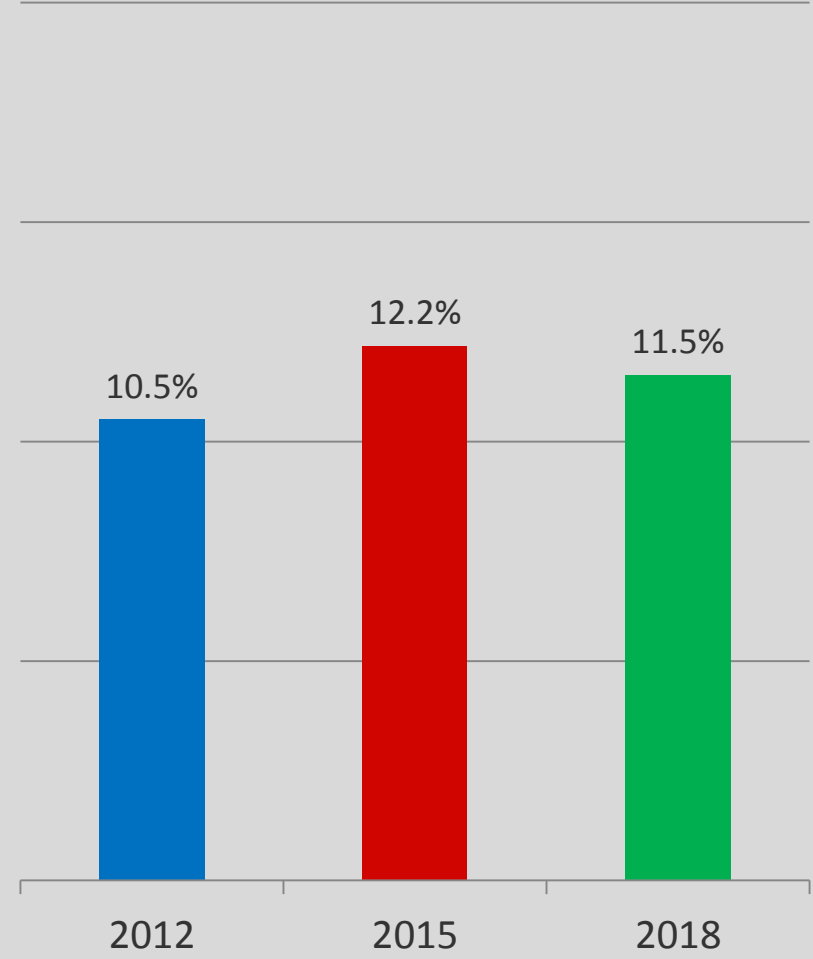
## Q7. Are there any issues that stop you from getting care when you need it?



**Q8. In the past 12 months, have you gone without medicine, or not taken medicine as prescribed because you could not afford it?**



**Q. Gone without Meds – Can't Afford TREND**



# 211 Service Requests

Top service requests Oct 25, 2017 to Oct 24, 2018

TOP REQUEST CATEGORIES    Display as:  PERCENT  COUNT

Housing & Shelter 00 **27,452**

Food 00 **14,134**

Utilities 00 **26,516**

Healthcare 00 **4,648**

Mental Health & Addictions 00 **65,489**

Employment & Income 00 **15,709**

Clothing & Household 00 **3,787**

Child Care & Parenting 00 **336**

Government & Legal 00 **2,891**

Transportation Assistance 00 **723**

Education 00 **217**

Disaster 00 **498**

Other 00 **98,599**

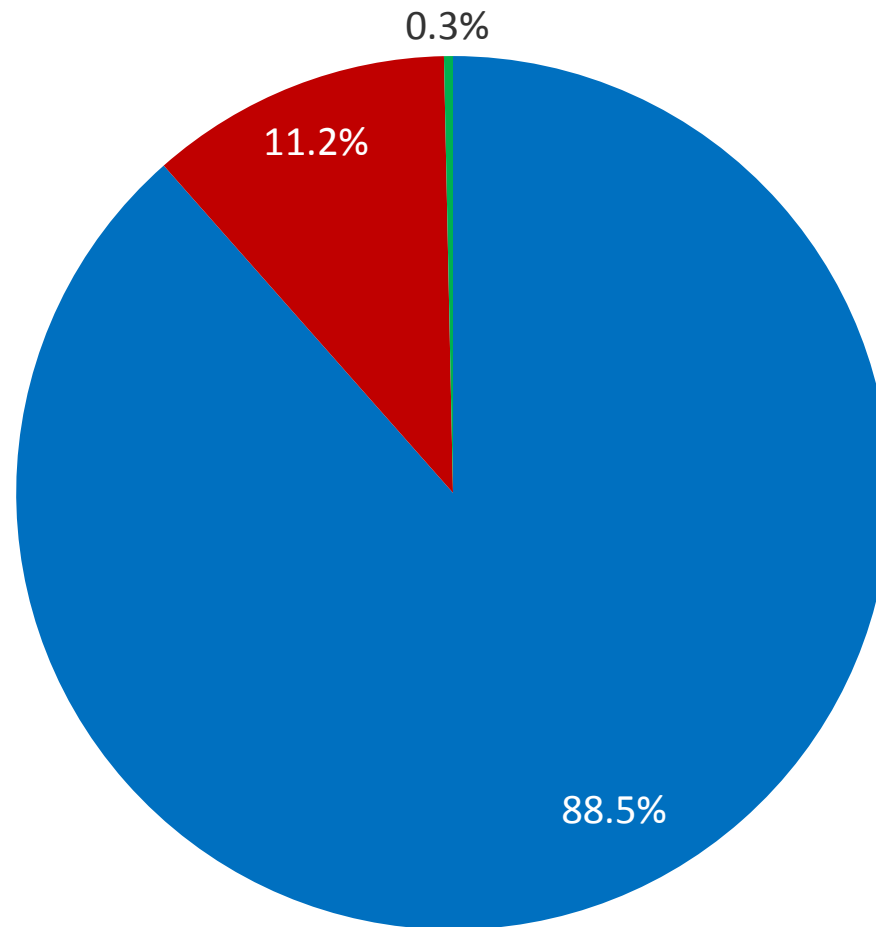
Total for top requests 00 **260,999**

# HEALTH COVERAGE

Nefertiti Guillaume,  
Maryland Health Connection

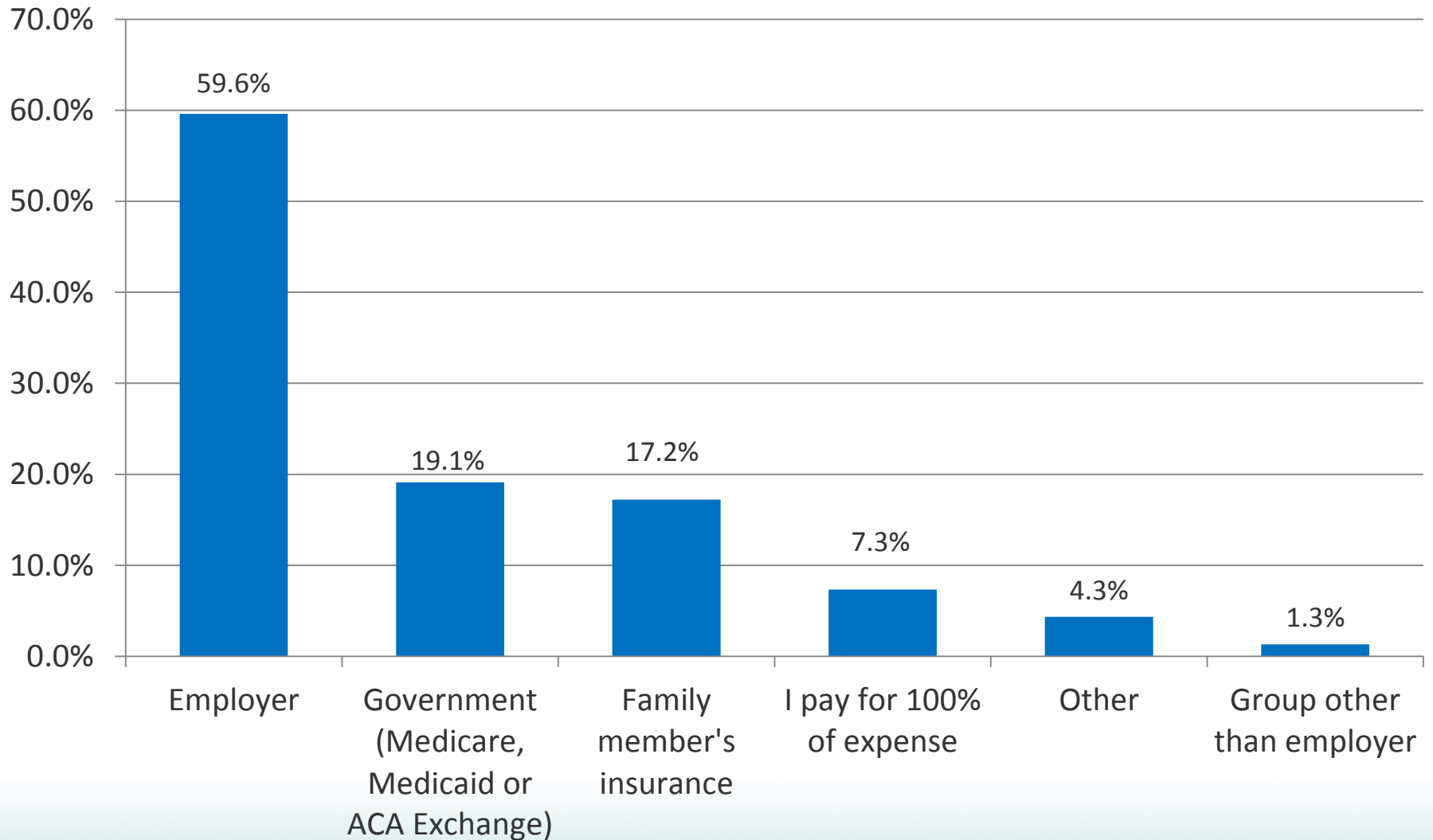


## Q29. Do you currently have health insurance?

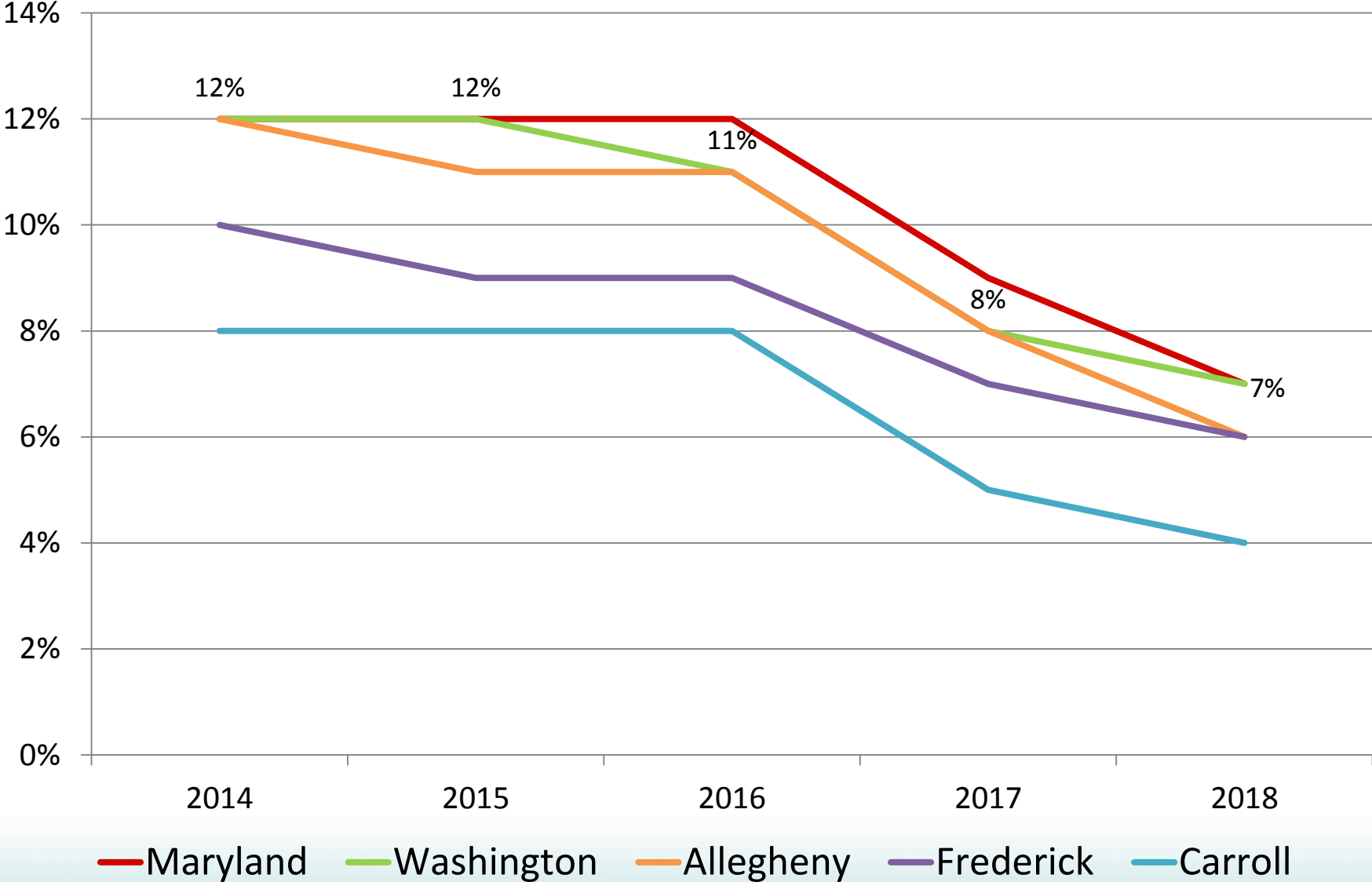


■ Yes ■ No ■ Don't know

## Q30. Who helps pay for your health insurance?

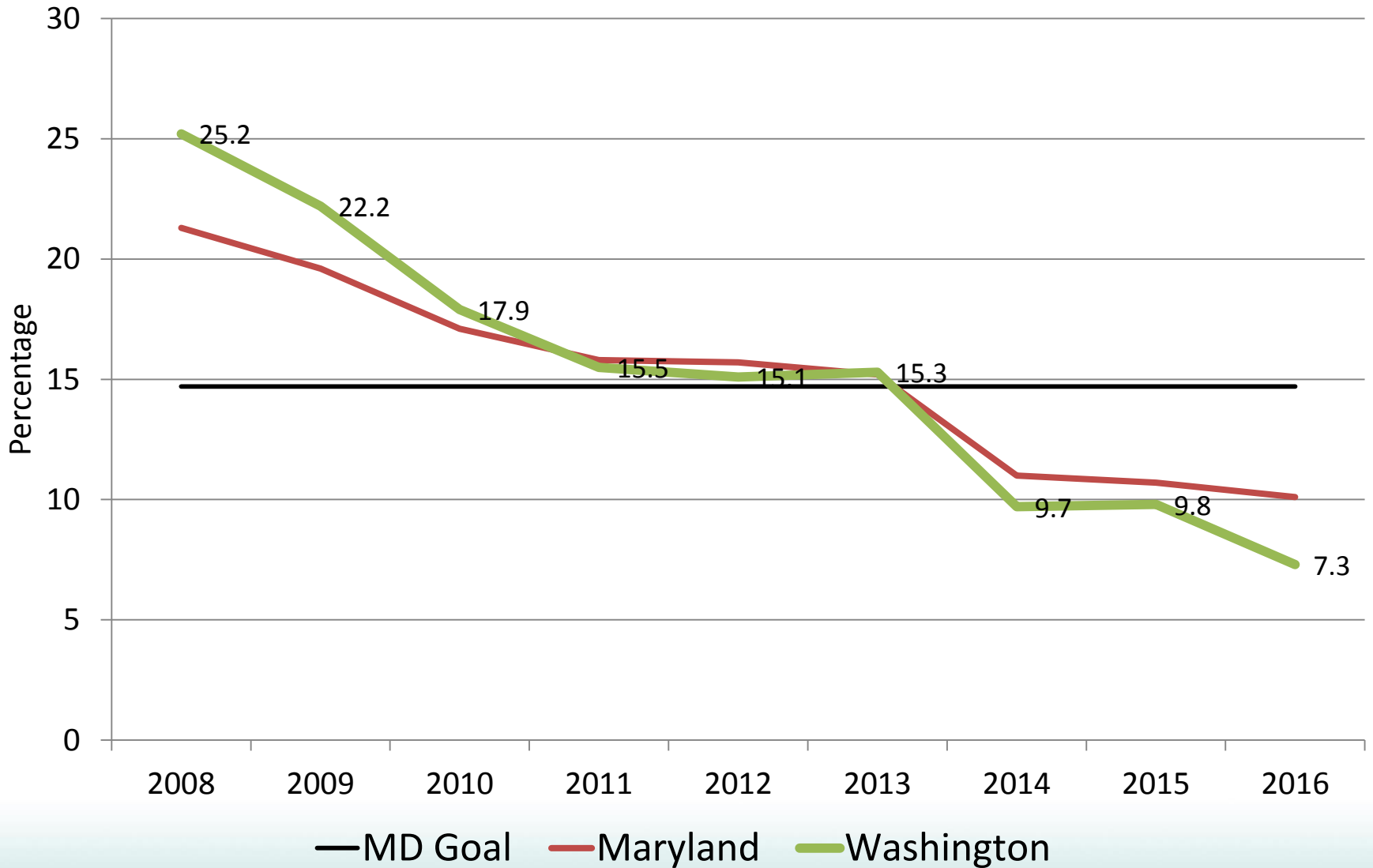


# Washington County Uninsured Rate



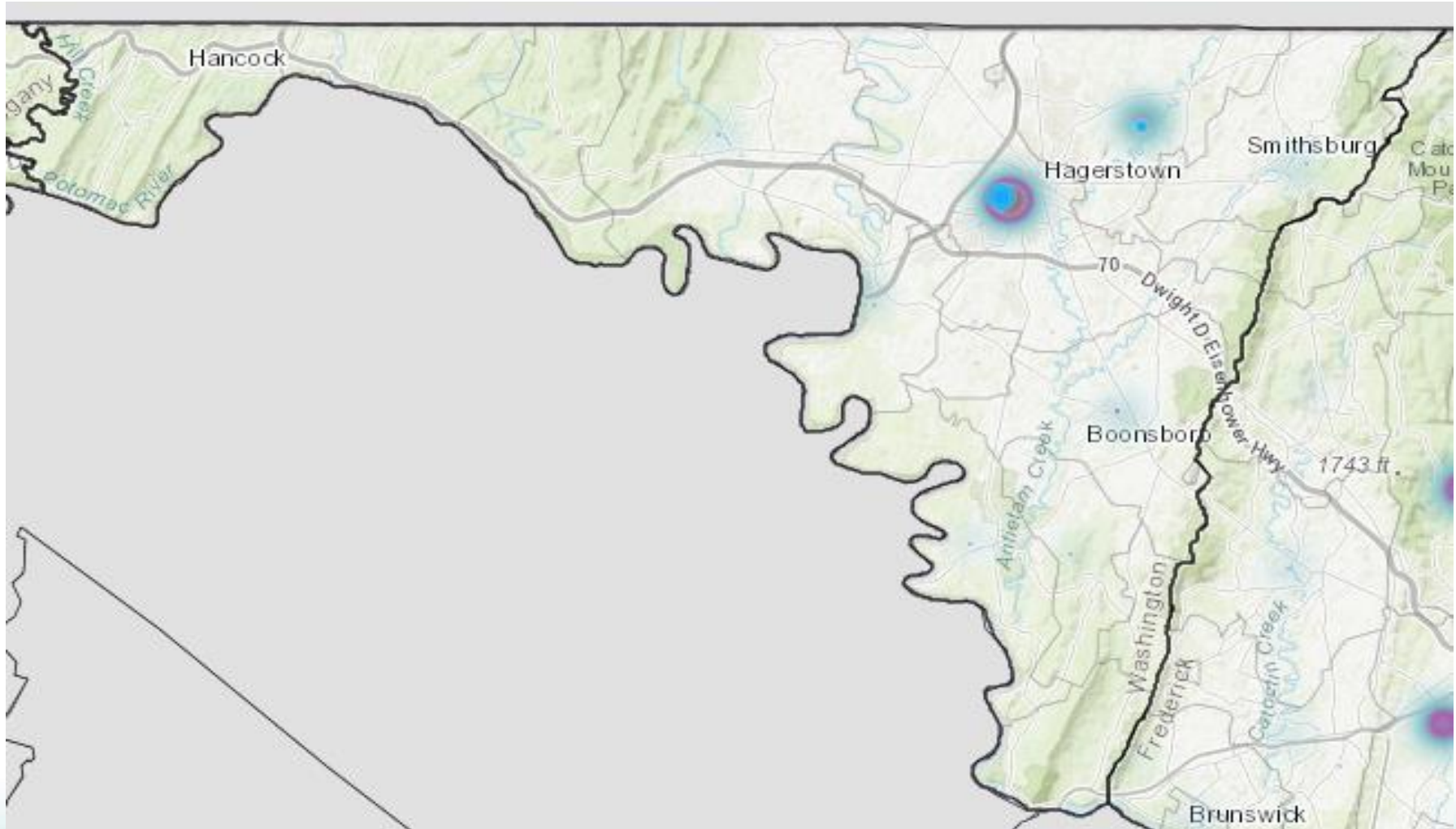
Source: RJW County Health Factors 2018

# Uninsured ED Visits

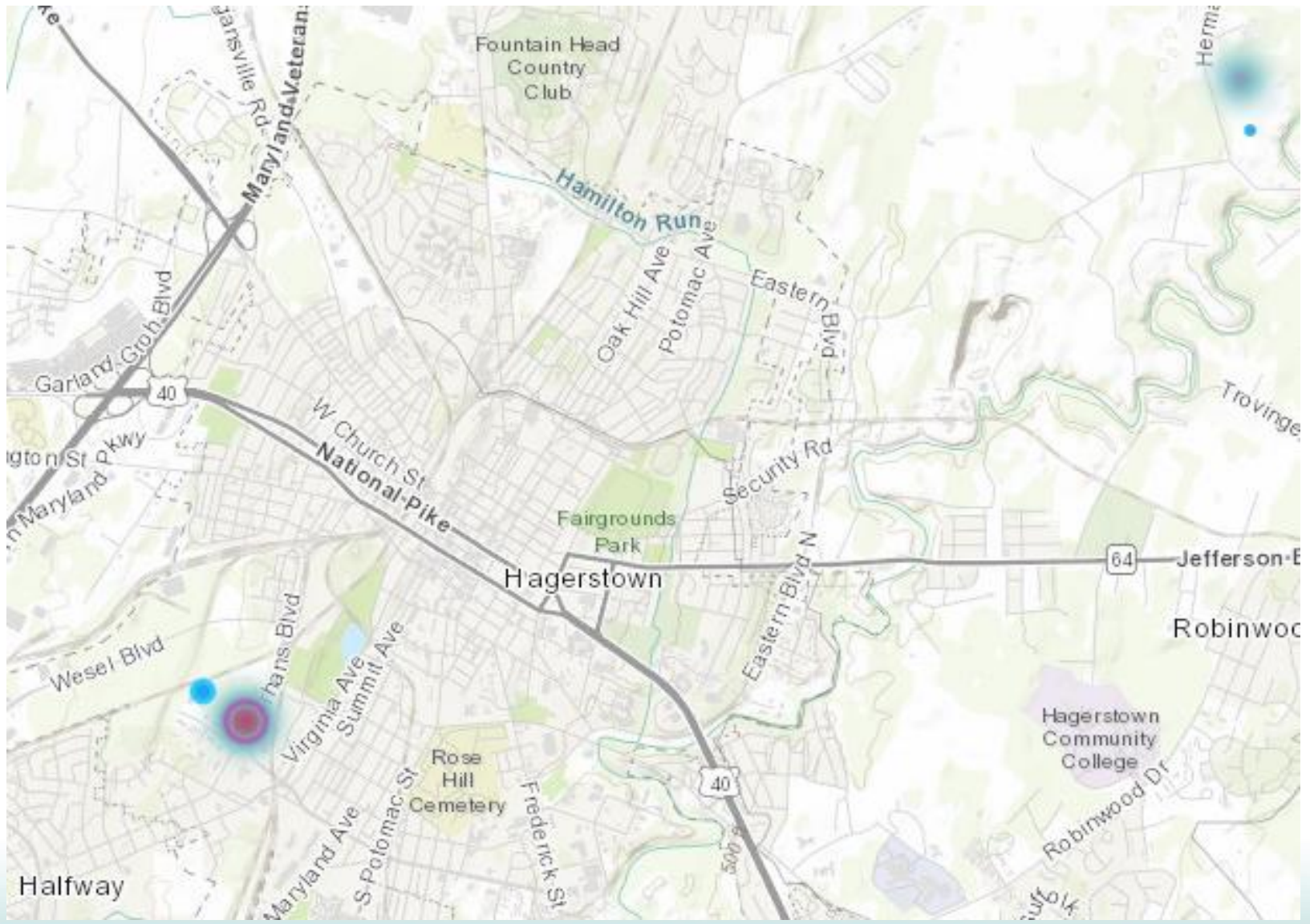




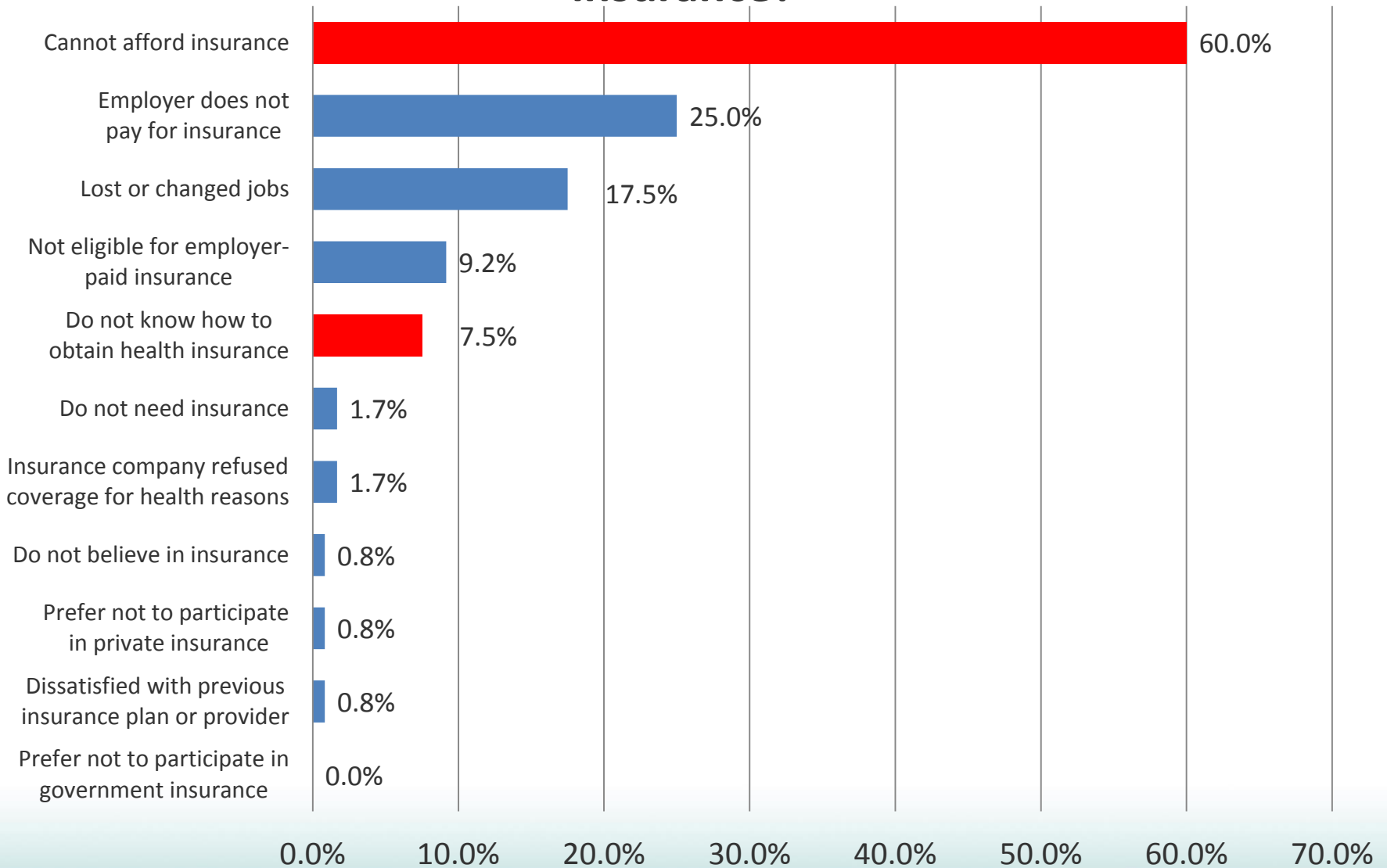
# Uninsured Washington County Residents



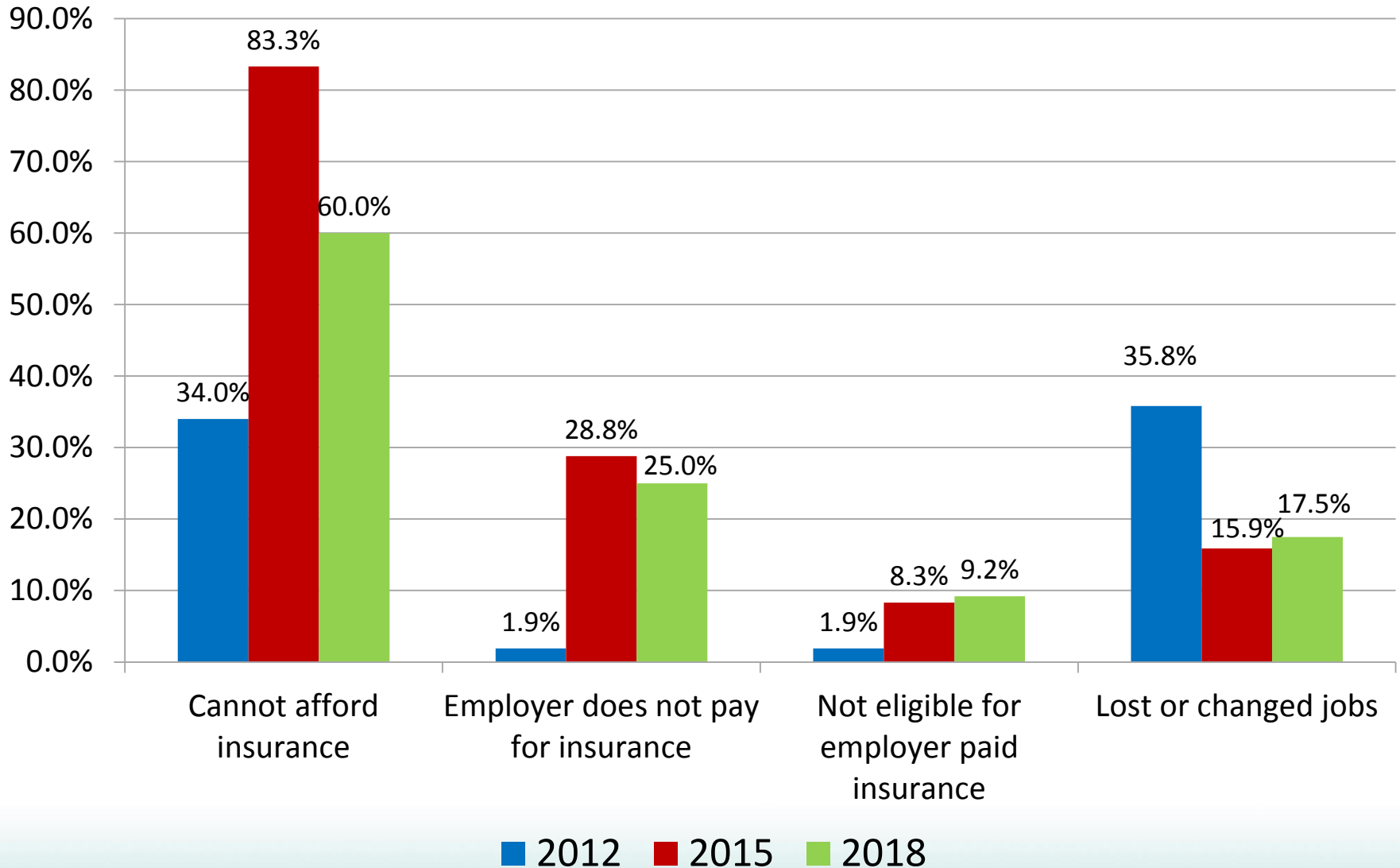
# Uninsured Hot Spots



# Q31. Why do you currently not have health insurance?



## Q: Why do you not have health insurance?



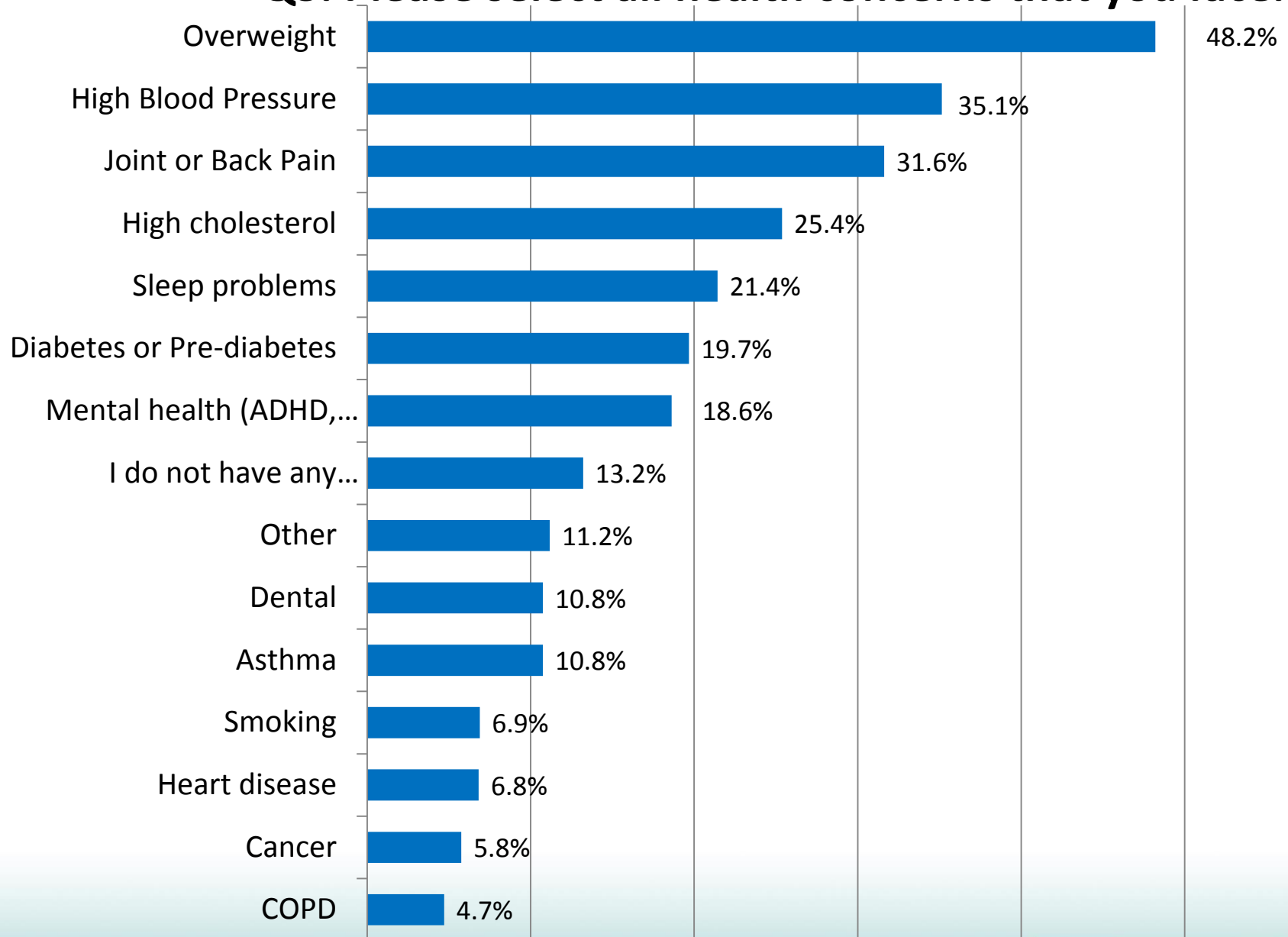


# HEALTHY LIFESTYLE

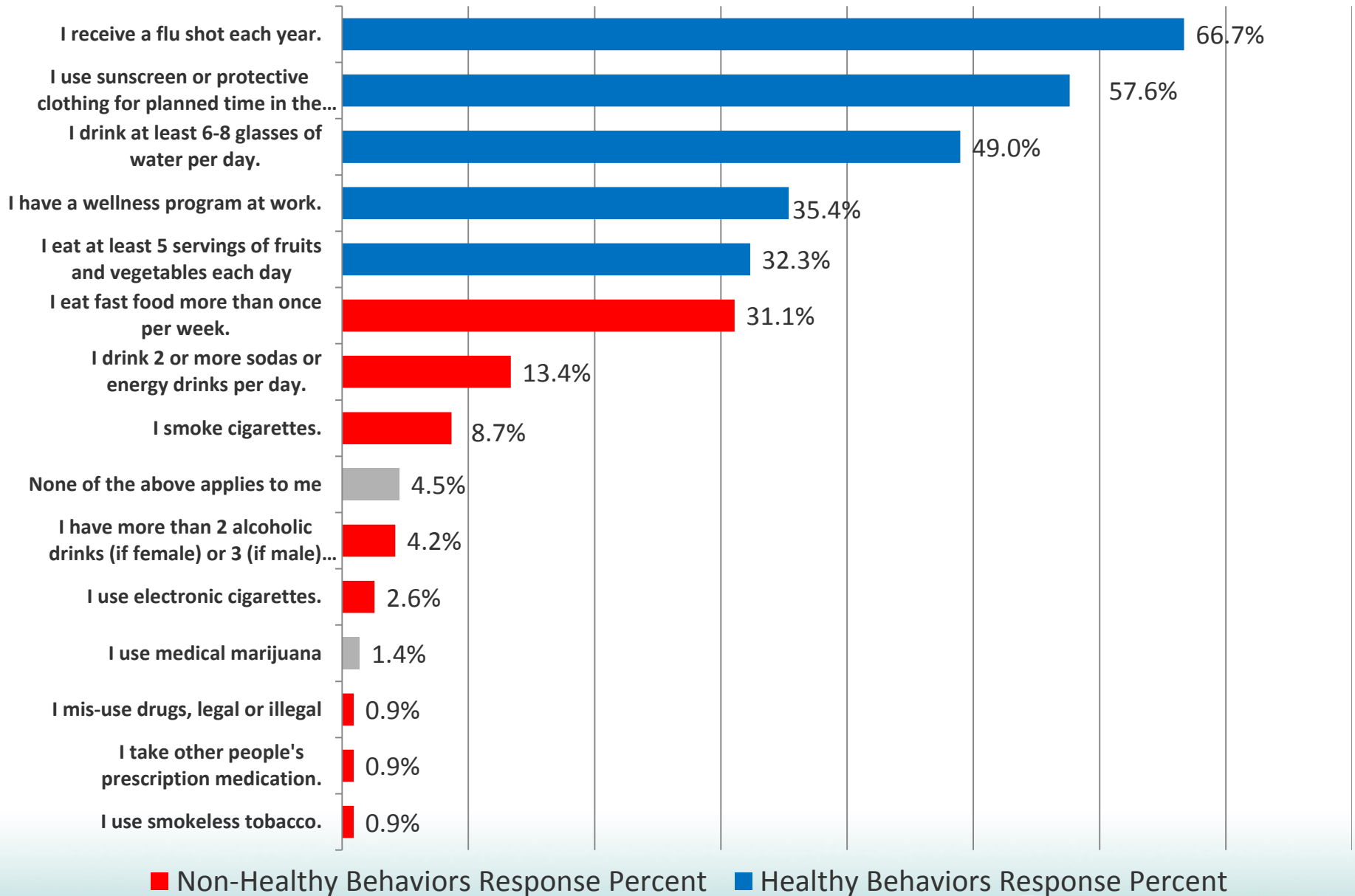
Deb Lehr, BA, RN, BSN, CCRN, CRN  
Meritus Community Health & Wellness



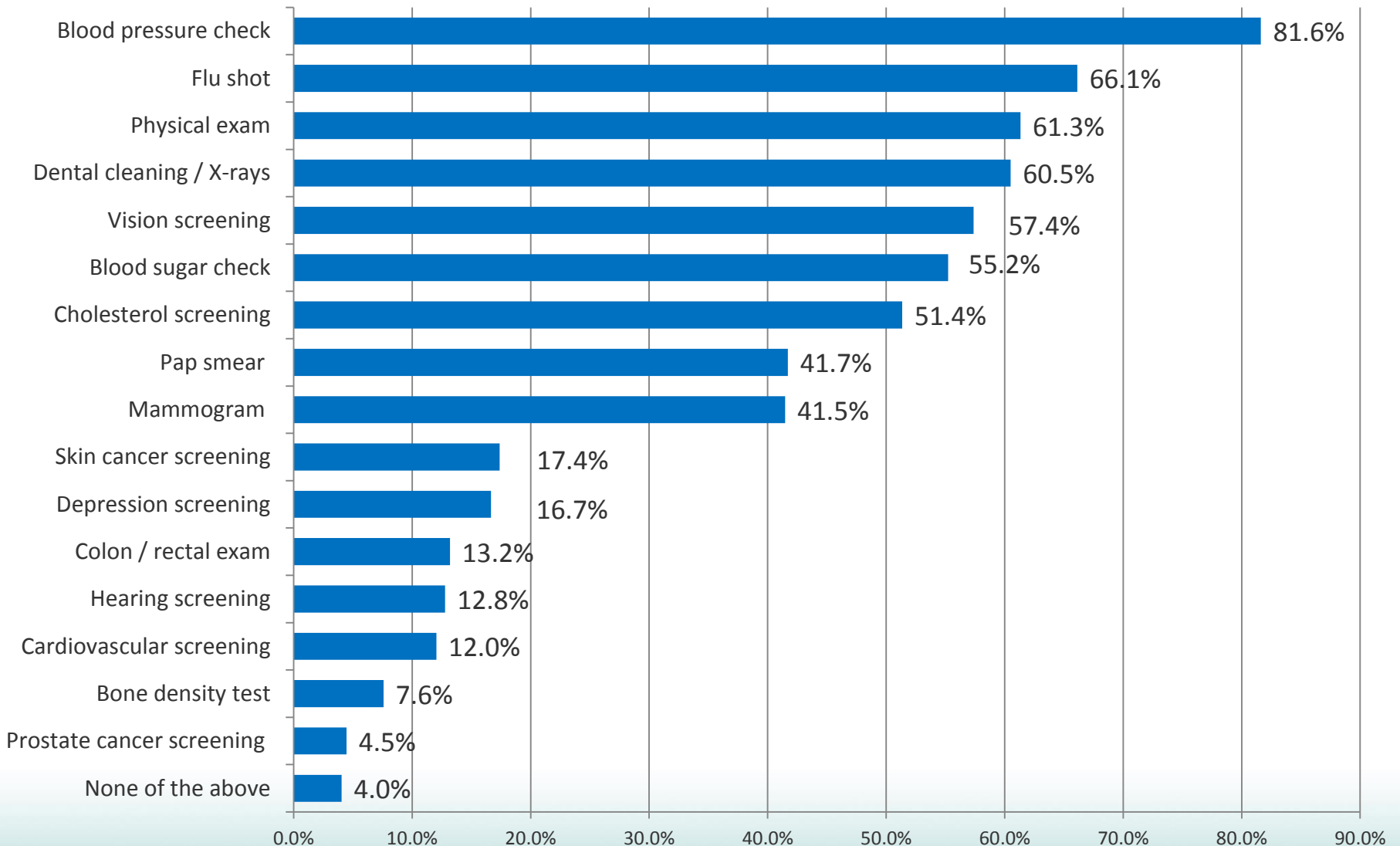
### Q3. Please select all health concerns that you face.



## Q23. Please choose ALL statements below that apply to you.



## Q24. Which of the following preventive procedures have you had in the past 12 months?





# OVERWEIGHT OBESE

Allen Twigg, Meritus Community Health  
Mary McPherson, MD Dept. of Health



# Obesity Trends Among U.S. Adults

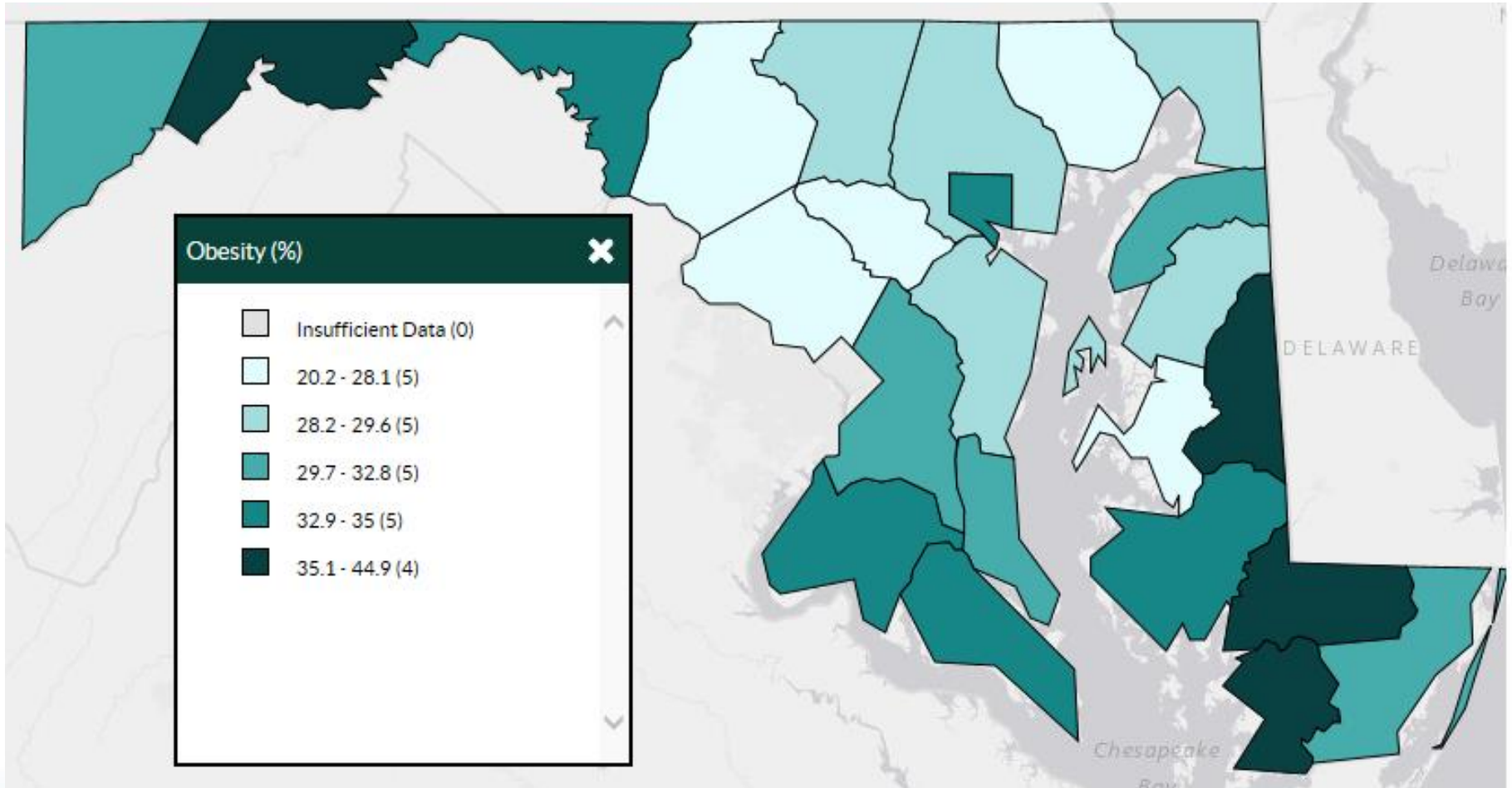


\*BMI  $\geq 30$ , or  $\sim 30$  lbs. overweight for 5' 4" person.

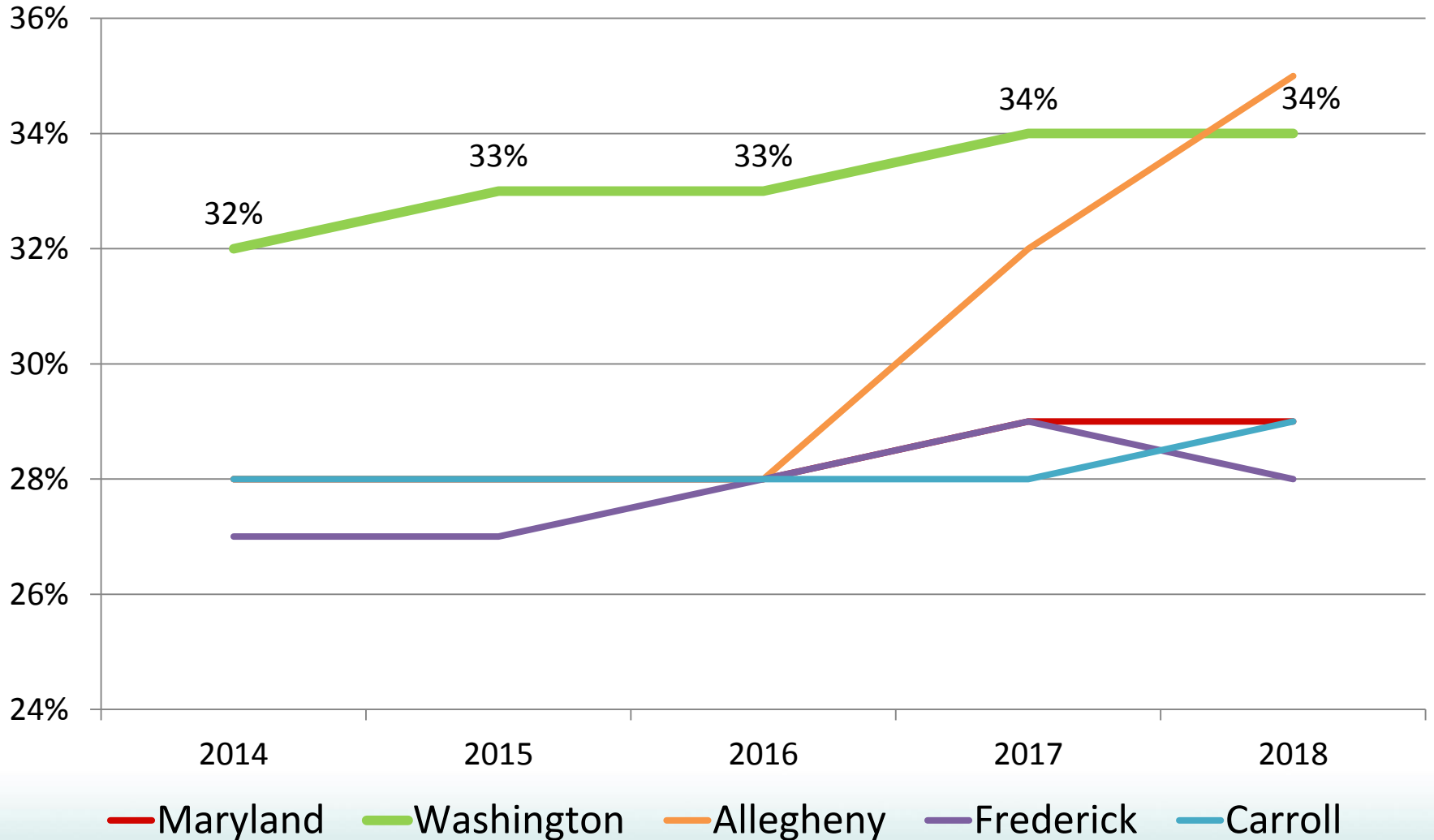
Data: Behavioral Risk Factor Surveillance System (1985, 2008, 2016), CDC.

Source: D. Blumenthal and S. Seervai, "[Rising Obesity in the United States Is a Public Health Crisis](#)," *To the Point*, the Commonwealth Fund, Apr. 23, 2018.

# Obesity Percentage



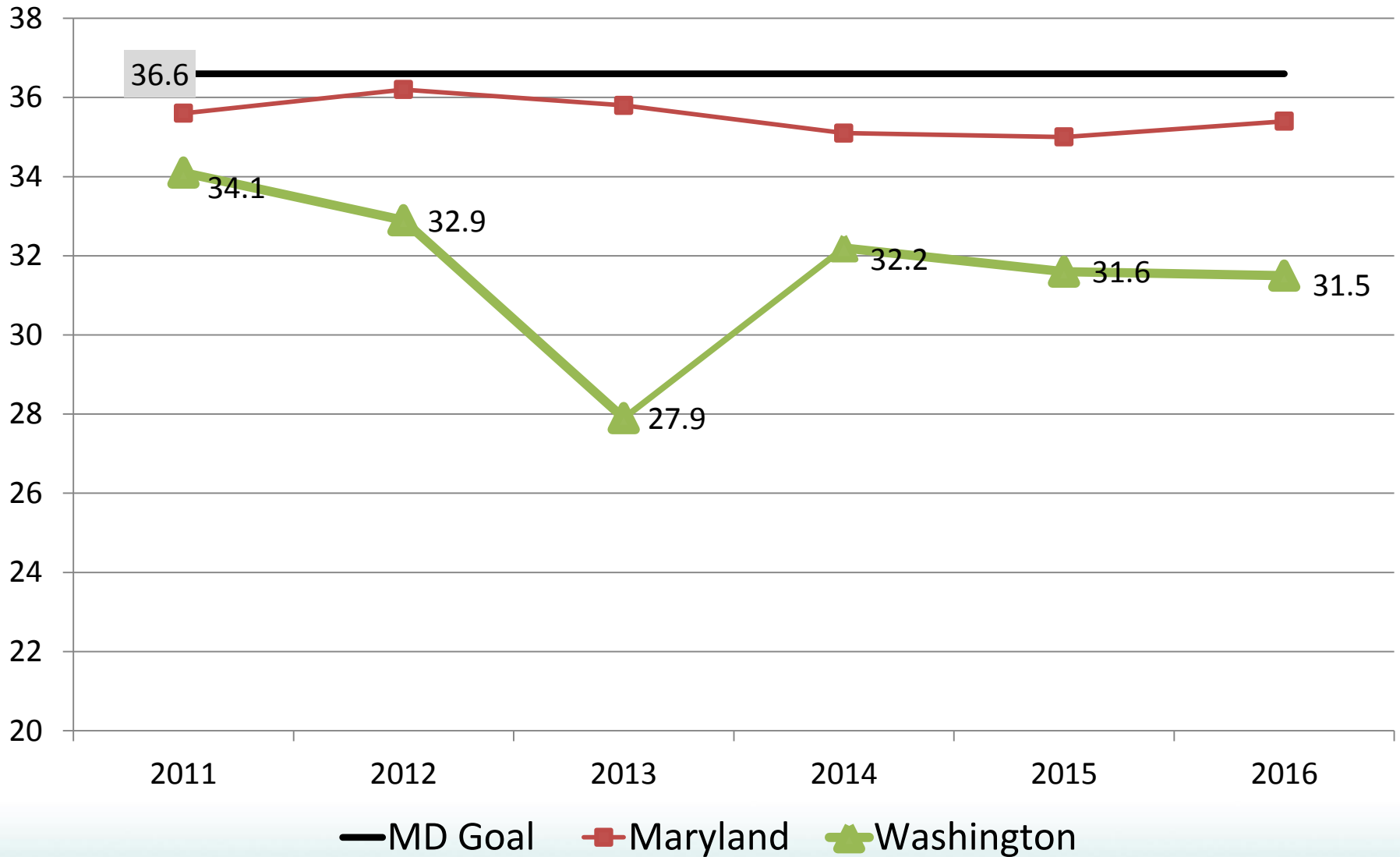
# Washington County Adult Obesity BMI > 30



Adult Obesity: Percentage of adults that report a BMI of 30 or more.

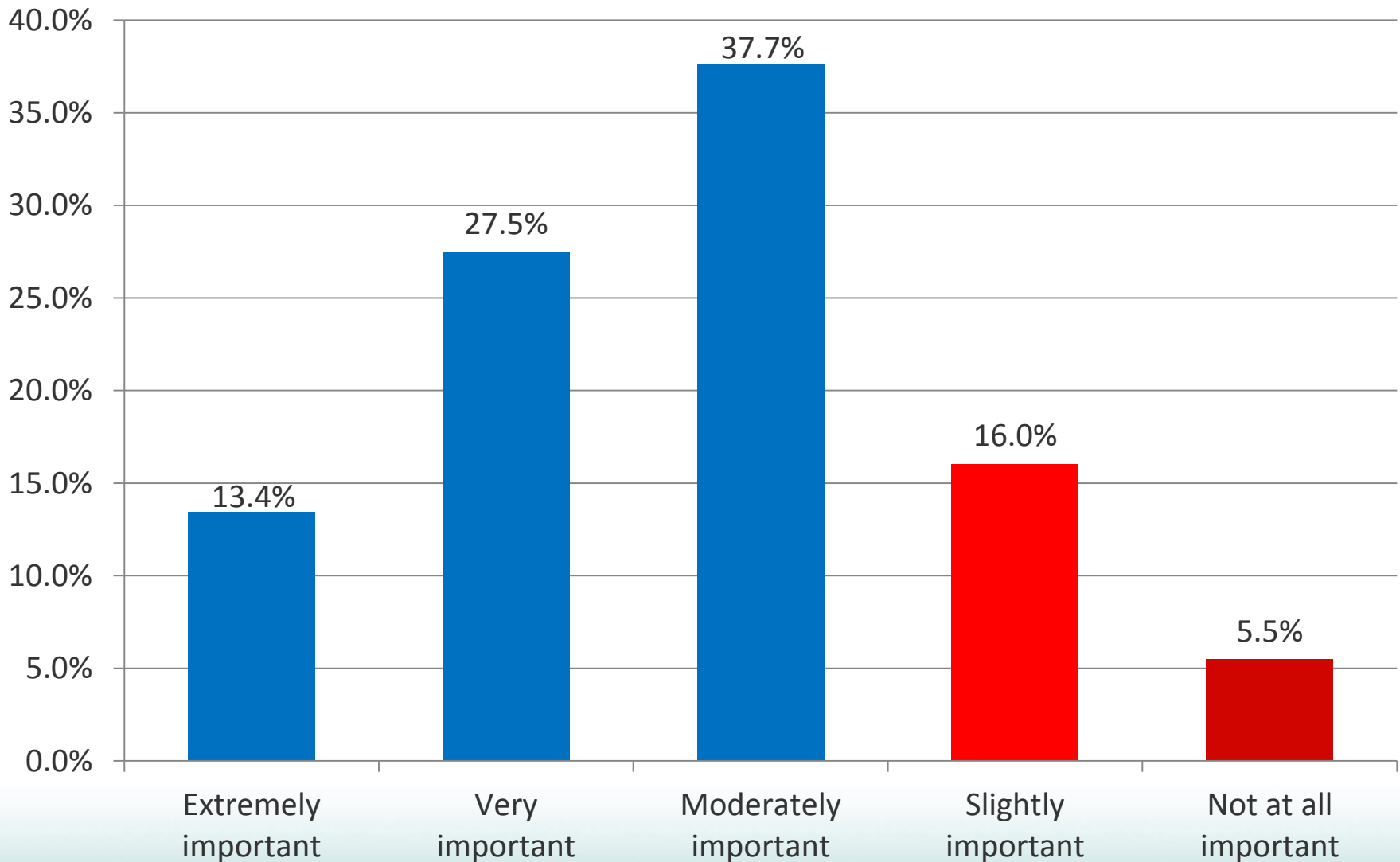
Source: RWJ County Health Rankings 2018

# Adults Who Are Not Overweight or Obese

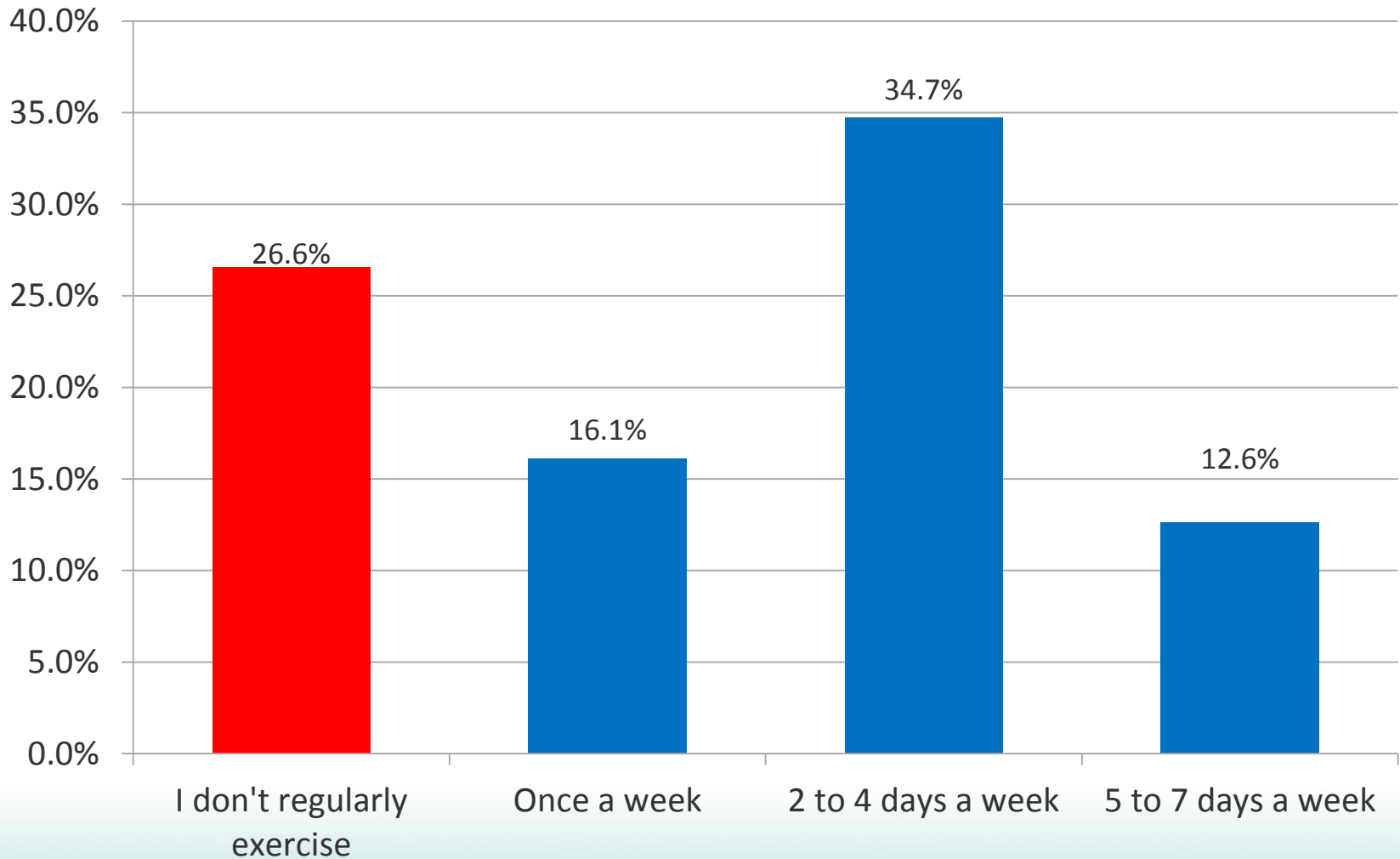


Adult Obesity: This indicator shows the percentage of adults who are not overweight or obese.  
Source: SHIP 2018

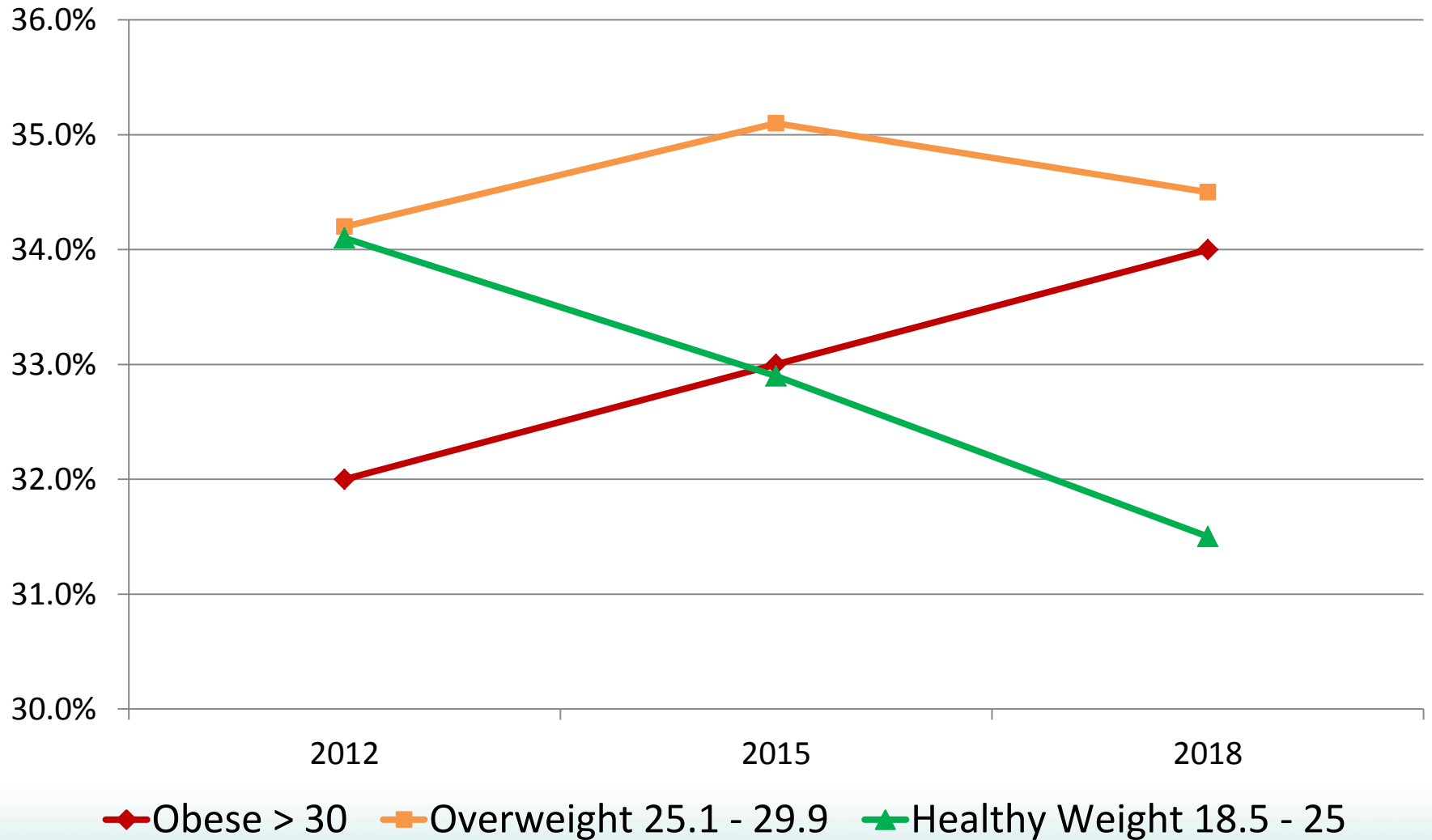
## Q25. How important is exercise to you?



## Q26. In a typical week, how many days do you exercise?

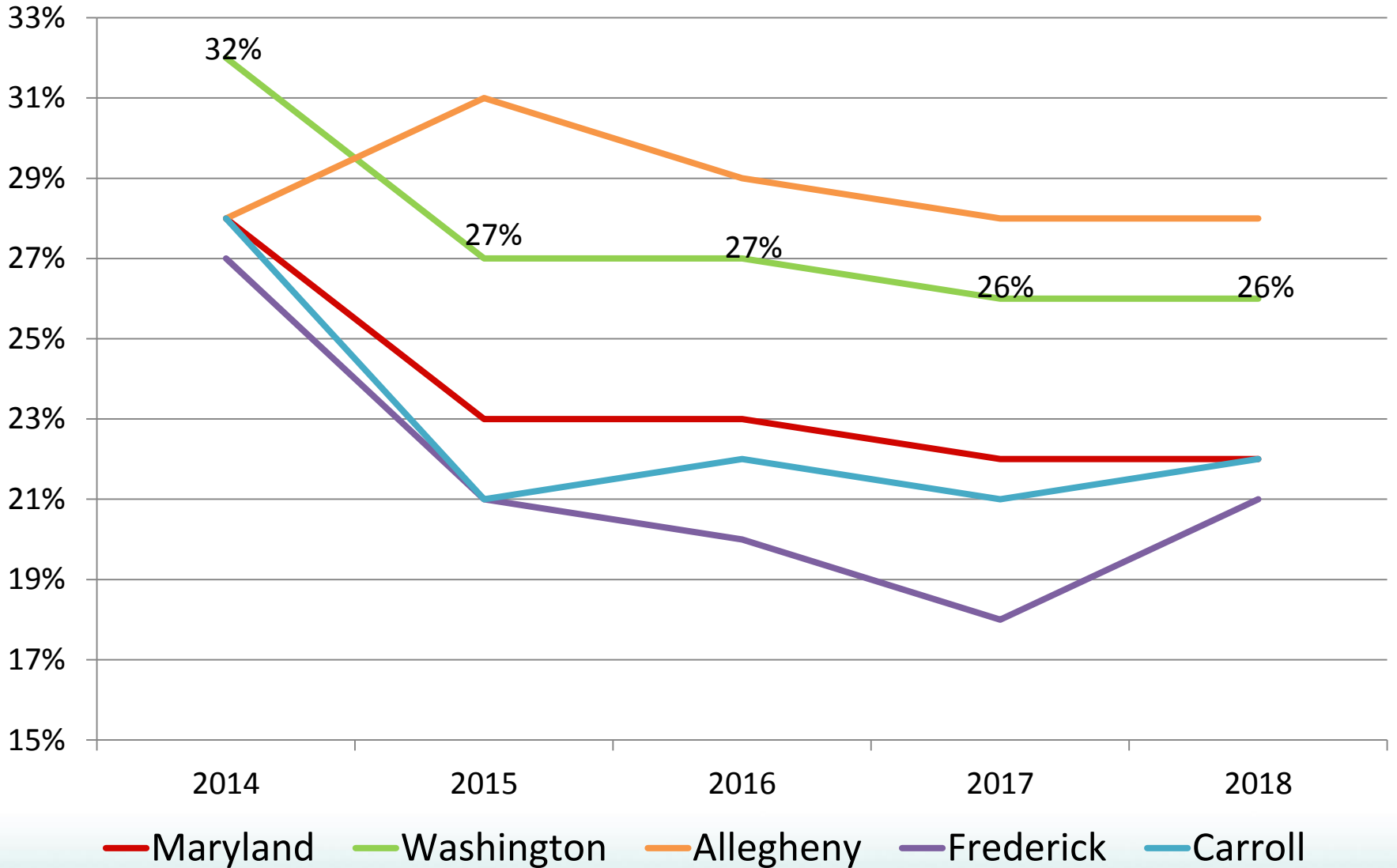


# Washington Co. CHNA Trend - Adult Weight 2012 - 2018





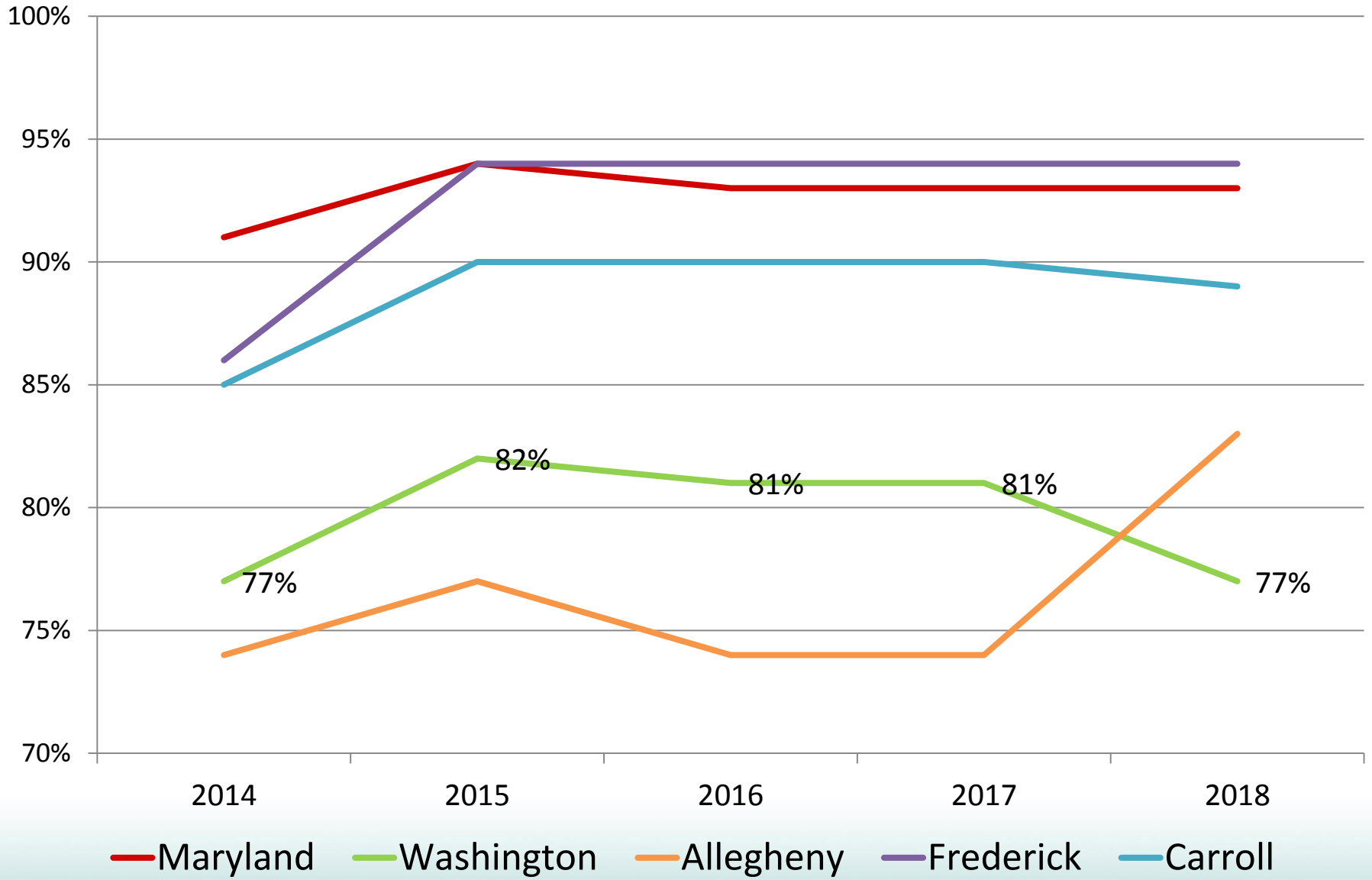
# Physical Inactivity



Physical Inactivity: Percentage of adults age 20 and over reporting no leisure-time physical activity.

Source: RWJ County Health Rankings 2018

# Access to Exercise Opportunities



Percentage of population with adequate access to locations for physical activity.

Source: RWJ County Health Rankings 2018

## Why?

- Fast food is low cost and unhealthy
- Lack of time
- Lack of exercise and motivation
- Screen time / electronics
- Lack of knowledge

## Barriers

- Dietary counseling is not a covered insurance benefit
- No medical weight loss services

# **HEART DISEASE**

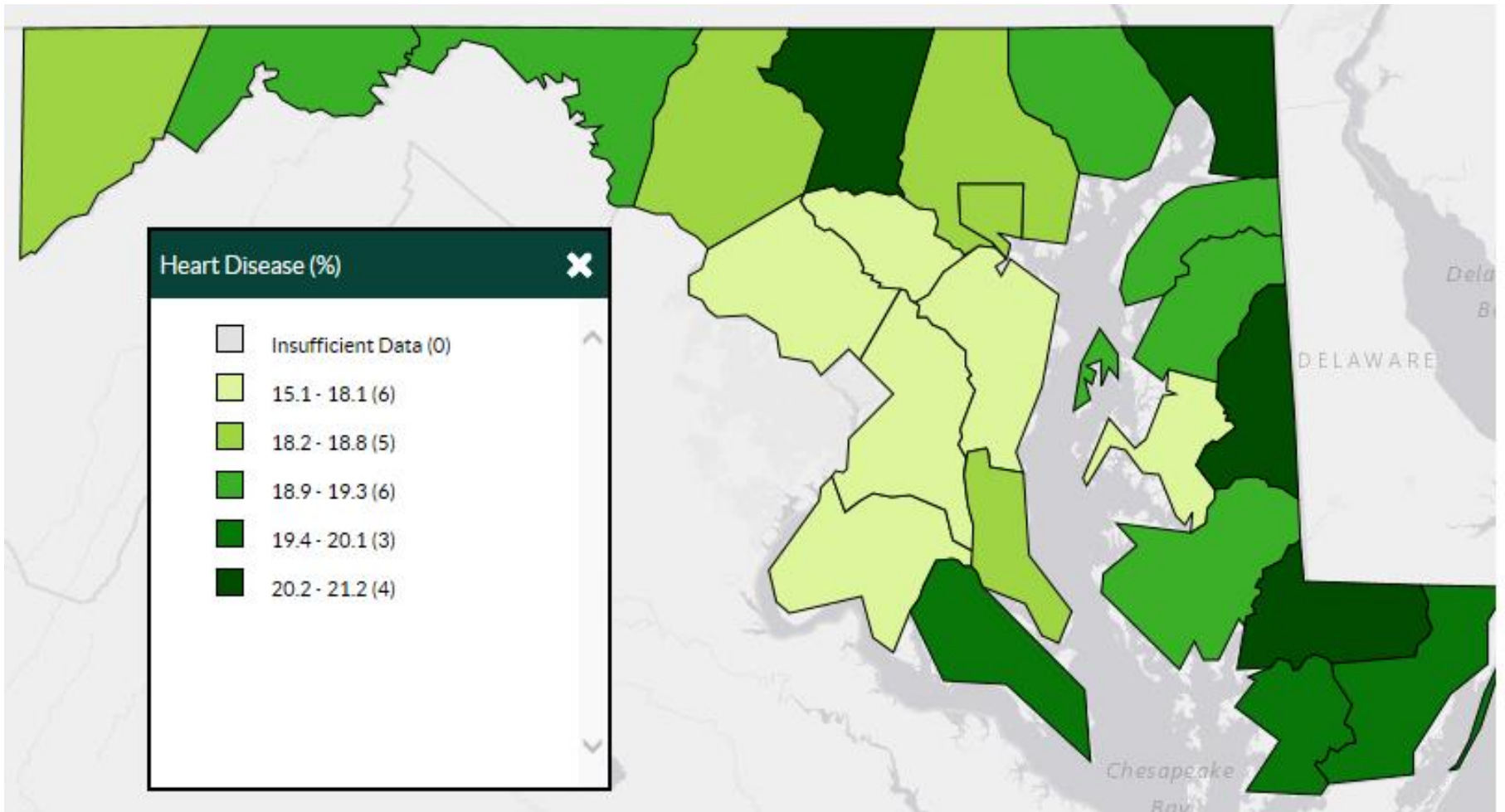
## **HYPERTENSION**

**James Recabo, RN**

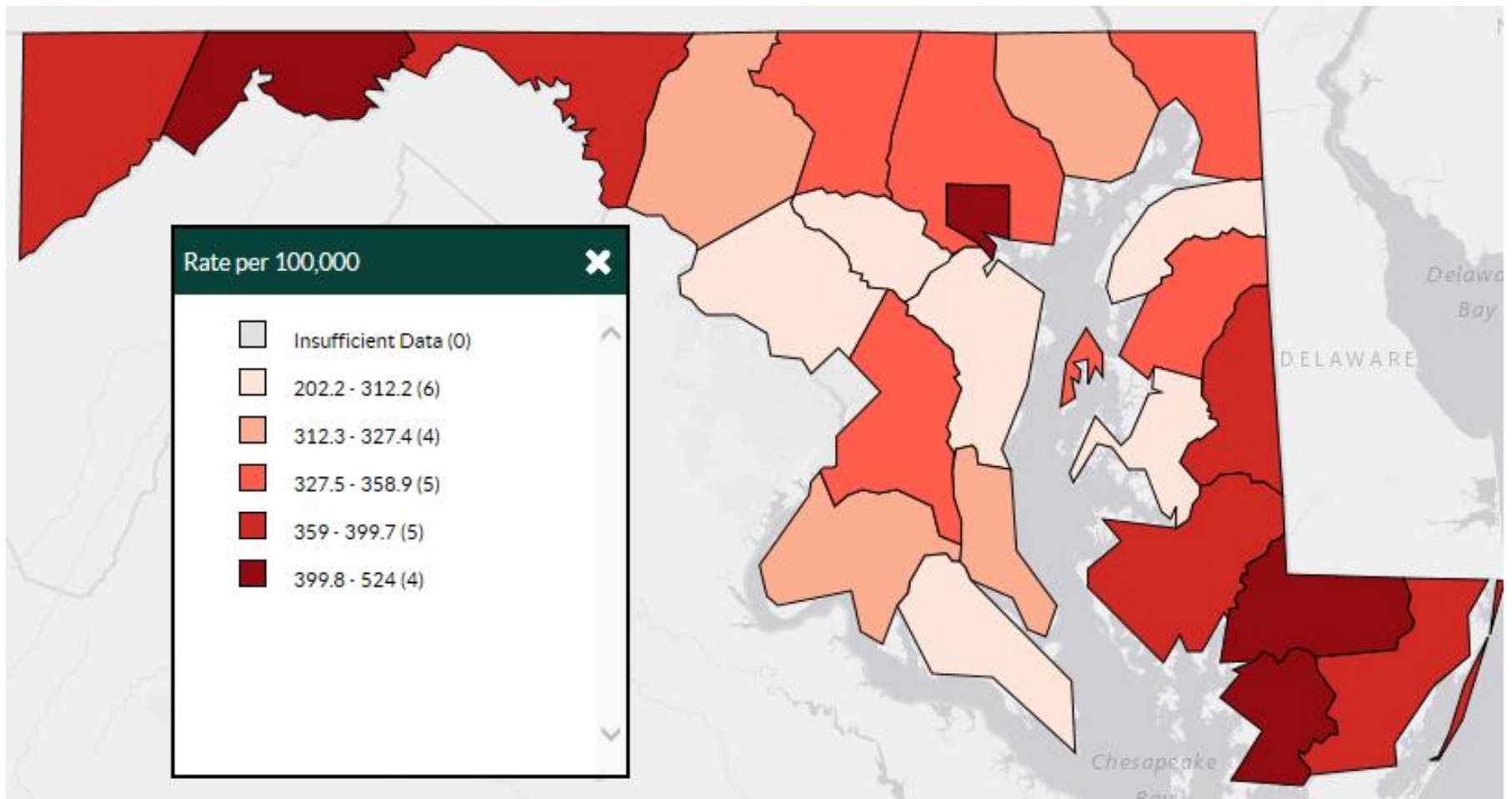
**Paul Frey, Washington County Chamber of  
Commerce**



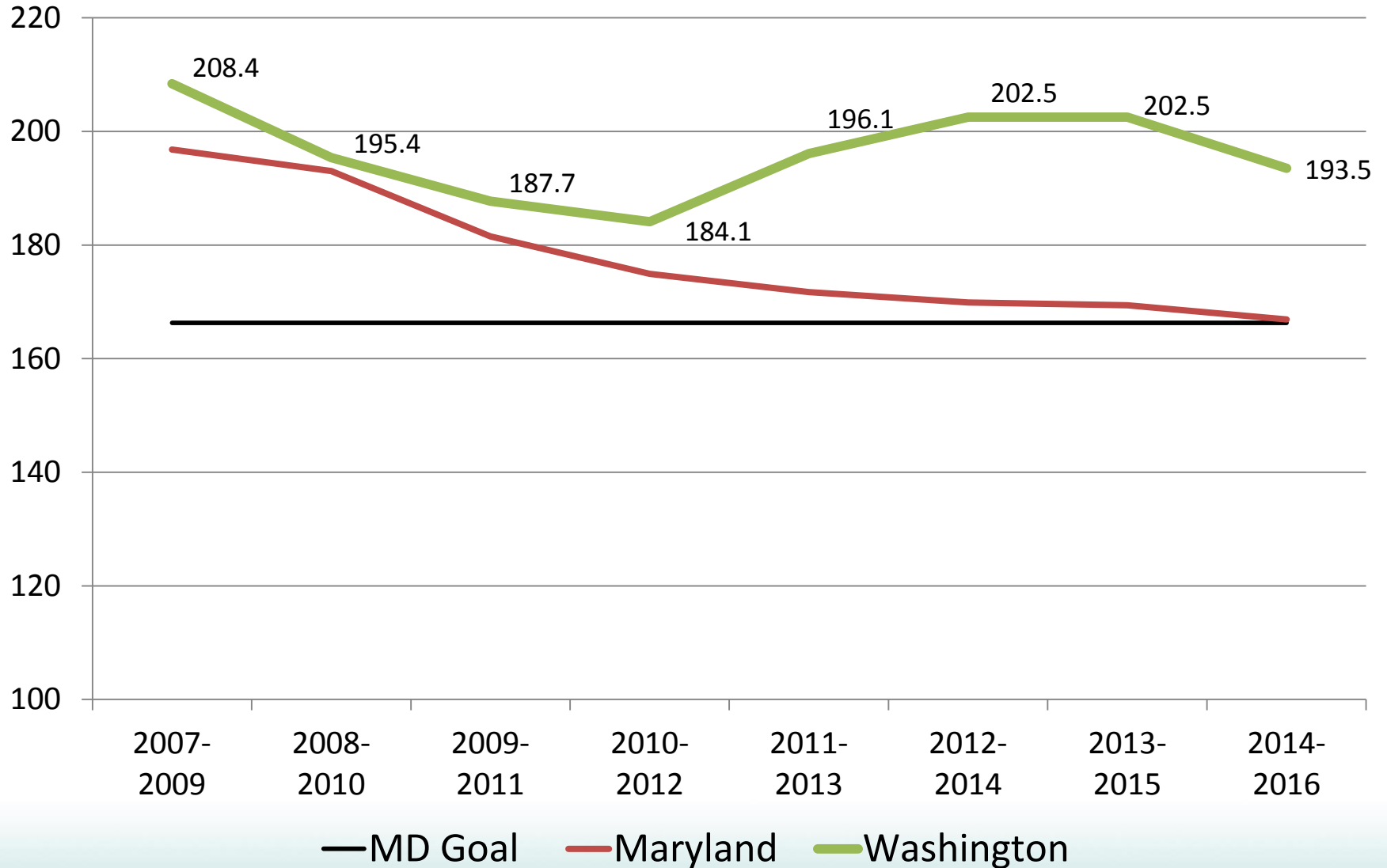
# Heart Disease Prevalence



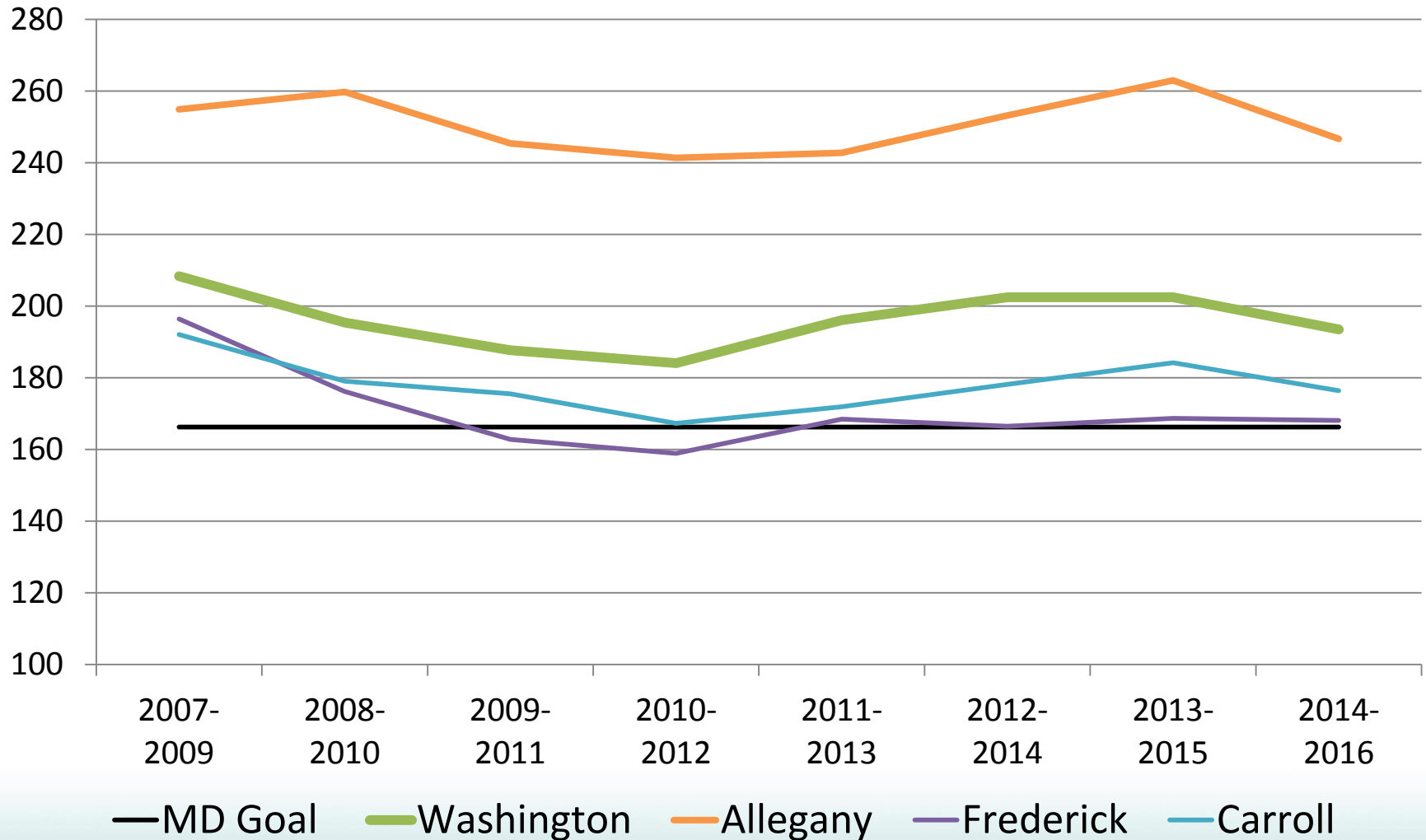
# Heart Disease Mortality



# Age-Adjusted Mortality Rate From Heart Disease

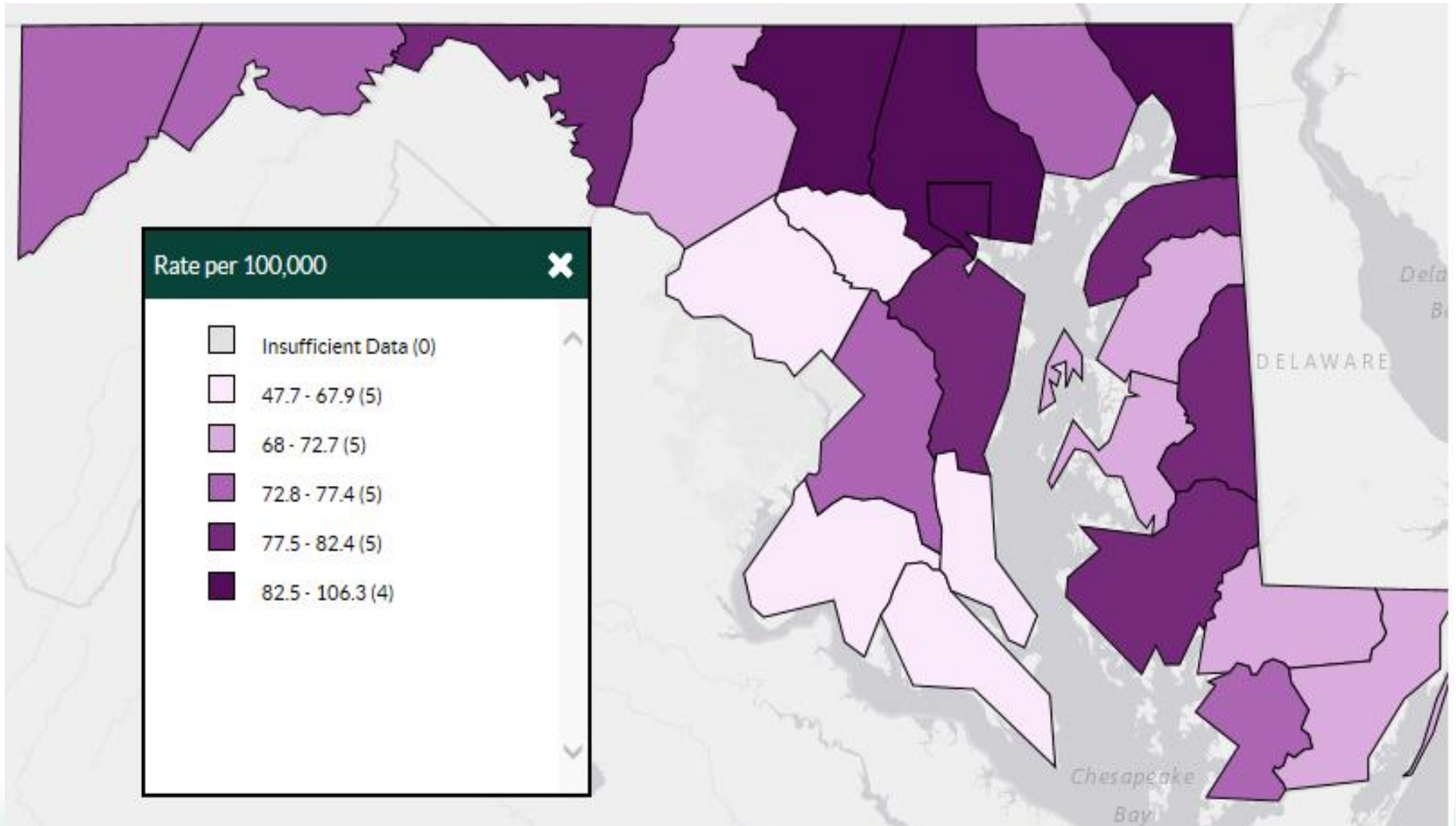


# Age-Adjusted Mortality Rate From Heart Disease County Comparison

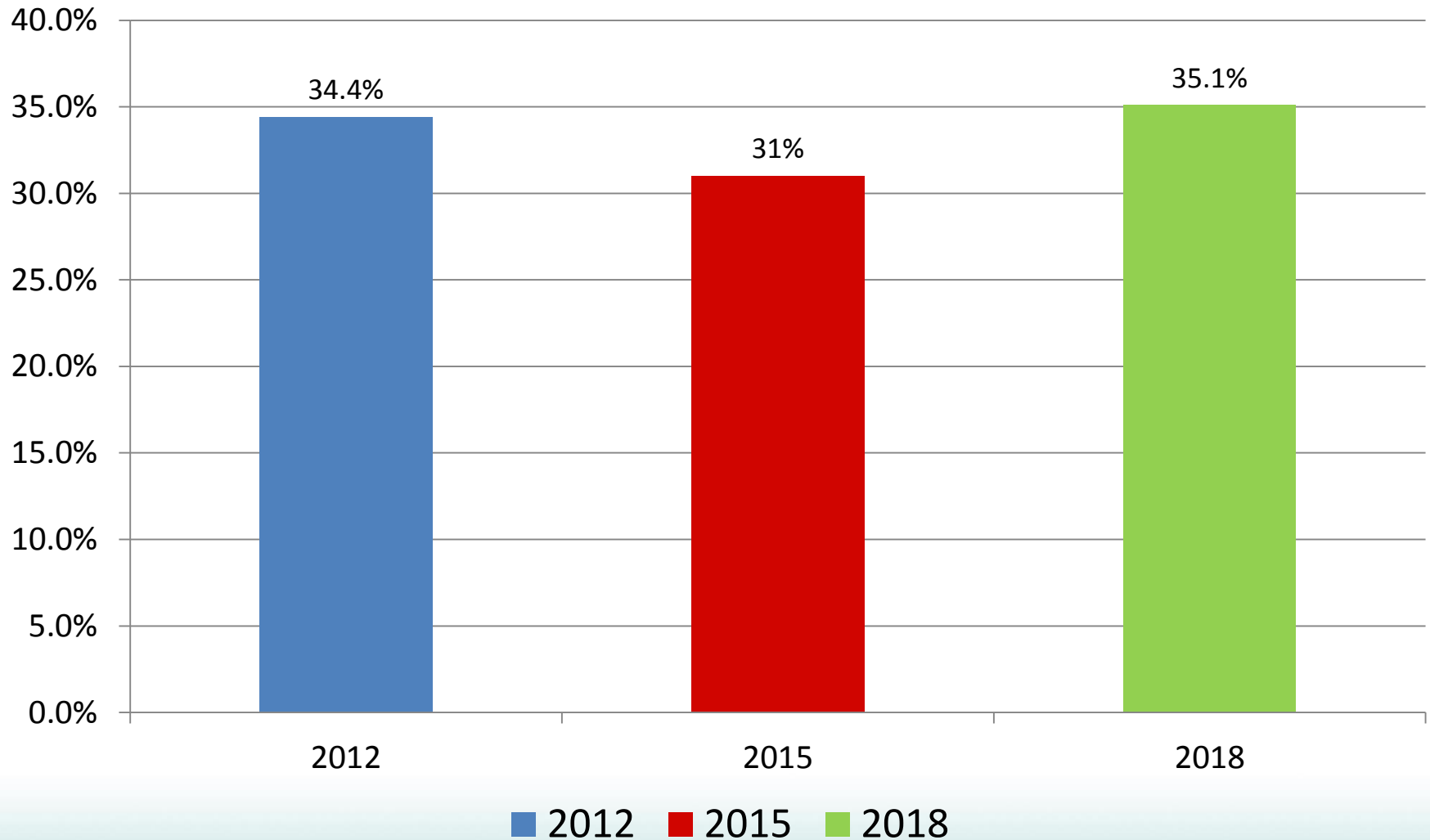




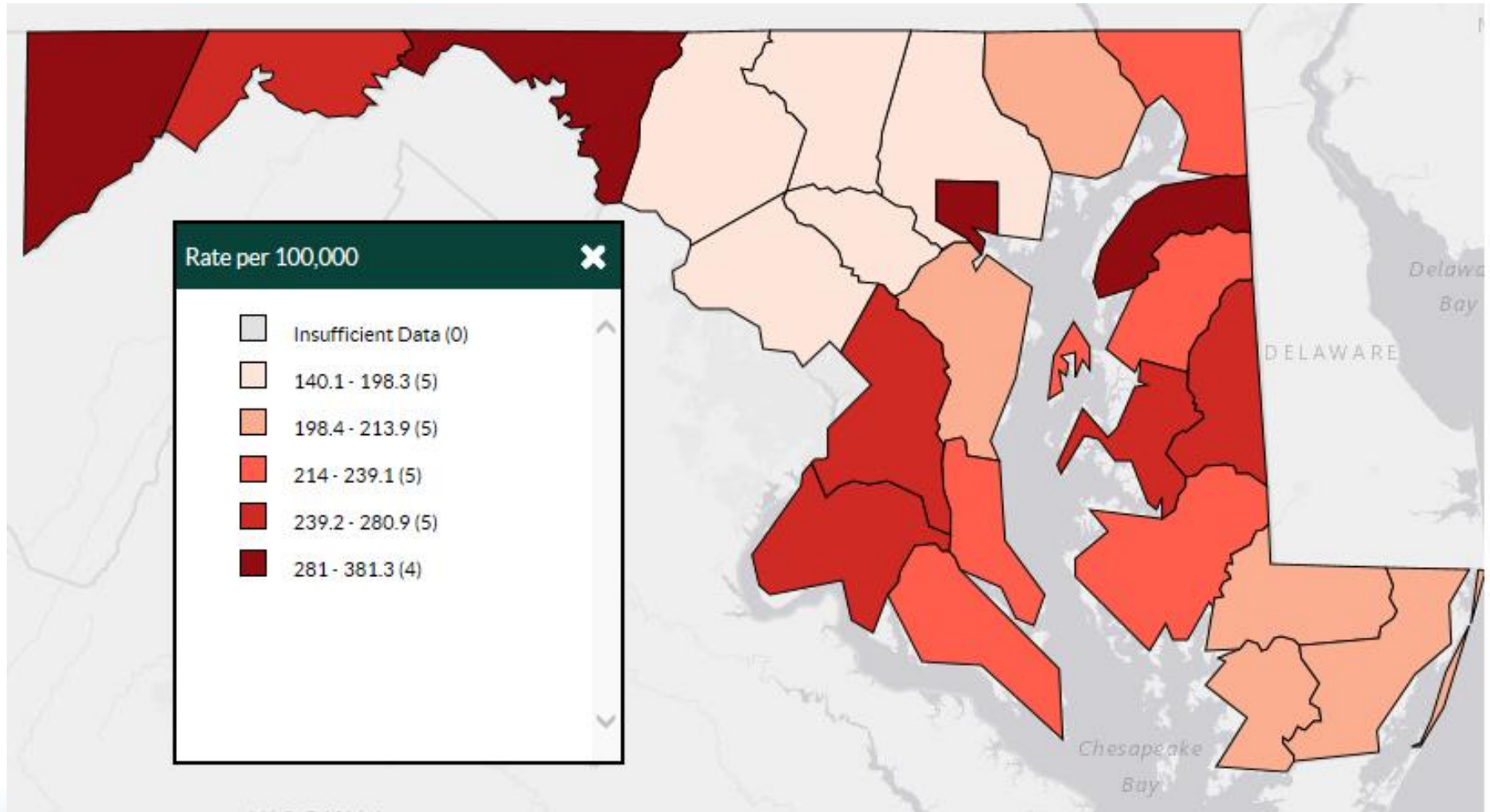
# Stroke Mortality



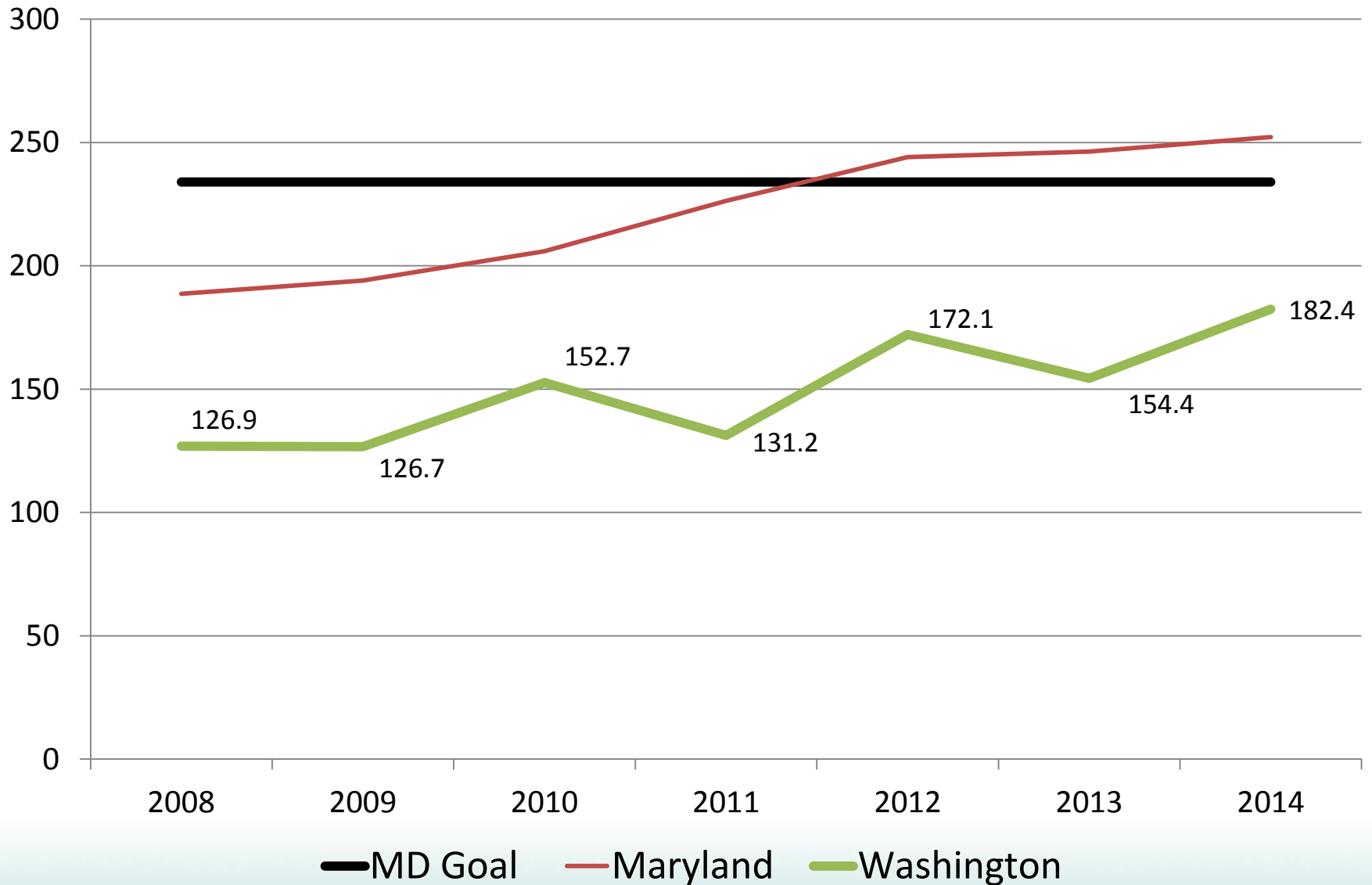
## Q: Have you ever been told that you have hypertension?



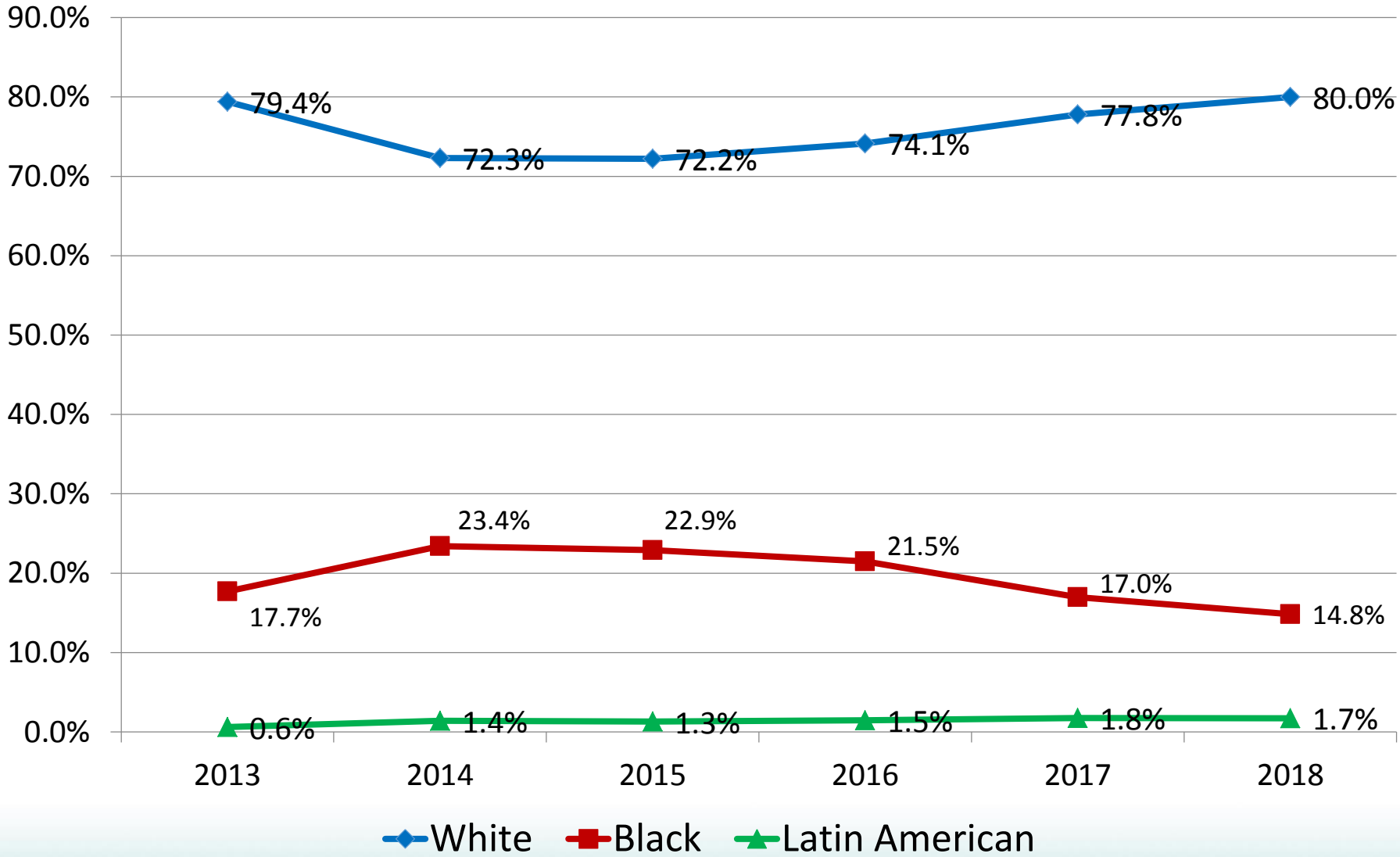
# Hypertension Mortality



# ED Visit Rate Due to Hypertension

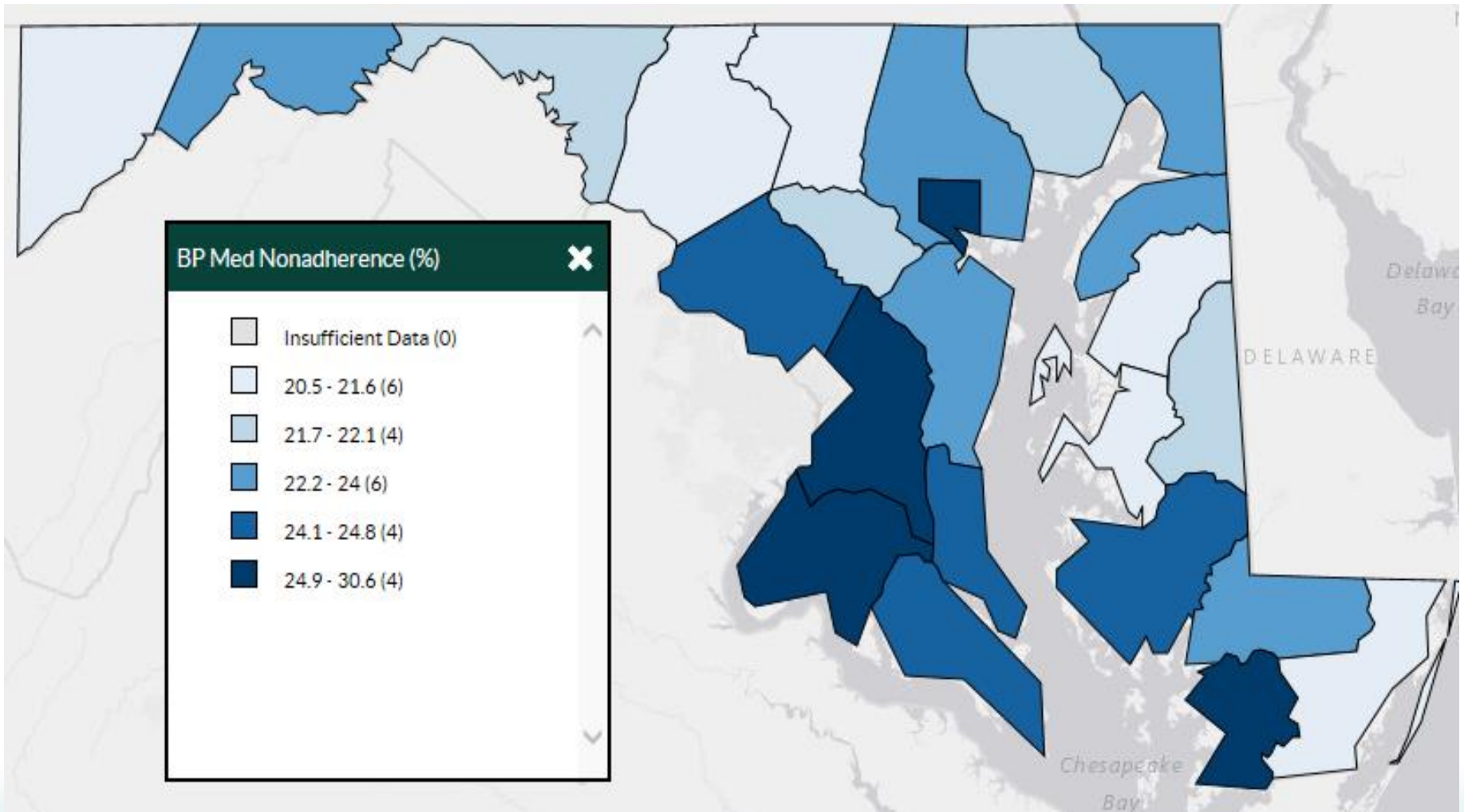


# Hypertension in ED



Source: Meritus Medical Center 2018

# Blood Pressure Medication Nonadherence



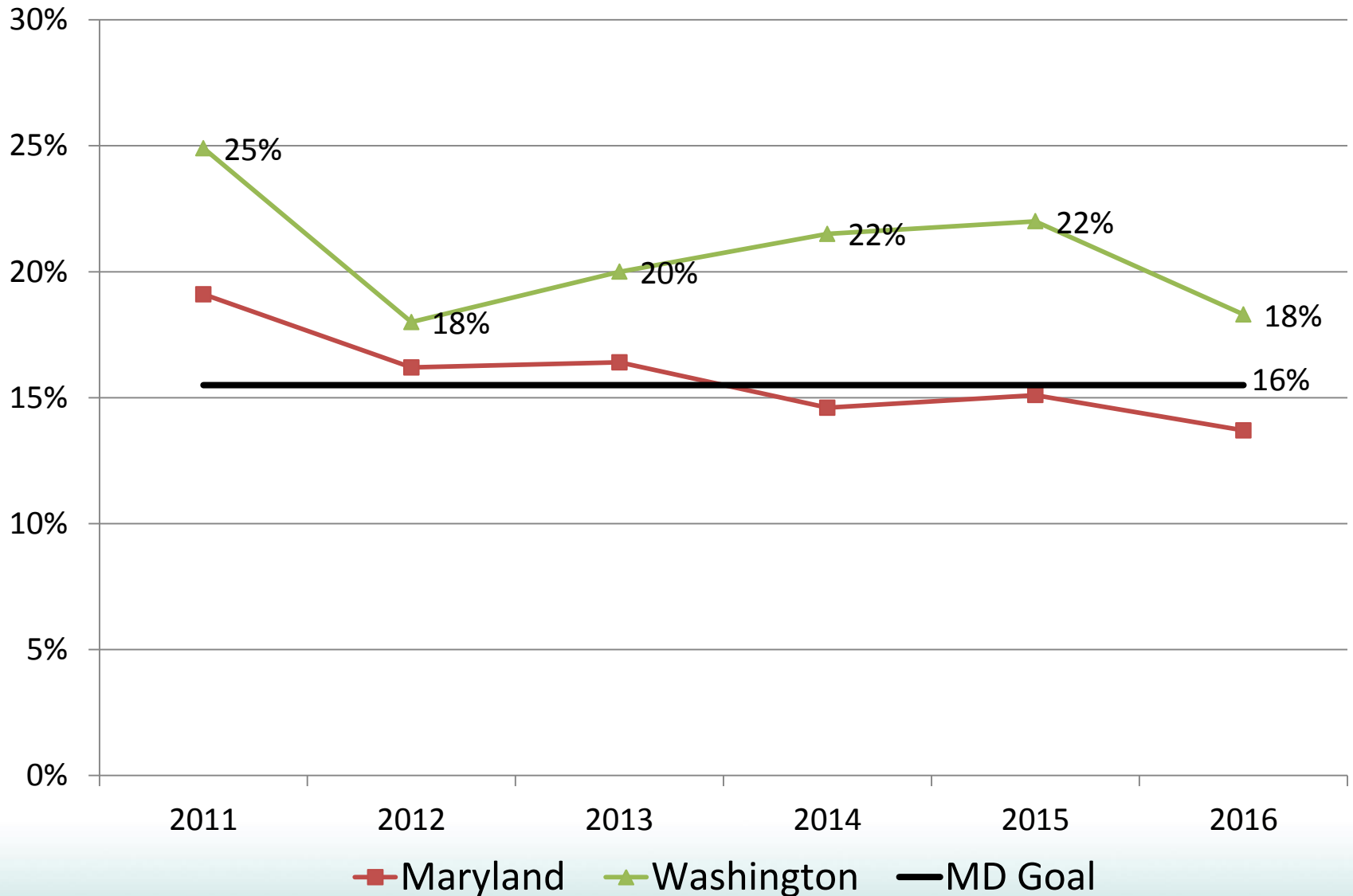
# SMOKING

## *Tobacco / Nicotine Use*

Mary McPherson, MD Dept. of Health

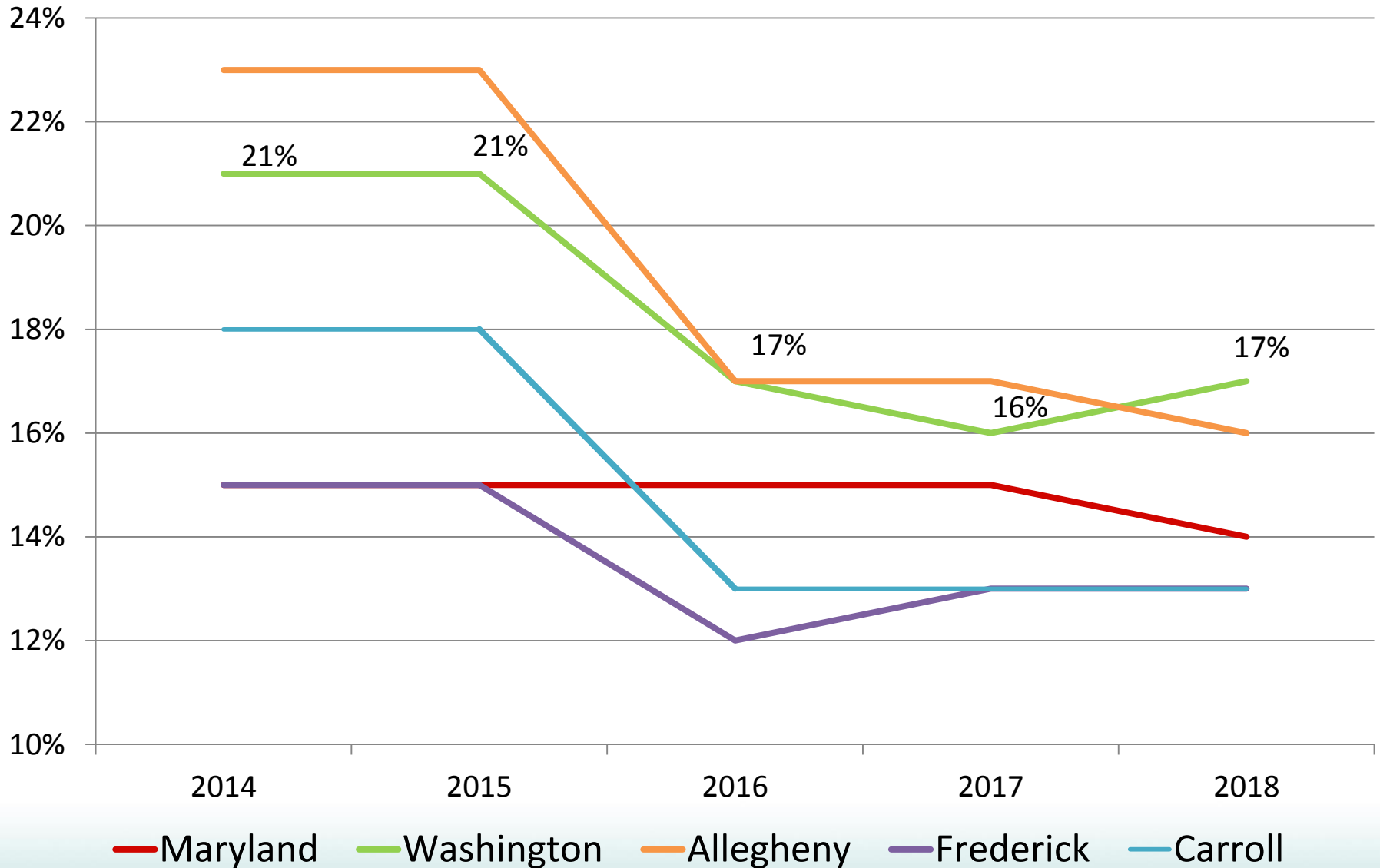


# Adults Who Currently Smoke Rate

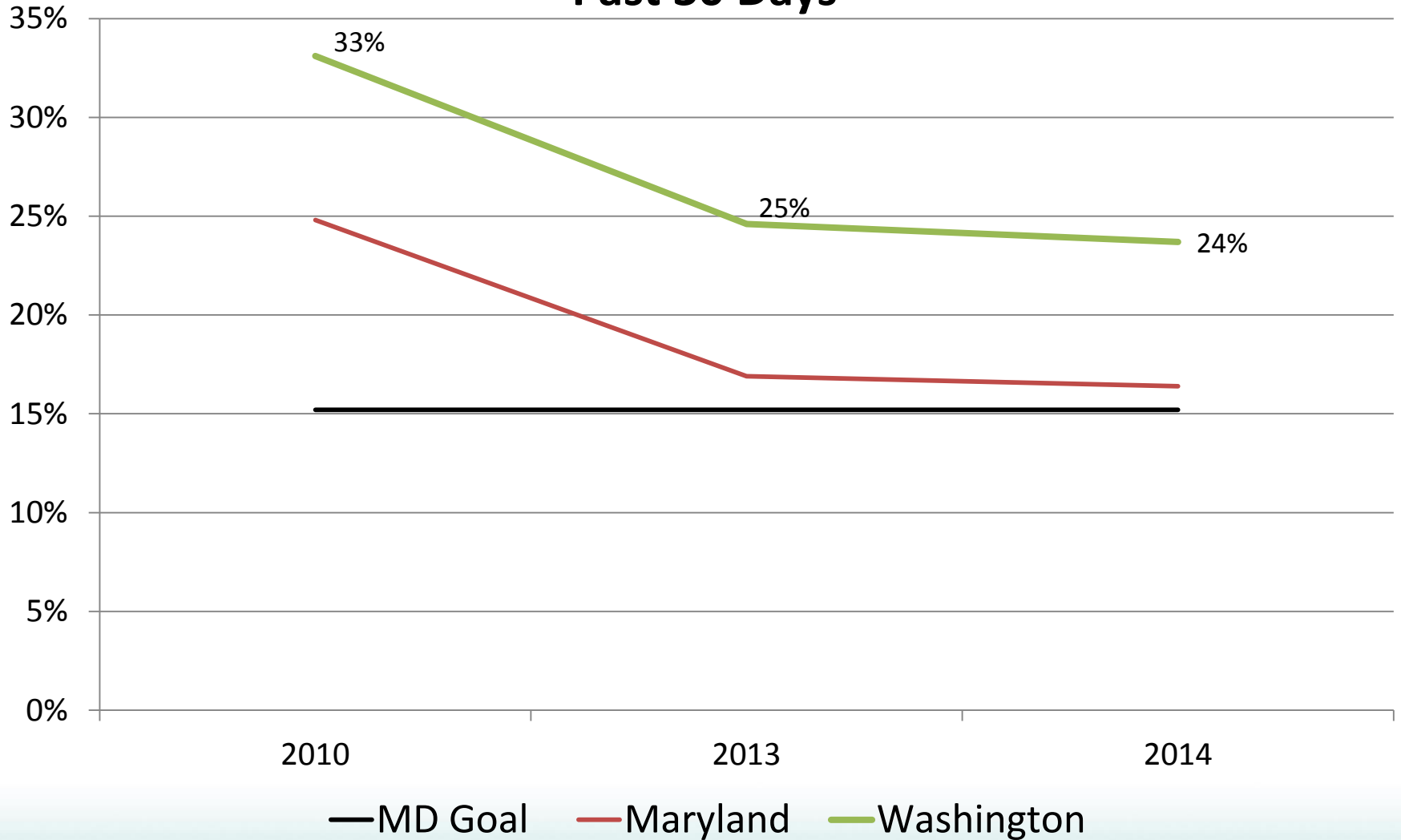




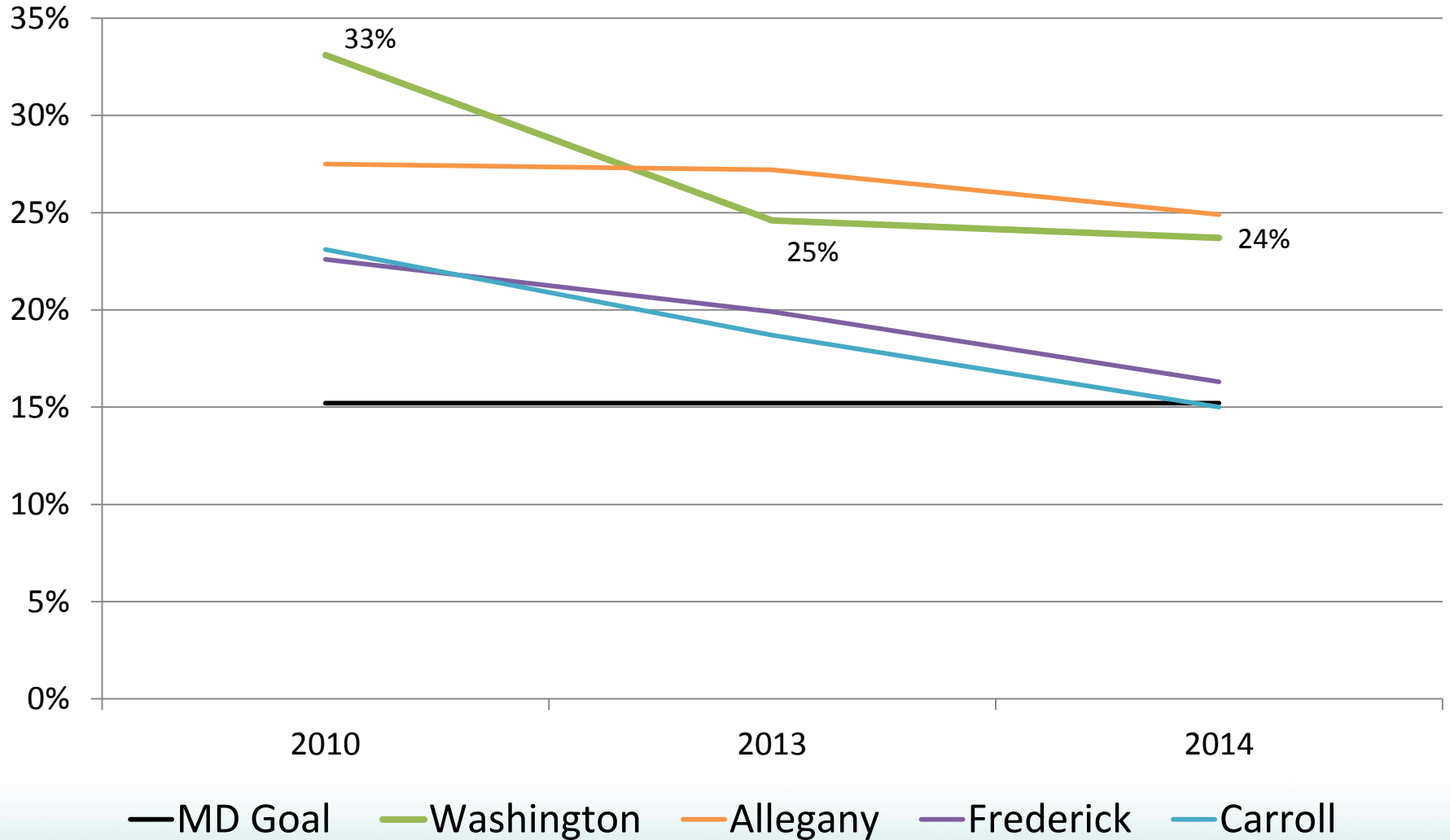
# Adult Smoking Rate County Comparison



# Adolescents Who Used Tobacco Products Past 30 Days



# Adolescents Who Used Tobacco Products Past 30 Days County Comparison



# DIABETES

Cindy Earle, MPH, RN  
Meritus Medical Center

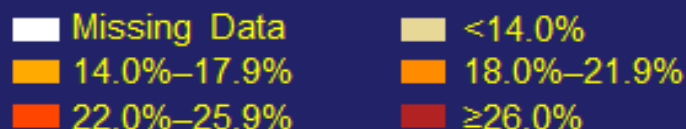
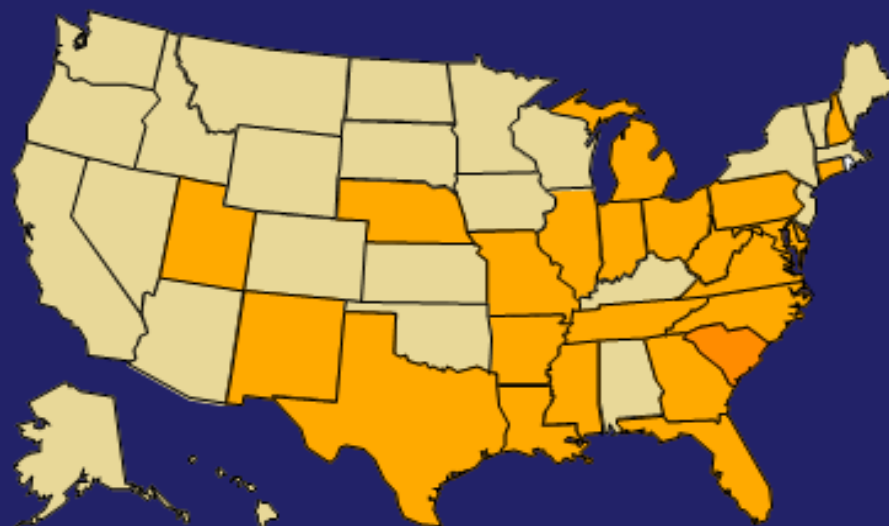
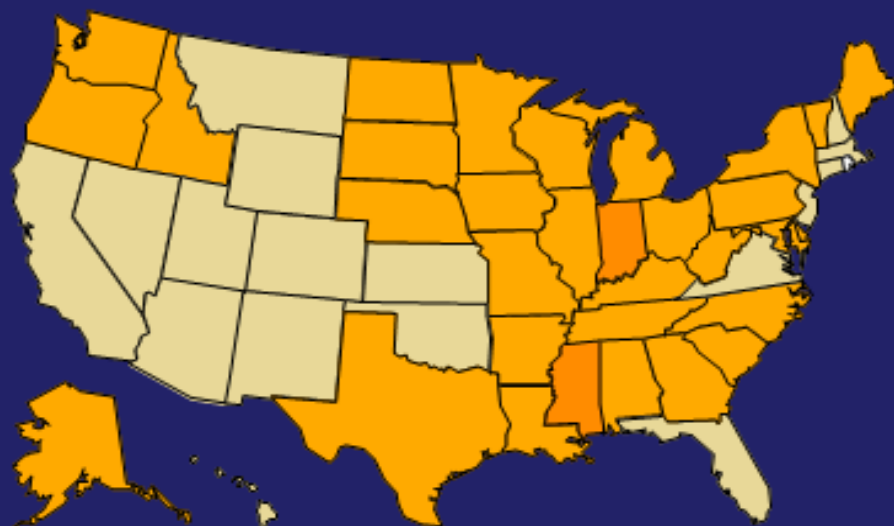


# Age-Adjusted Prevalence of Obesity and Diagnosed Diabetes Among US Adults

**1994**

Obesity (BMI  $\geq 30$  kg/m<sup>2</sup>)

Diabetes



CDC's Division of Diabetes Translation. United States Diabetes Surveillance System available at <http://www.cdc.gov/diabetes/data>

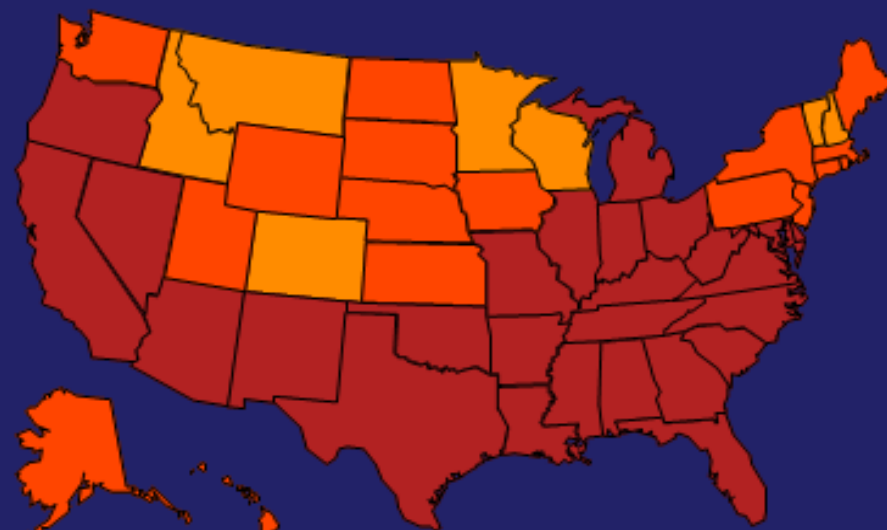
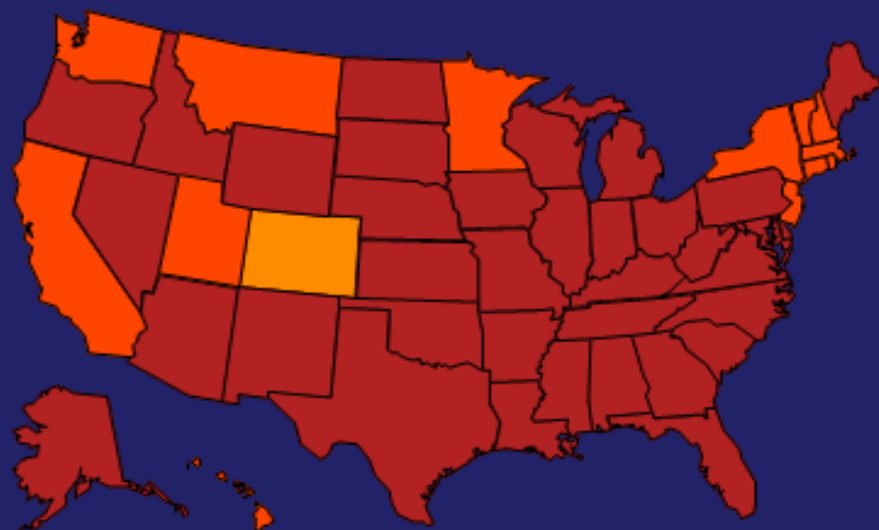


# Age-Adjusted Prevalence of Obesity and Diagnosed Diabetes Among US Adults

## 2015

### Obesity (BMI $\geq 30$ kg/m<sup>2</sup>)

### Diabetes



Missing Data  
14.0%–17.9%  
22.0%–25.9%

<14.0%  
18.0%–21.9%  
 $\geq 26.0\%$

Missing data  
4.5%–5.9%  
7.5%–8.9%

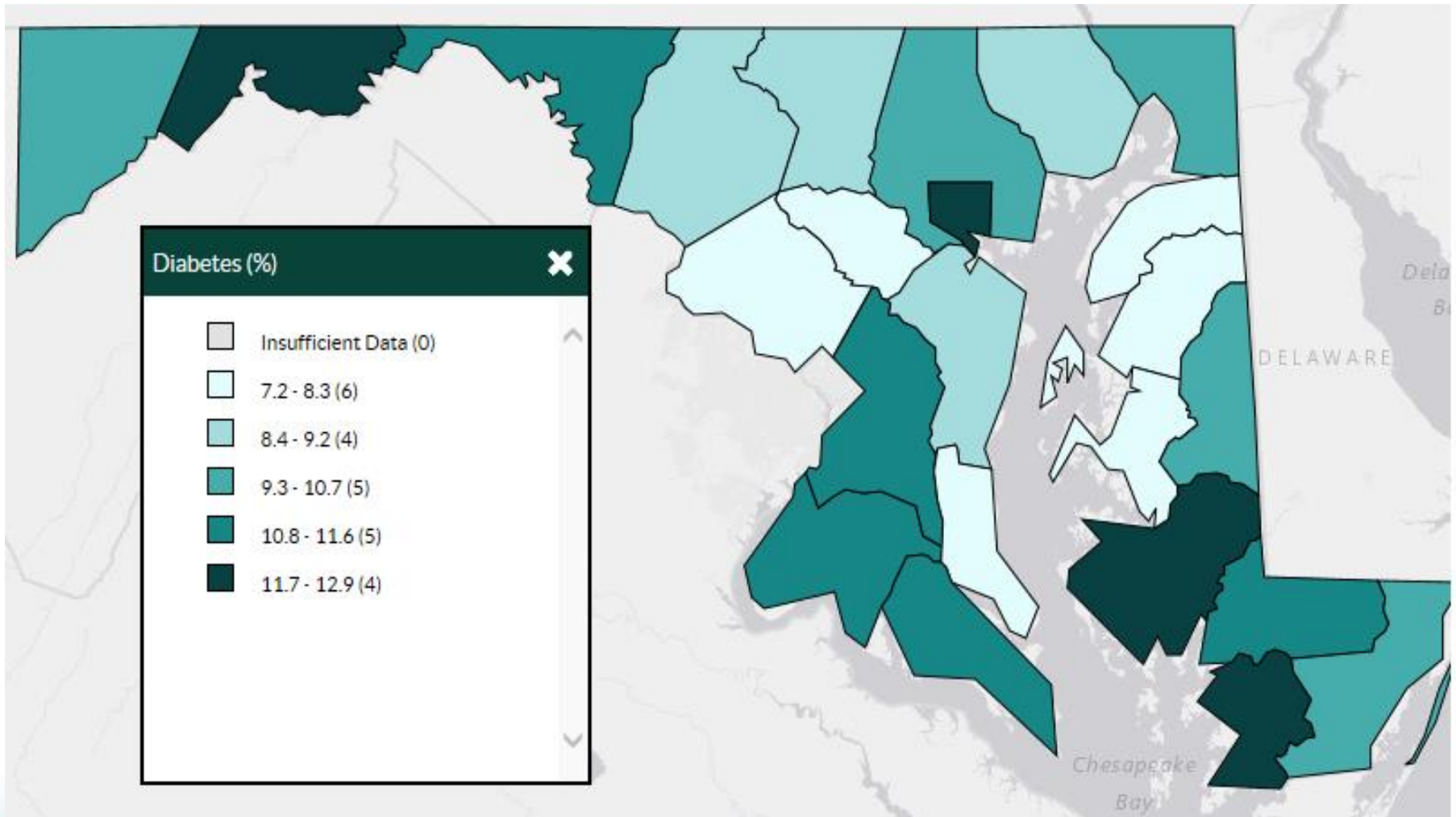
<4.5%  
6.0%–7.4%  
 $\geq 9.0\%$



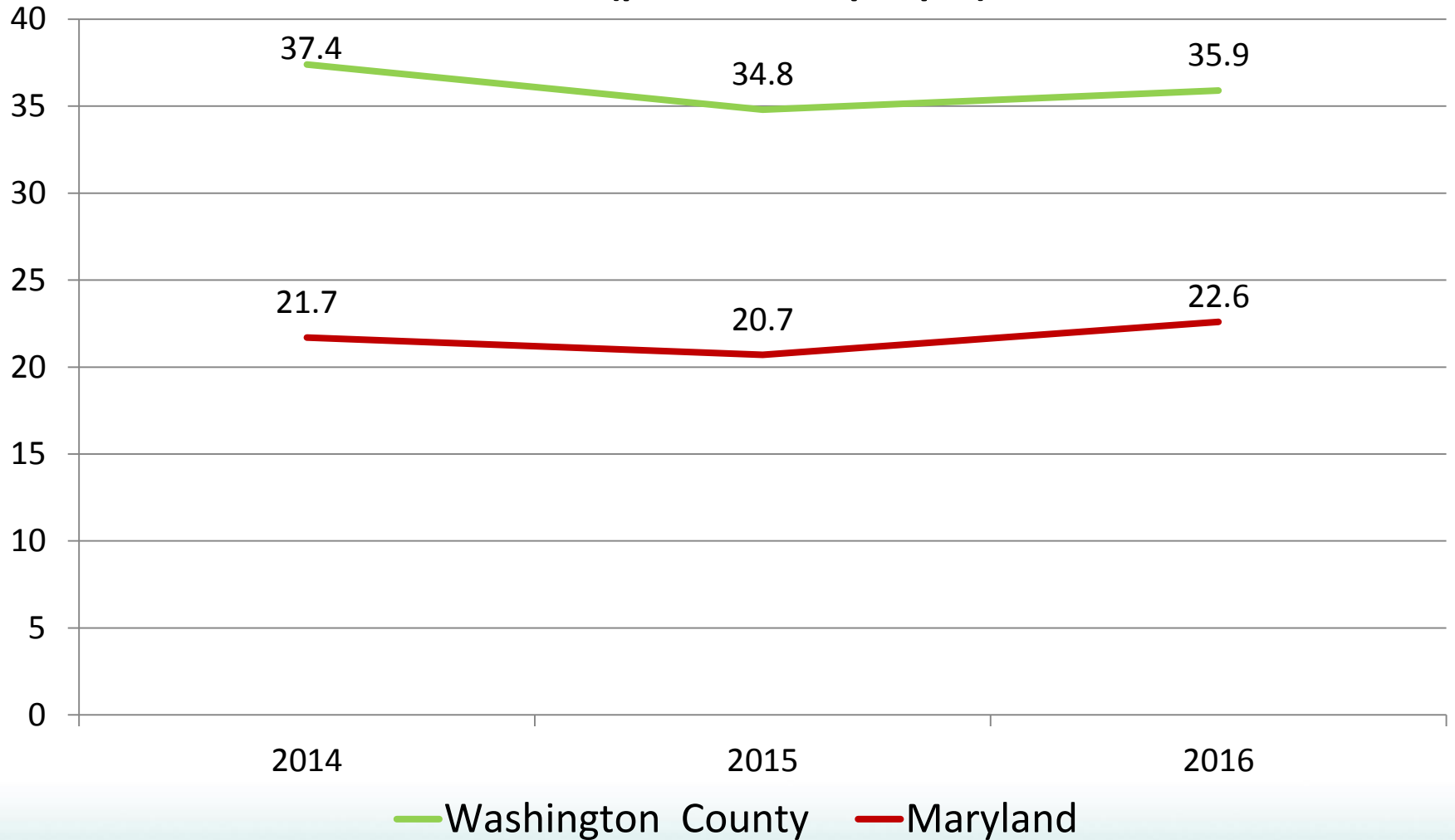
CDC's Division of Diabetes Translation. United States Diabetes Surveillance System available at <http://www.cdc.gov/diabetes/data>



# Diabetes Prevalence



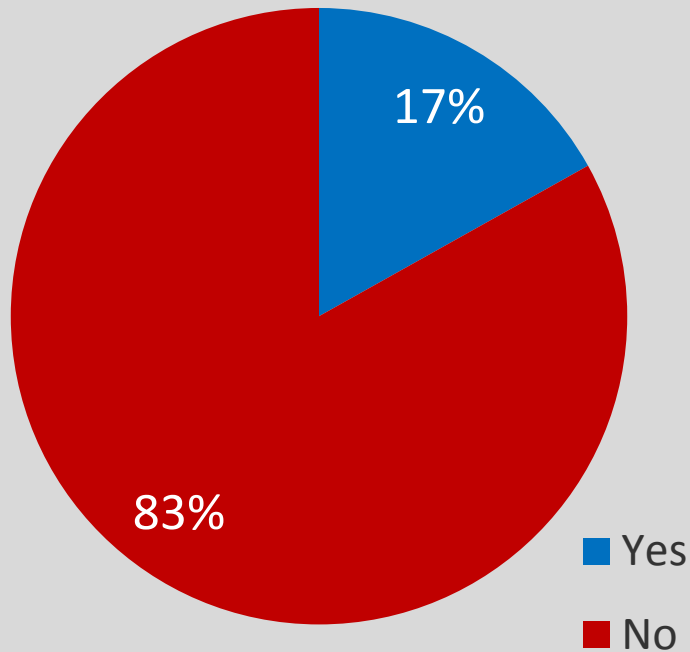
## Diabetes Mortality Rate (per 100,000 people)



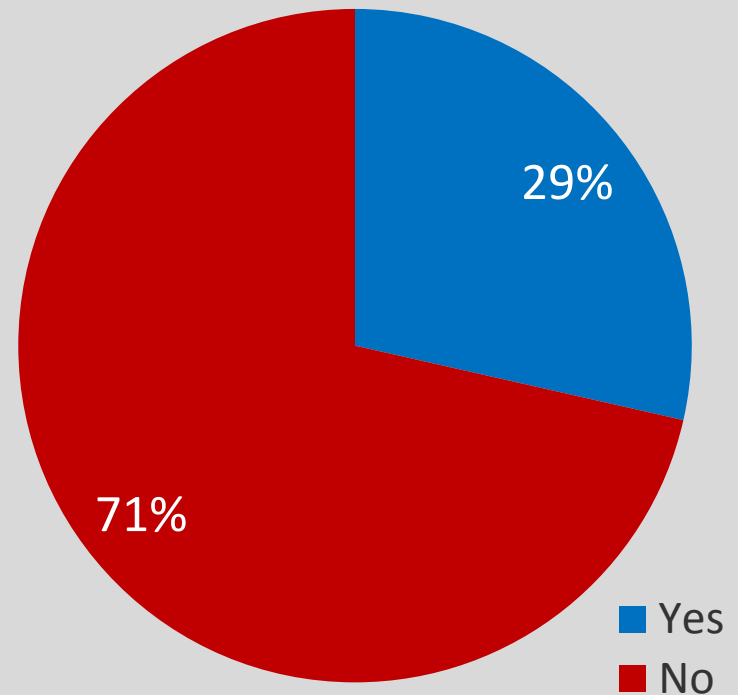


# Diabetes Morbidity

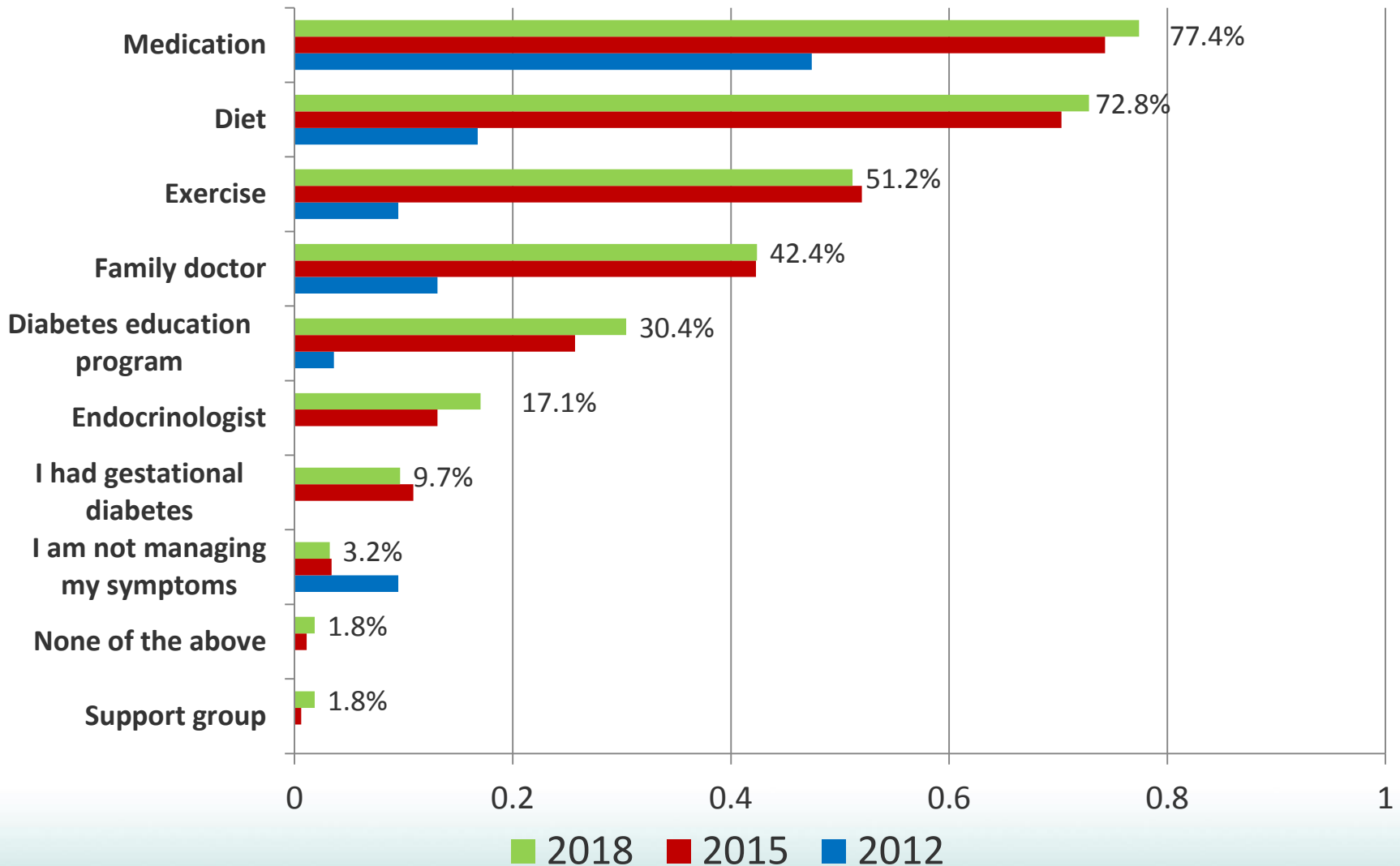
Q11. Have you ever been told by a doctor or health professional that you have diabetes?



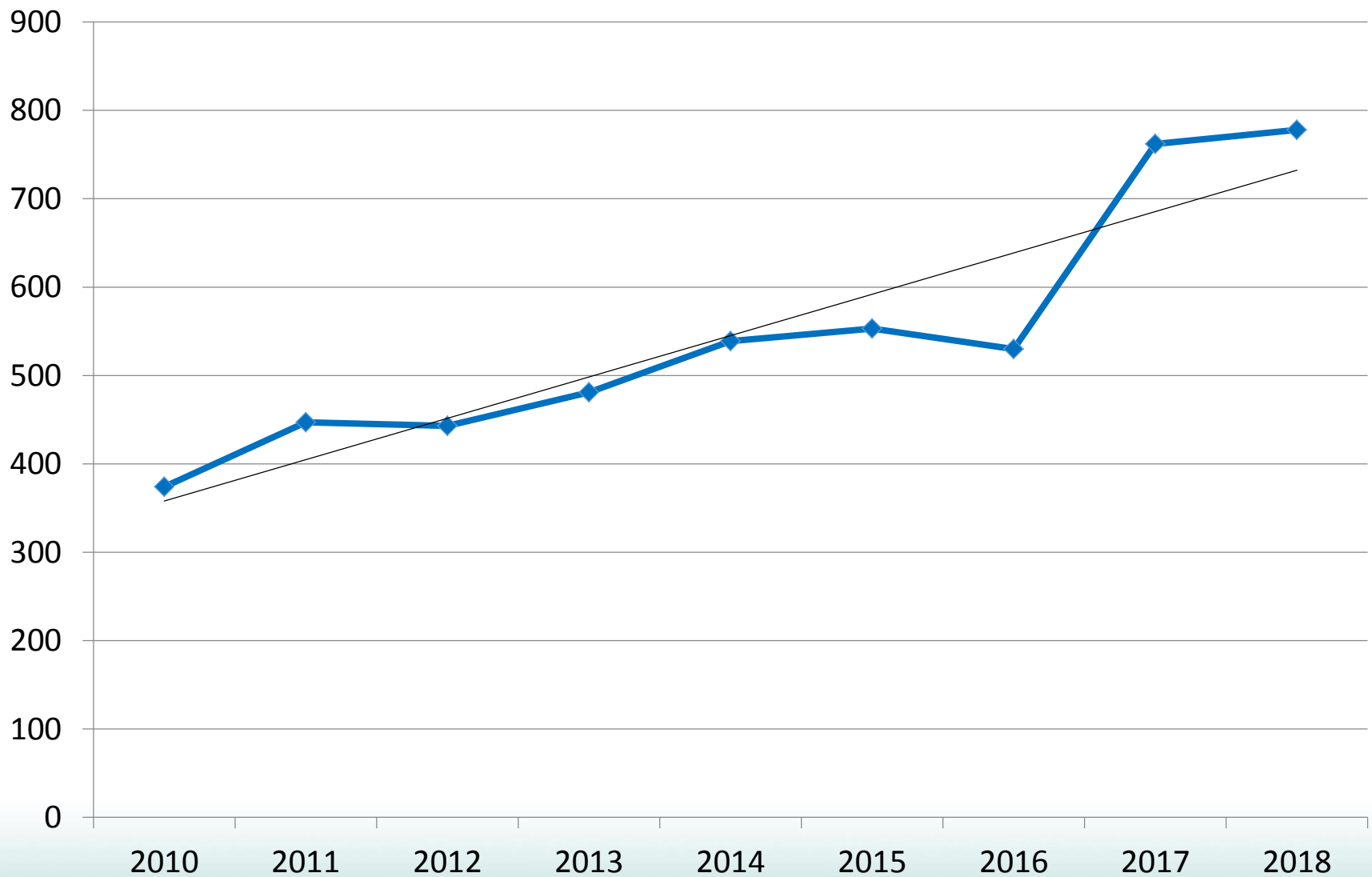
Q13. Are you interested in learning how to prevent diabetes?



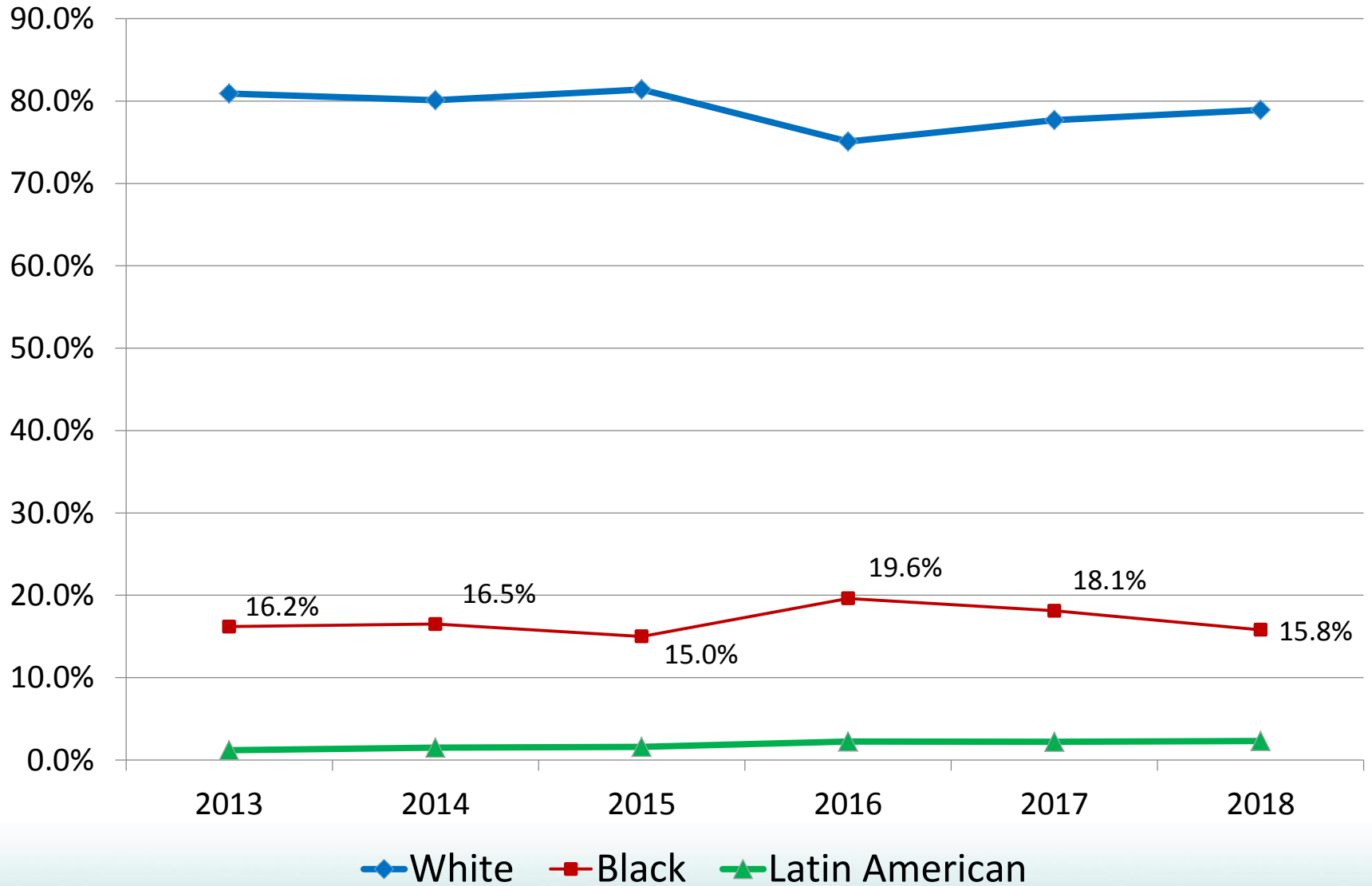
## Q12. If YES for diabetes, how are you managing your symptoms? (check ALL that apply)



## Diabetes Visits in ED – Raw Data




# Diabetes Visit Rate in ED



## Why?

- High rate of obesity and pre-diabetes
- Huge need for nutritional information in our community
- Socioeconomic considerations; fast food is cheap and easy

## Barriers

- Lack of knowledge of resources available
  - Lack of motivation, not in “crisis”
  - Location of health services are not convenient
  - Cost of care, medication and education
- 

**BREAK**

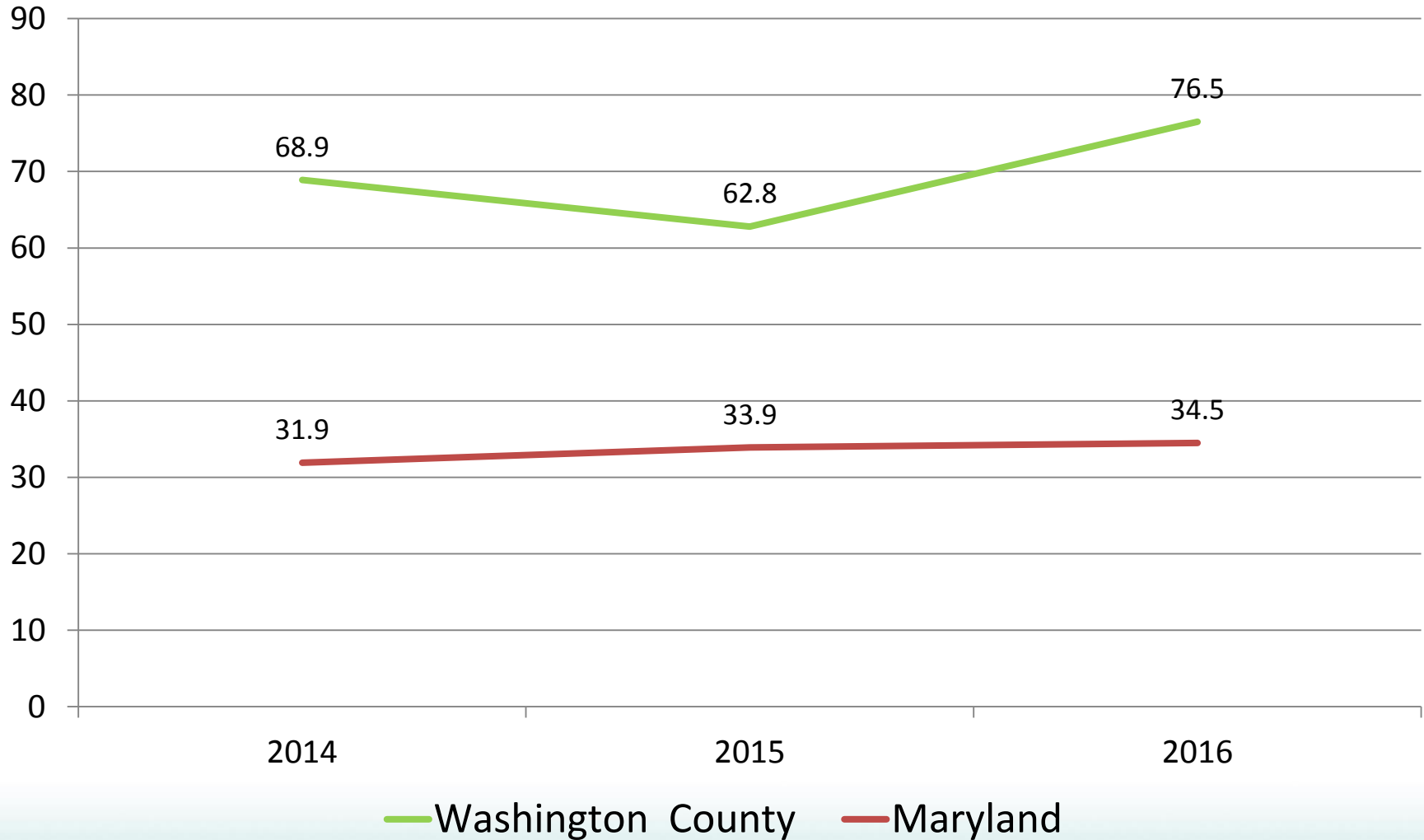


# RESPIRATORY DISEASE

Robert Porter,  
Meritus Medical Center

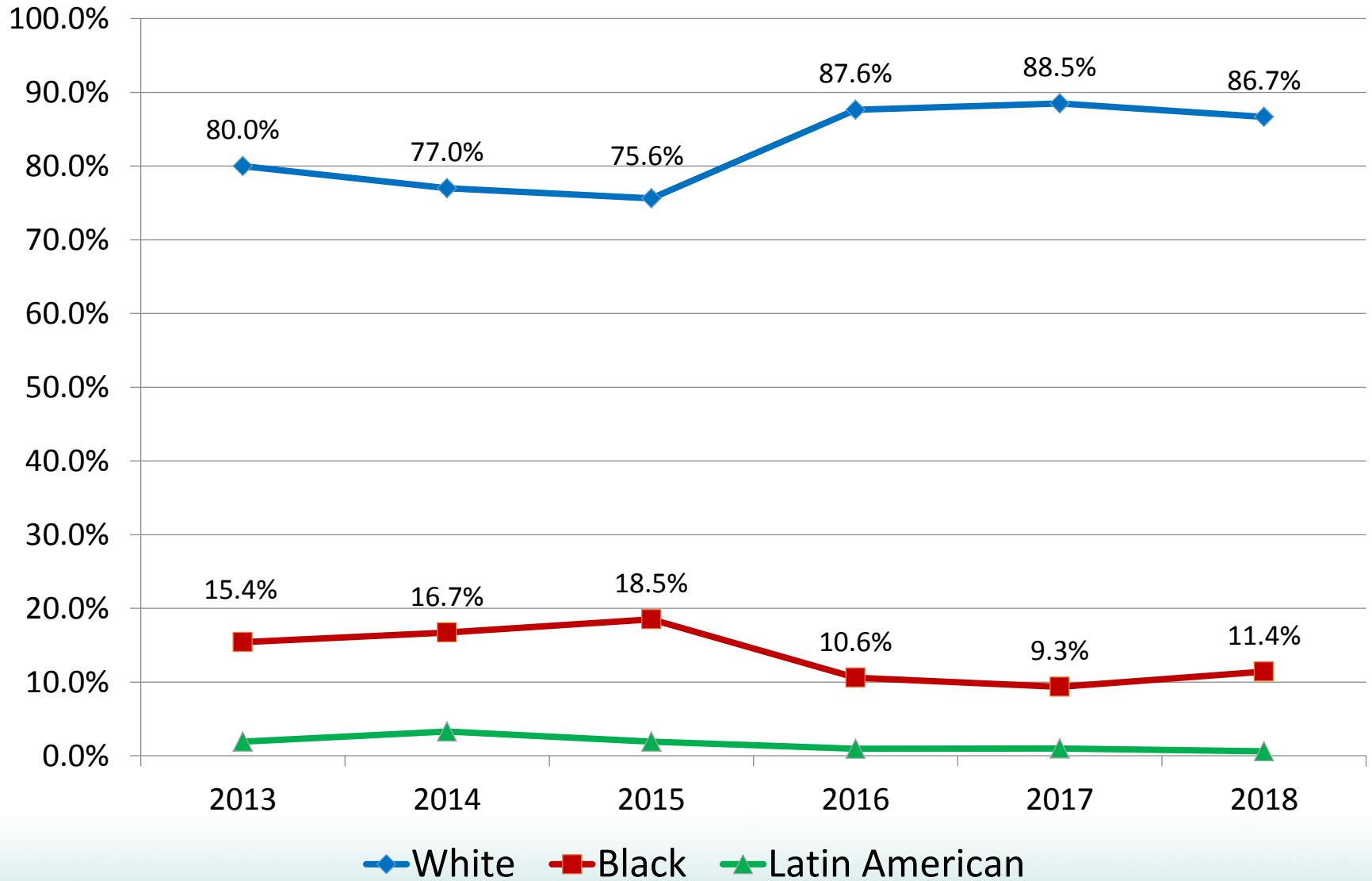


# Chronic Lower Respiratory Disease Mortality (per 100,000 lives)

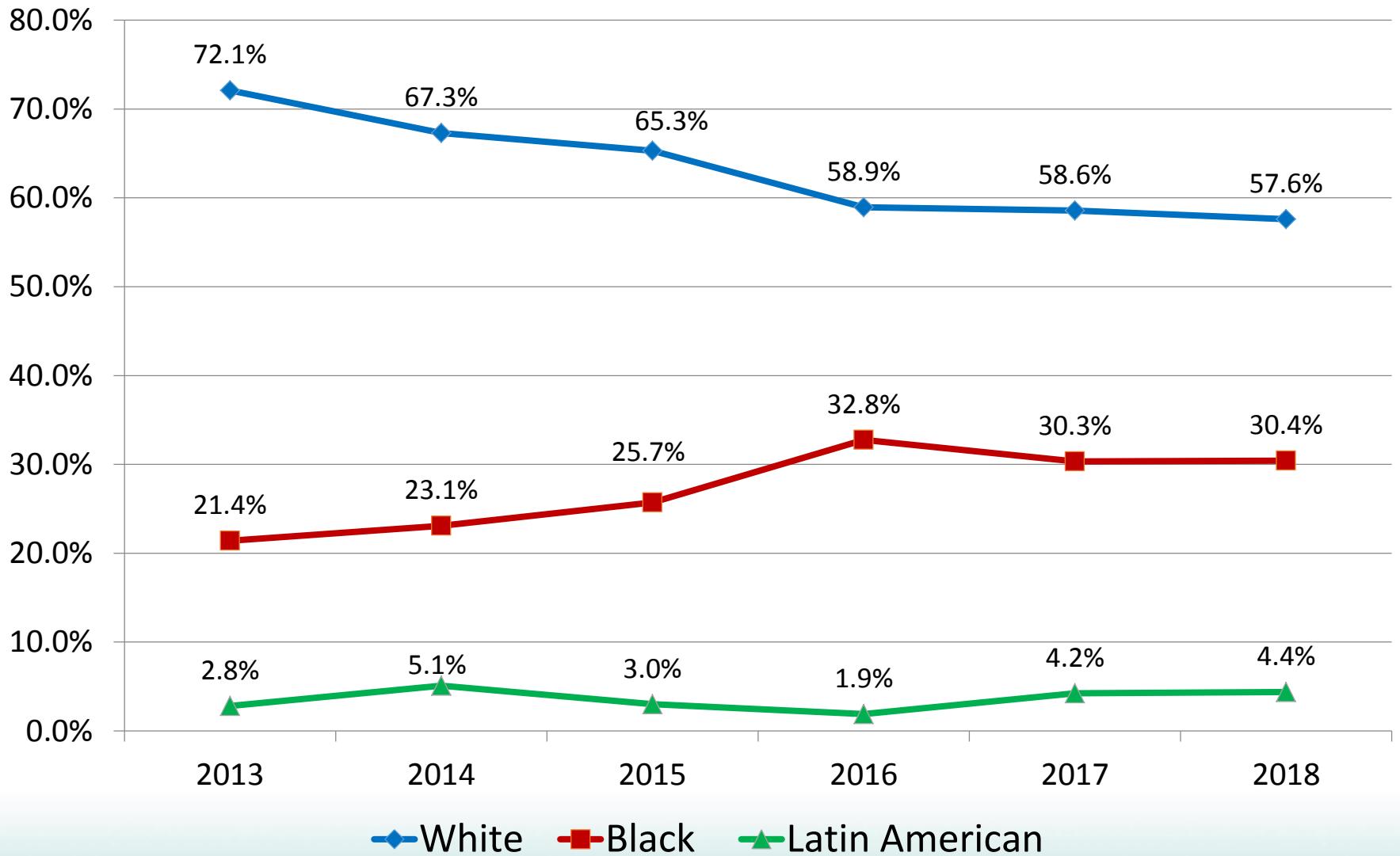




# COPD Visit Rate in ED



# Asthma Visit Rate in ED

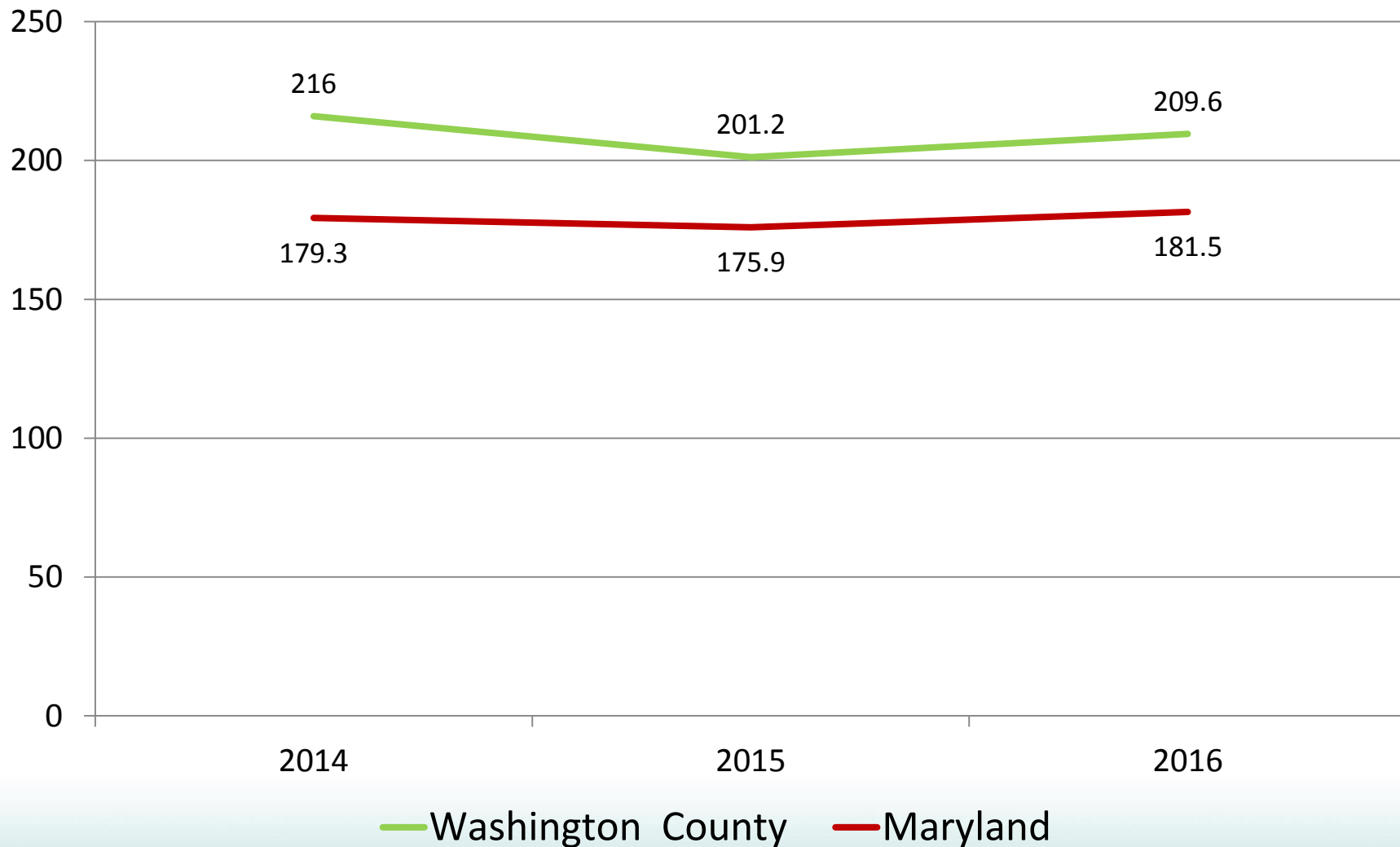


# CANCER

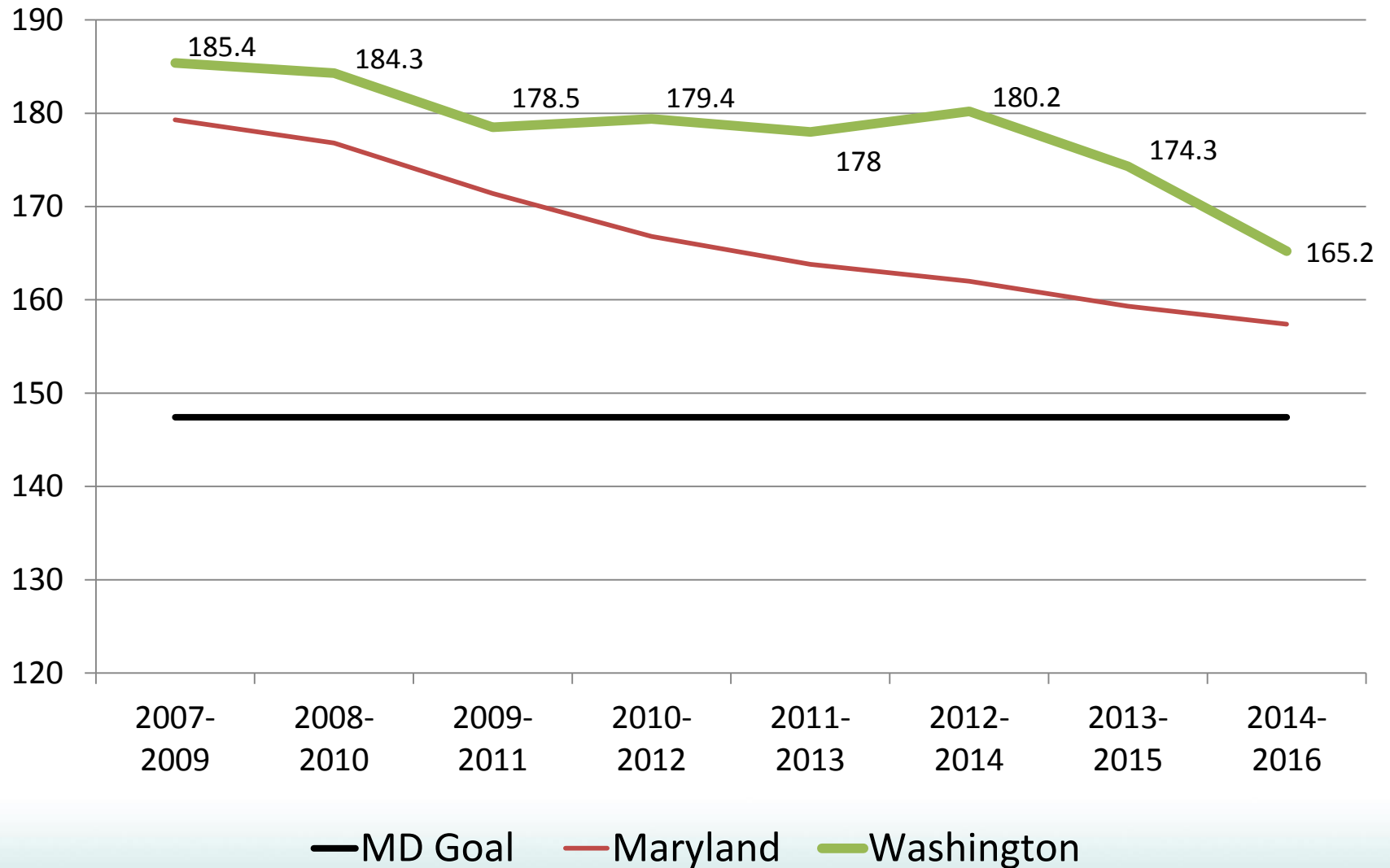
Susan Lopp,  
Meritus Medical Center



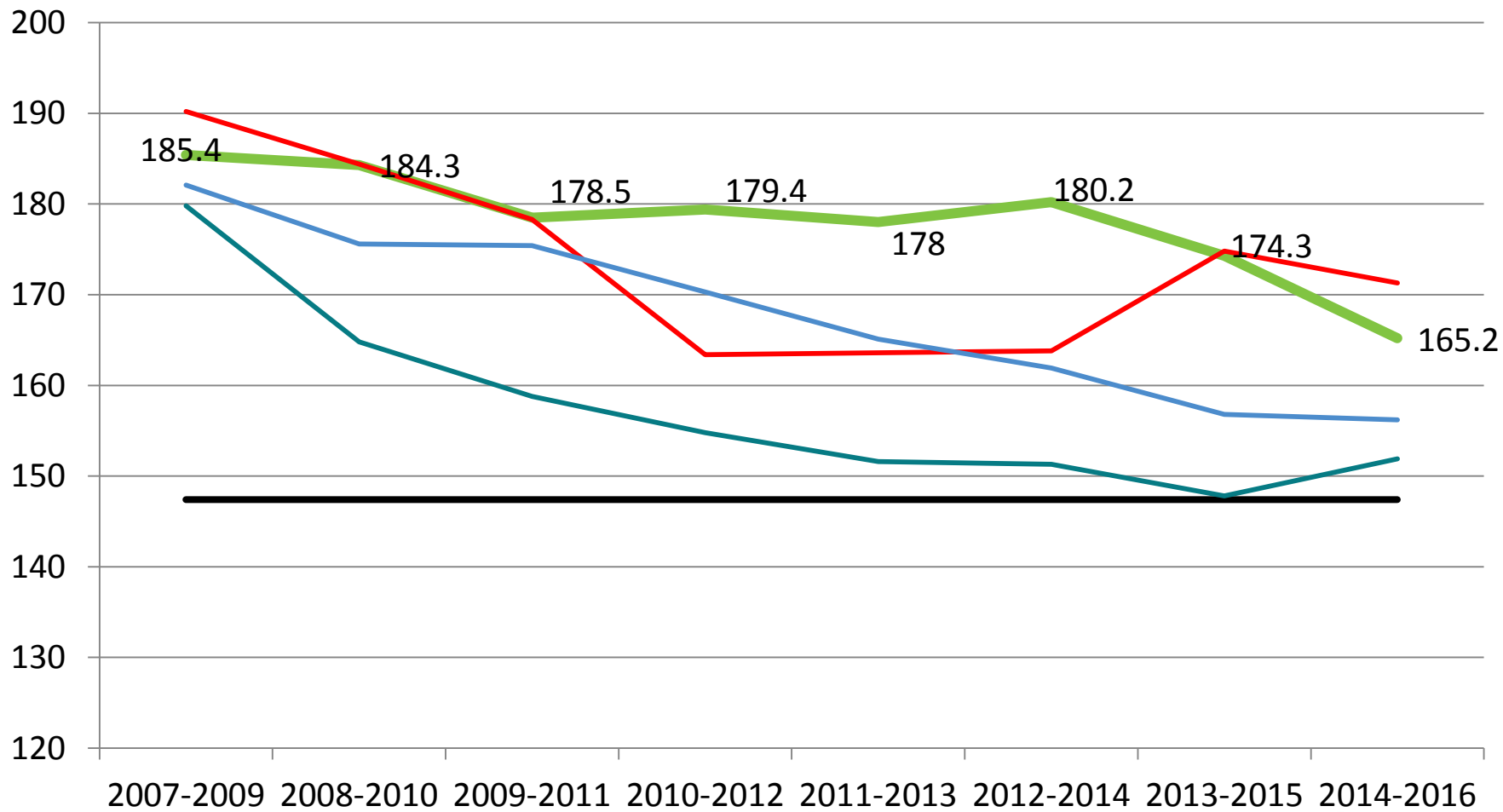
# Malignant Neoplasms Mortality (per 100,000 lives)



# Cancer Mortality Rate

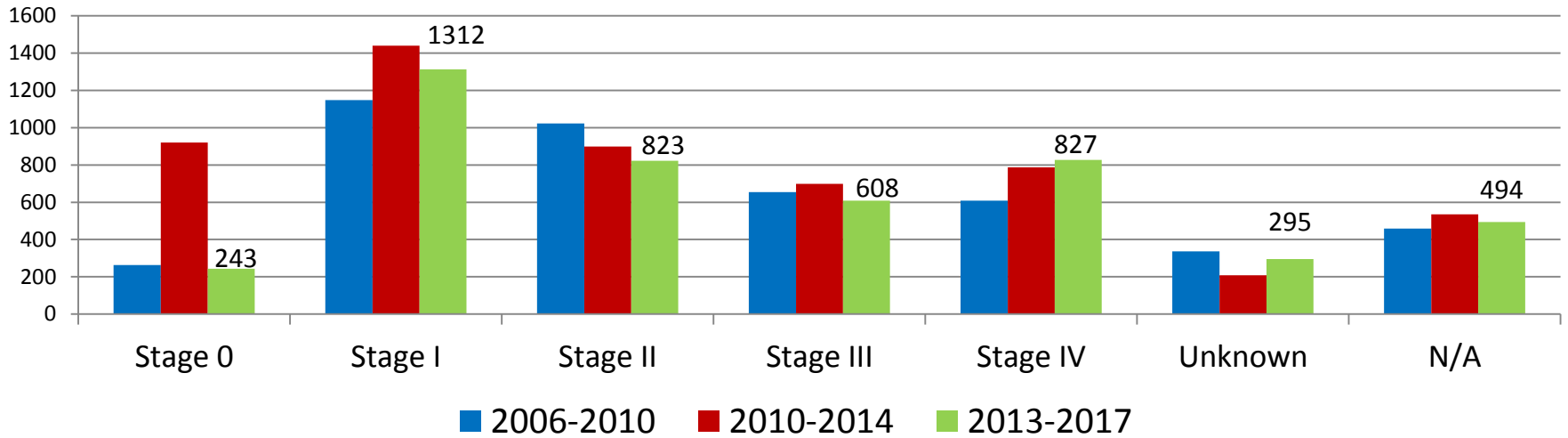


# Cancer Mortality Rate County Comparison

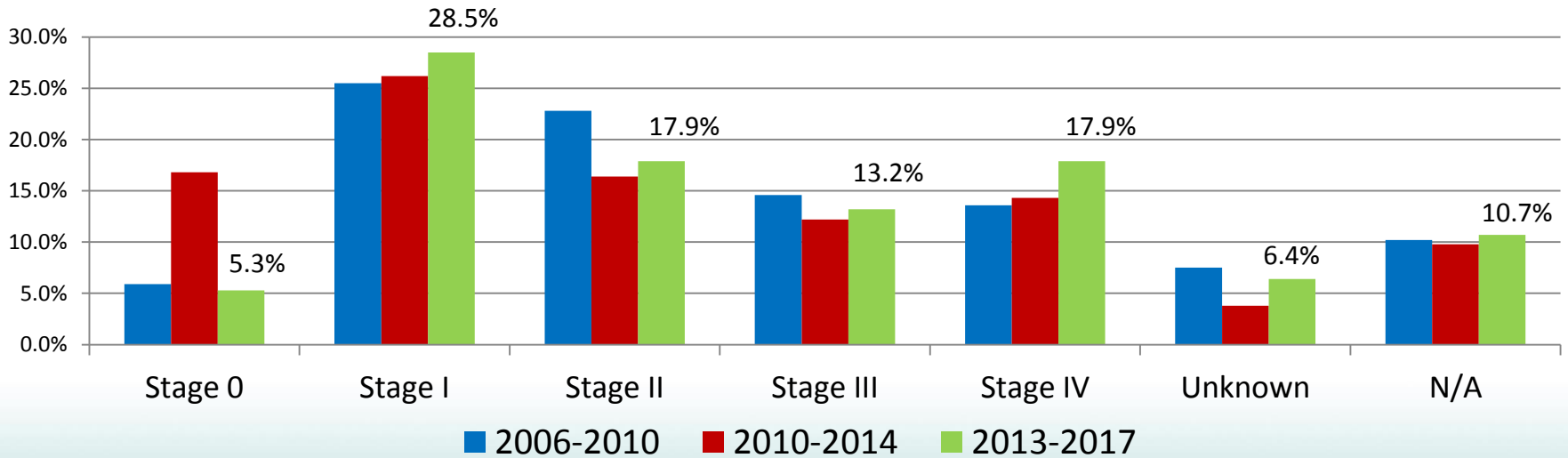


— MD Goal    — Washington    — Allegany    — Frederick    — Carroll

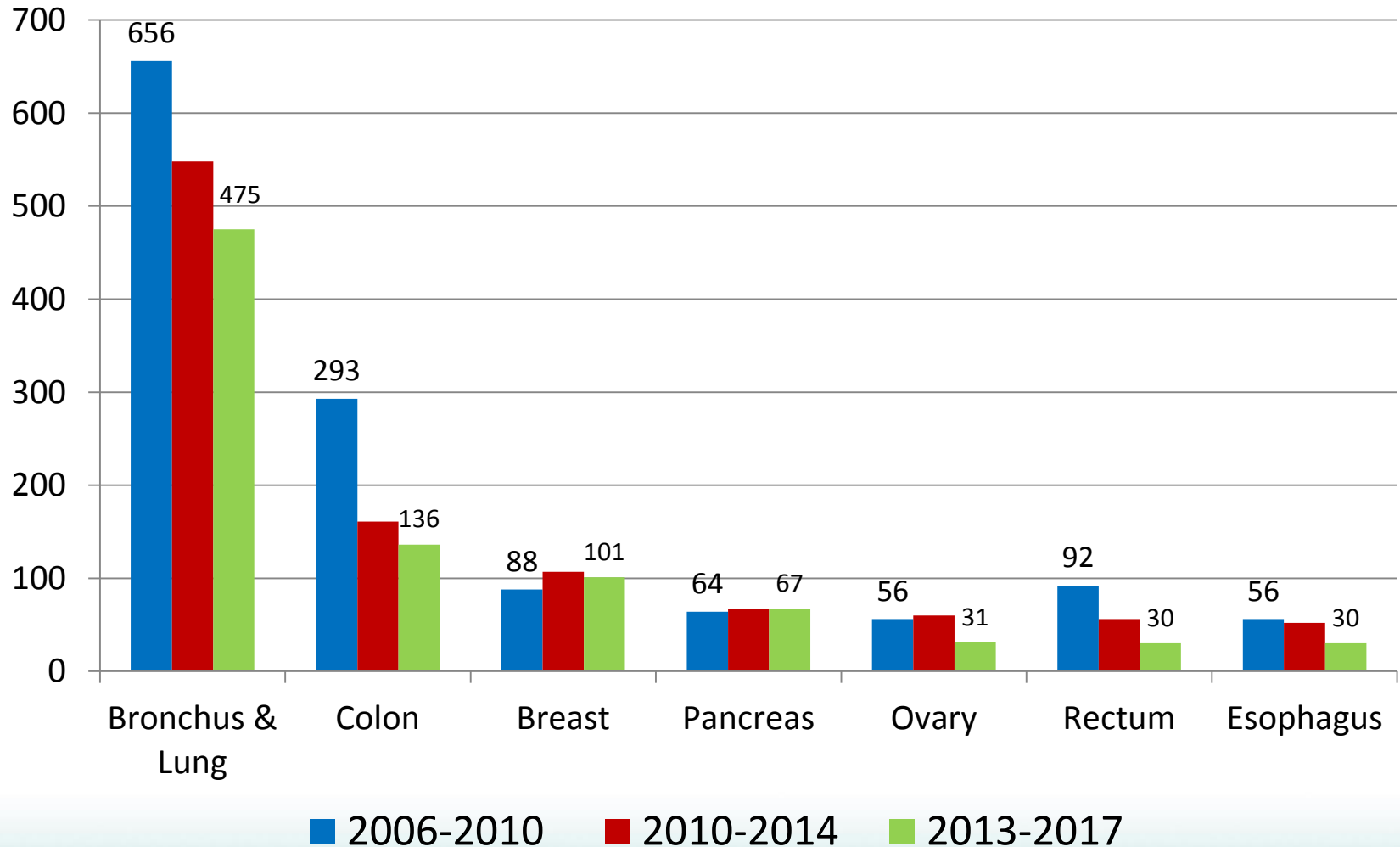
## MMC Cancer Cases



## MMC Cancer Cases - %



## MMC - Cancer Cases with Higher Than Average Percentages of Stage 3 or 4





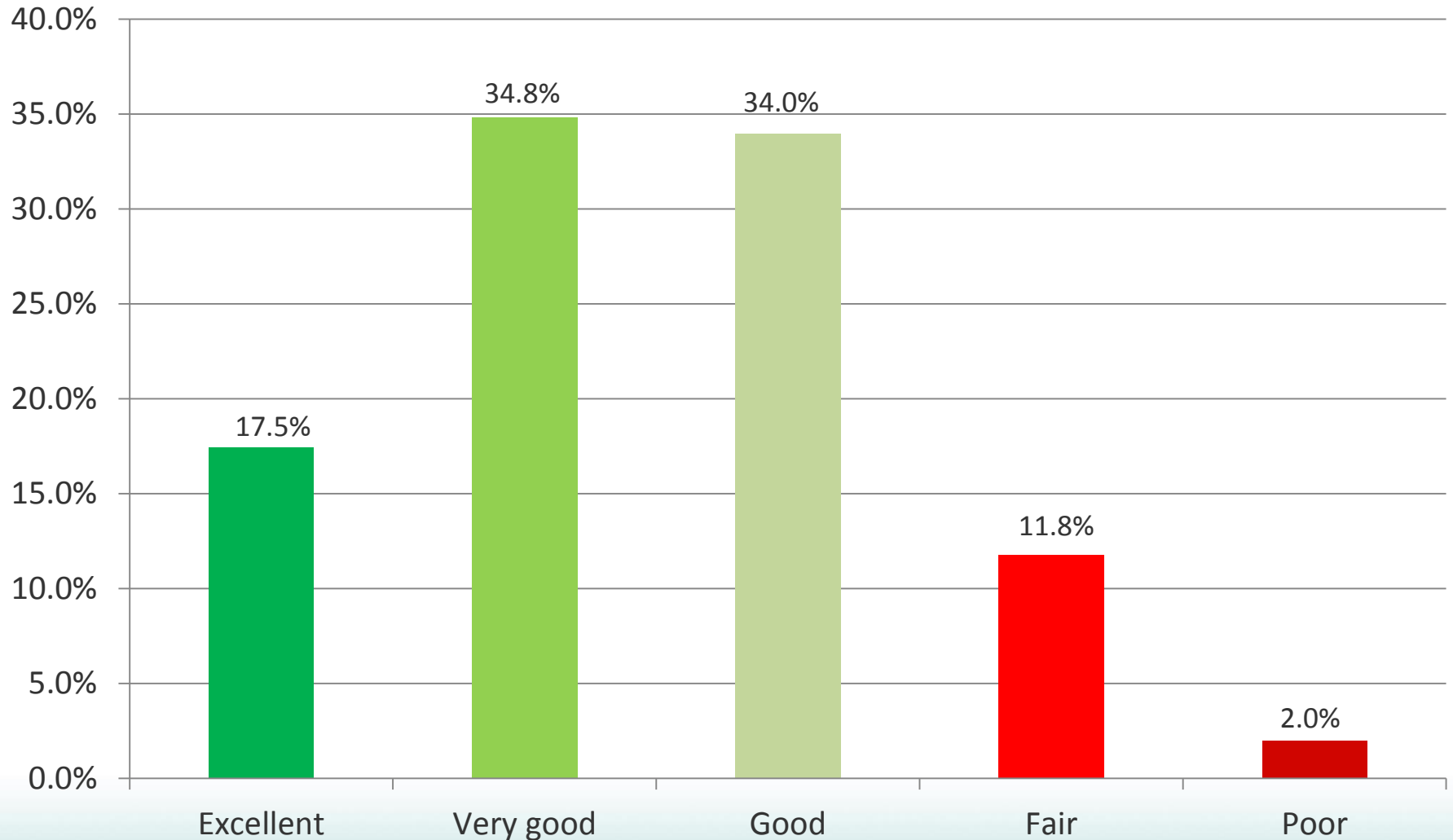
# MENTAL HEALTH

F. Marshall Rock, Washington County  
Core Service Agency

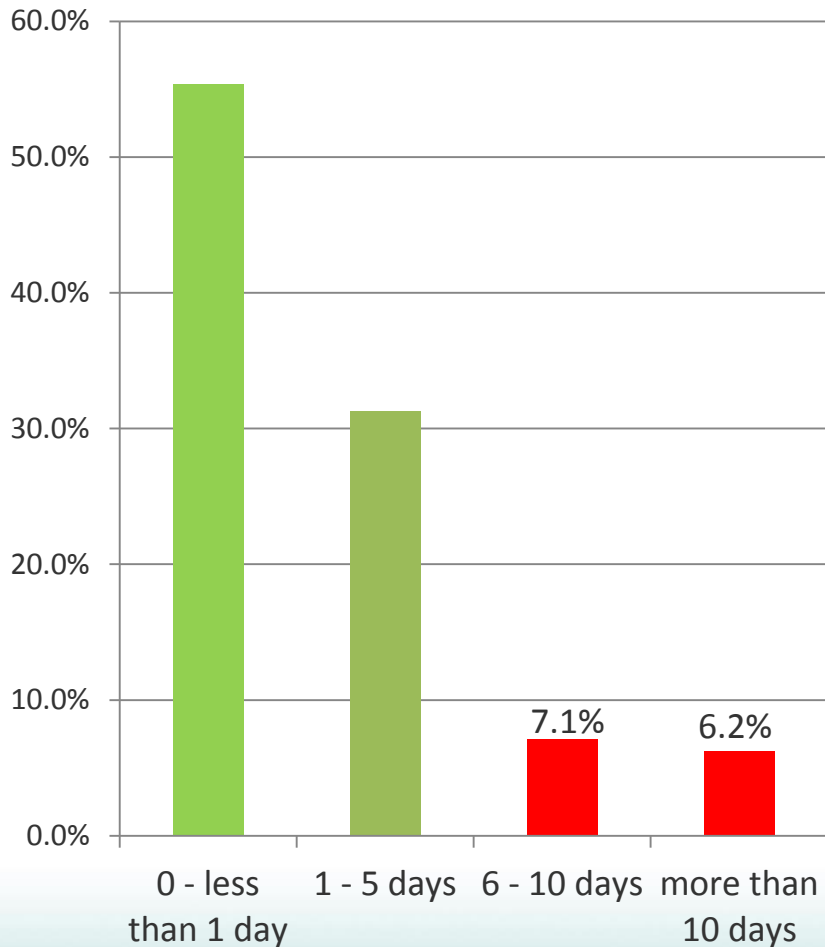
Curt Miller, Brook Lane Health Services



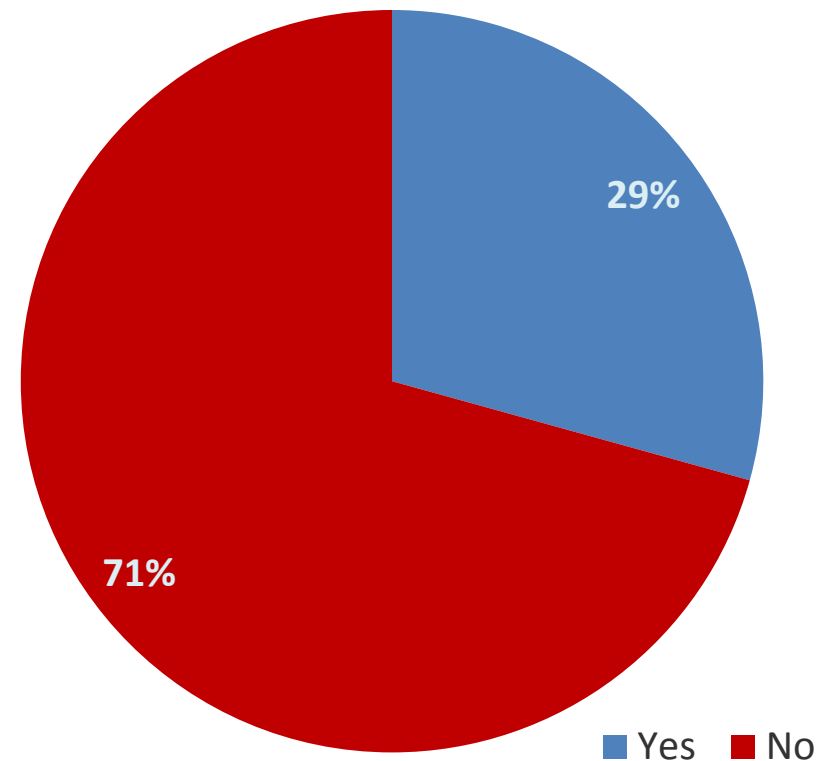
## Q16. In general, how would you rate your overall mental or emotional health?



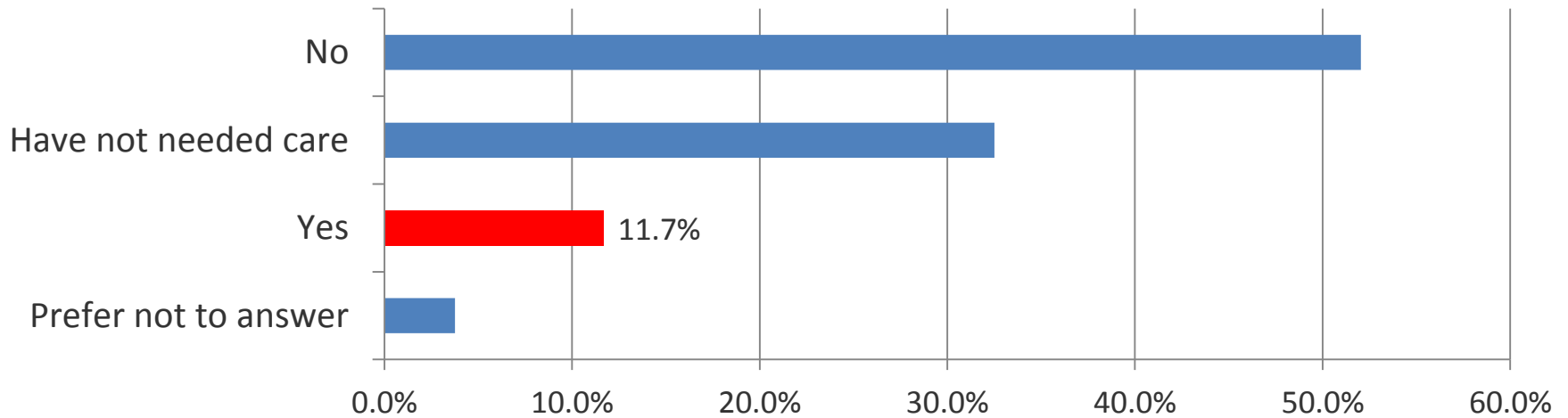
**Q17. During the past month have you often been bothered by feeling down, depressed or hopeless?**



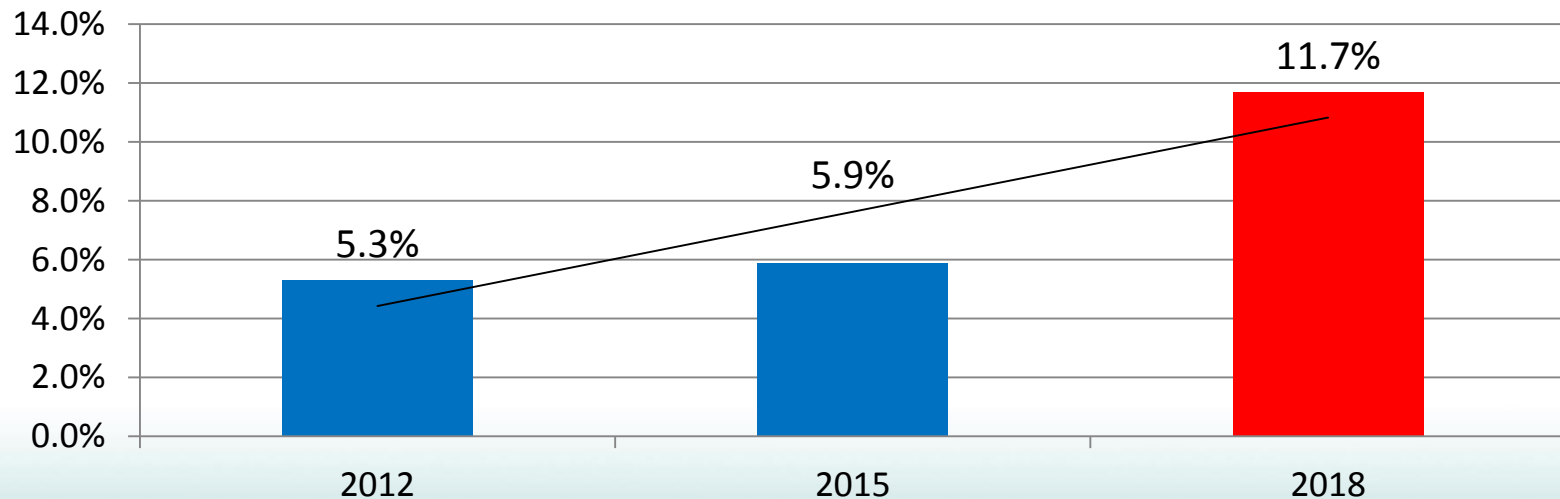
**Q18. In the past month have you often been bothered by little interest or pleasure in doing things?**



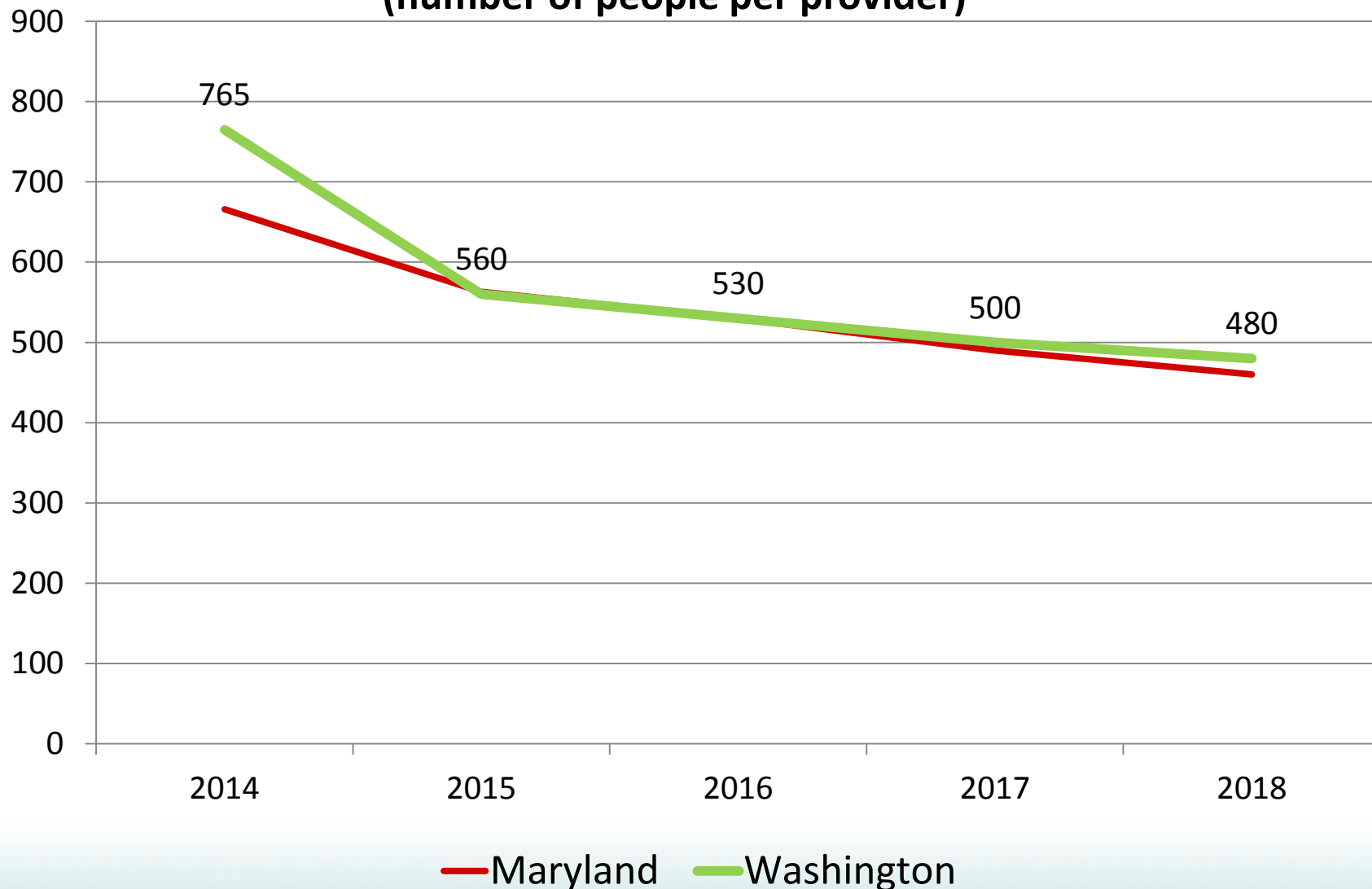
## Q19. Have you ever needed mental health treatment and couldn't get it?



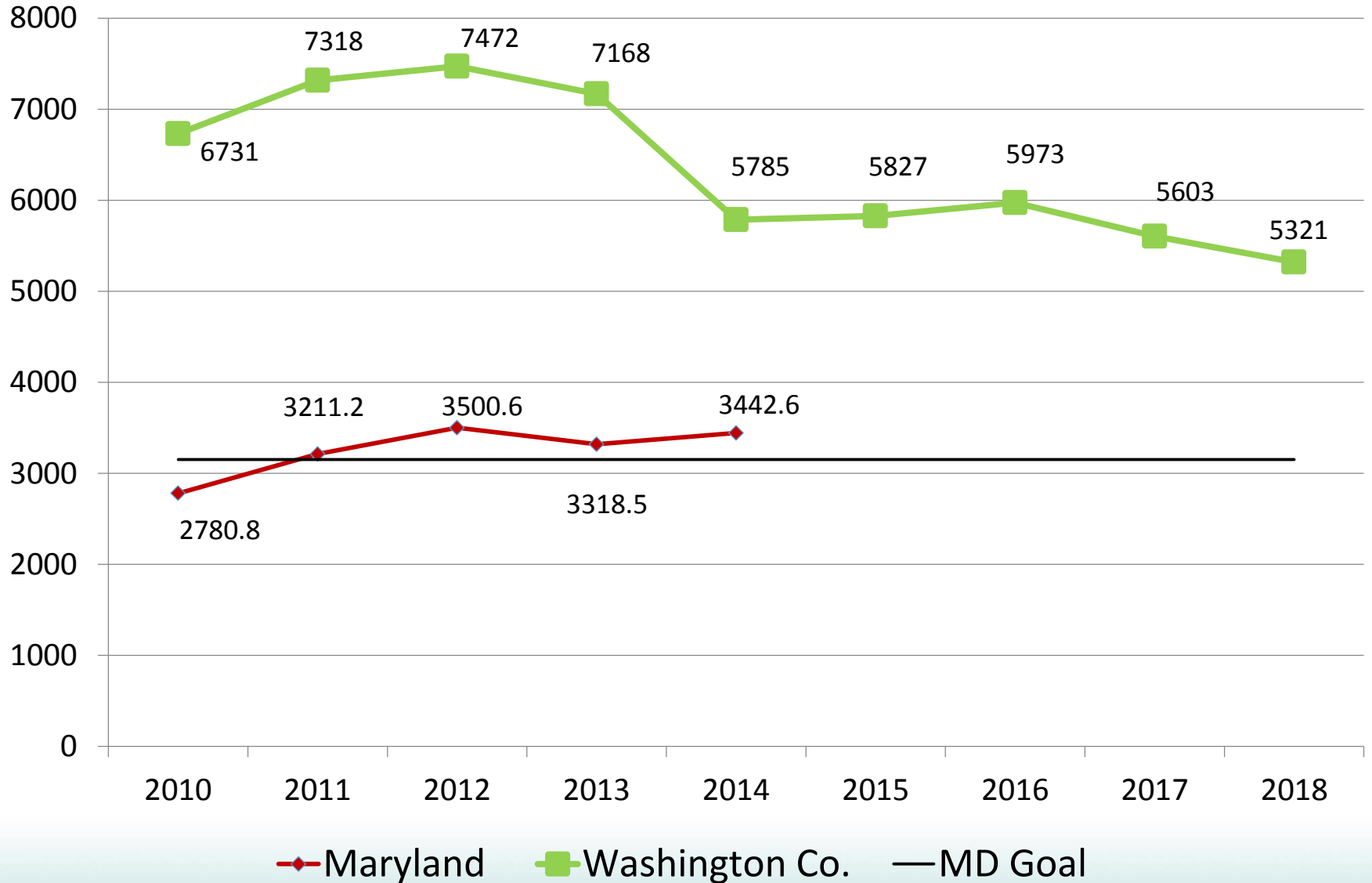
## Needed mental health treatment and couldn't get it



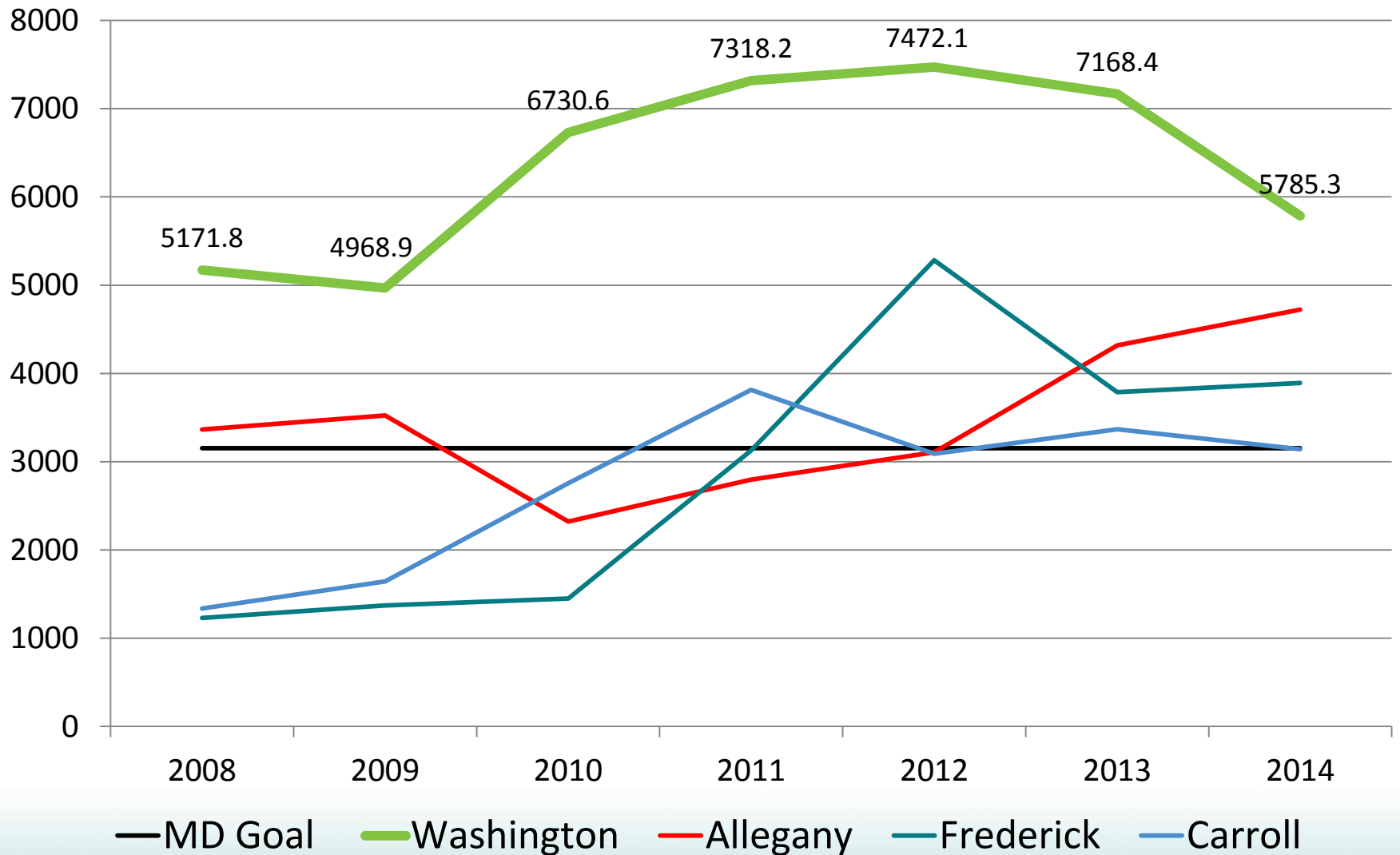
# Mental Health Providers (number of people per provider)



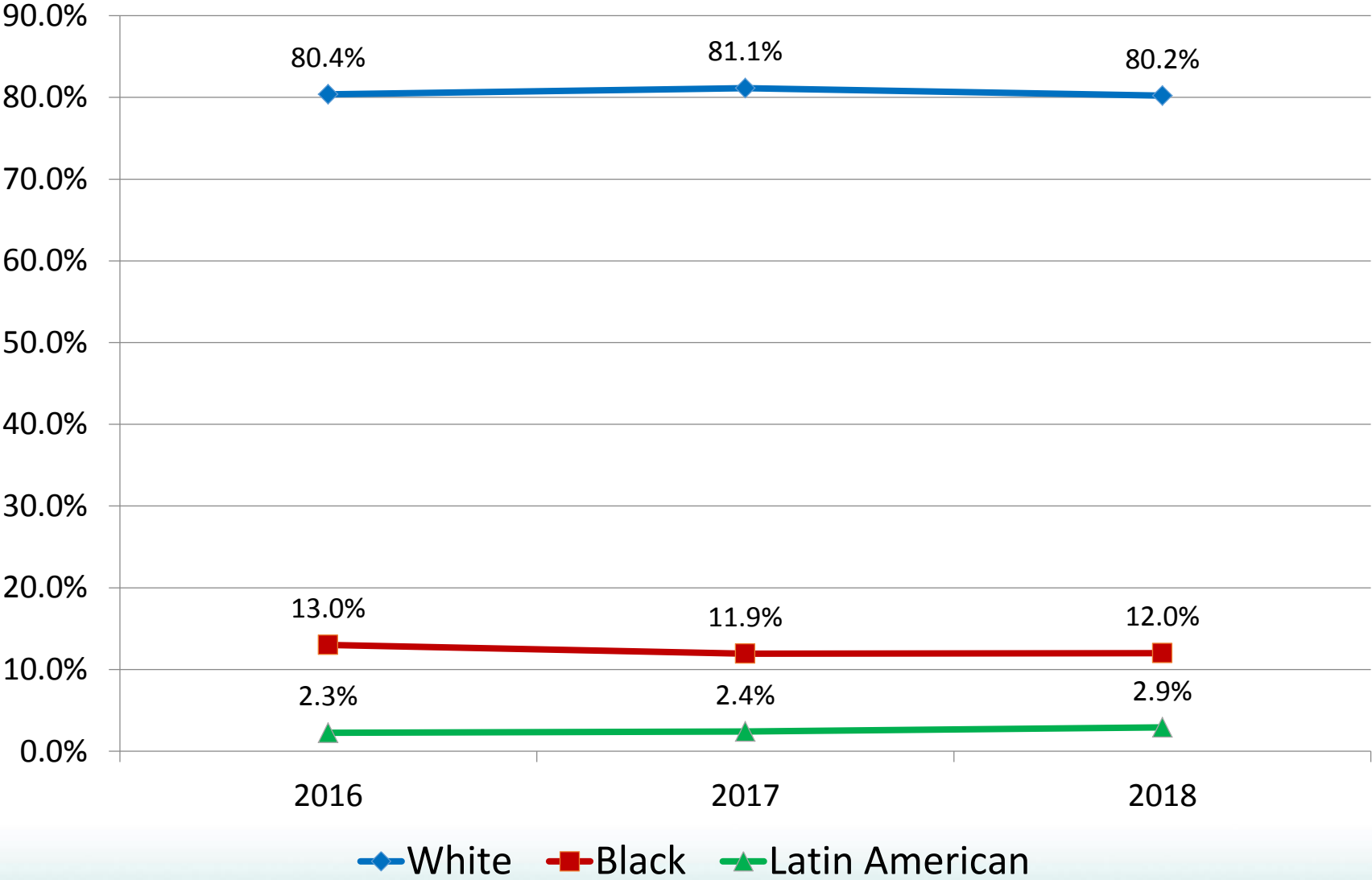
# Behavioral Health ED Visits – Raw Data



# ED Visits Related to Behavioral Health Conditions County Comparison



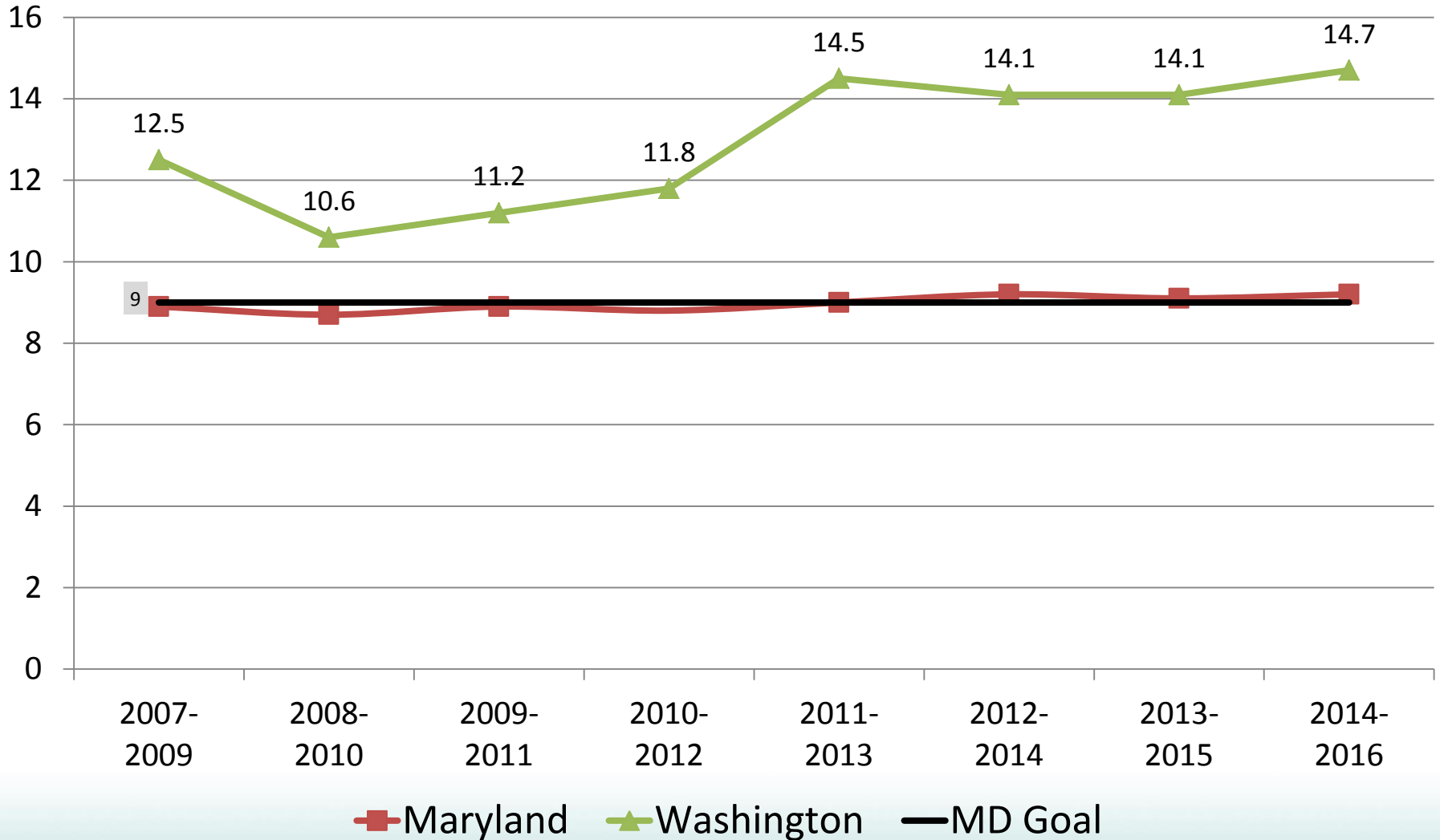
# Mental Health in ED



Source: MMC 2018




# Suicide Rate (per 100,000 people)



## Why?

- Stigma and denial
- Treatment not always available when “ready”
- Depression symptoms are minimized

## Barriers

- Cost; uninsured, high deductibles, co-pays
  - Federal rules around confidentiality
  - Can be a long wait for new patient intake
  - Shortage of psychiatry providers
- 

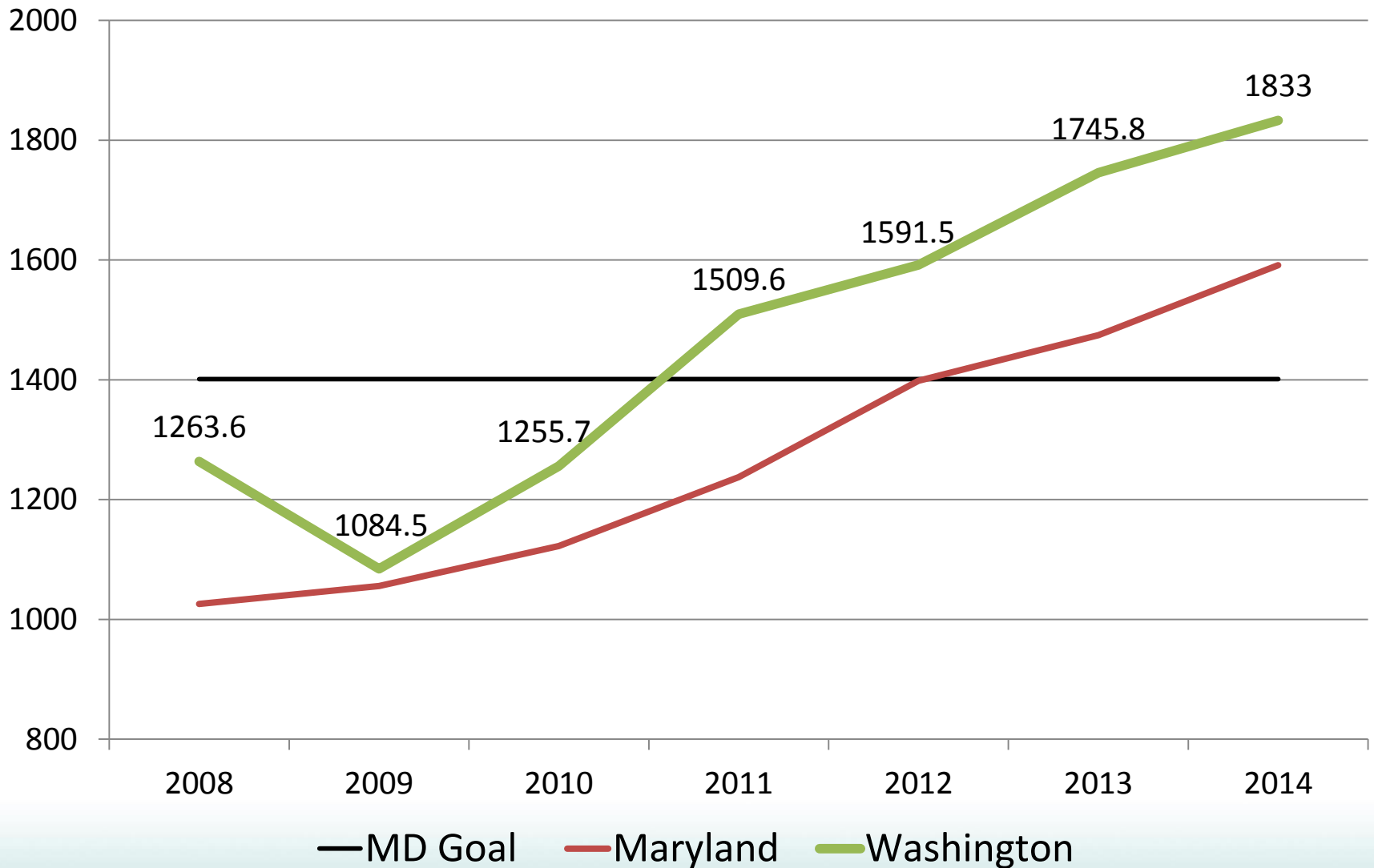
# **SUBSTANCE USE DISORDER**

Cynthia Terl, Wells House

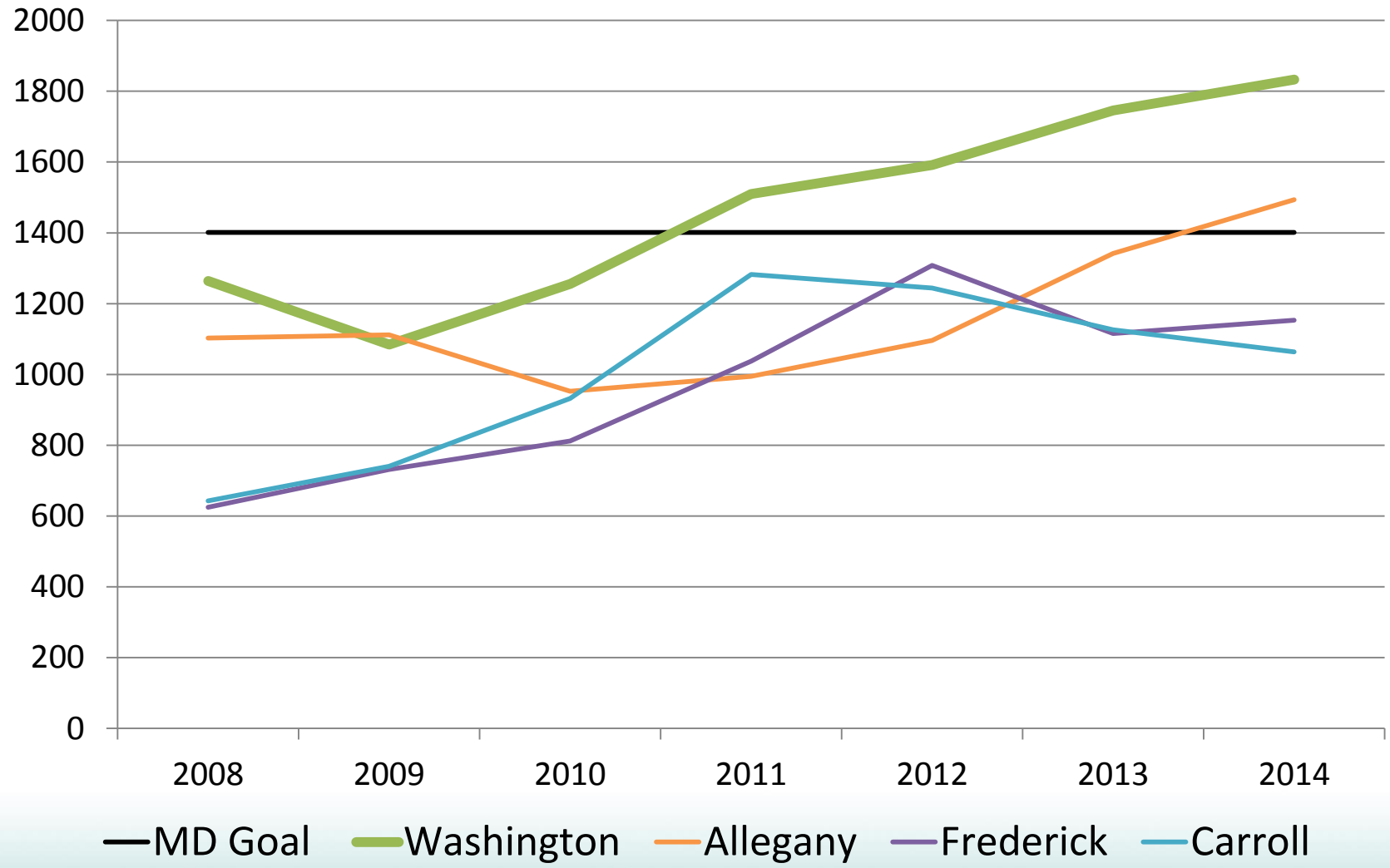
Victoria Sterling, Local Addictions Authority



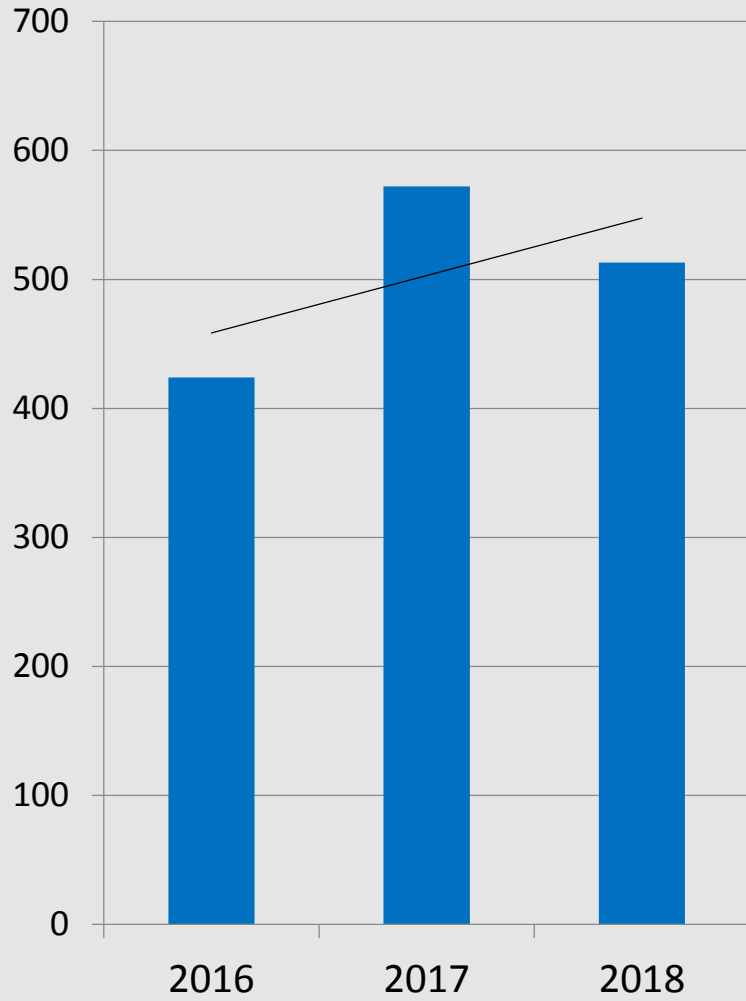
# ED Visits for Addictions-Related Conditions



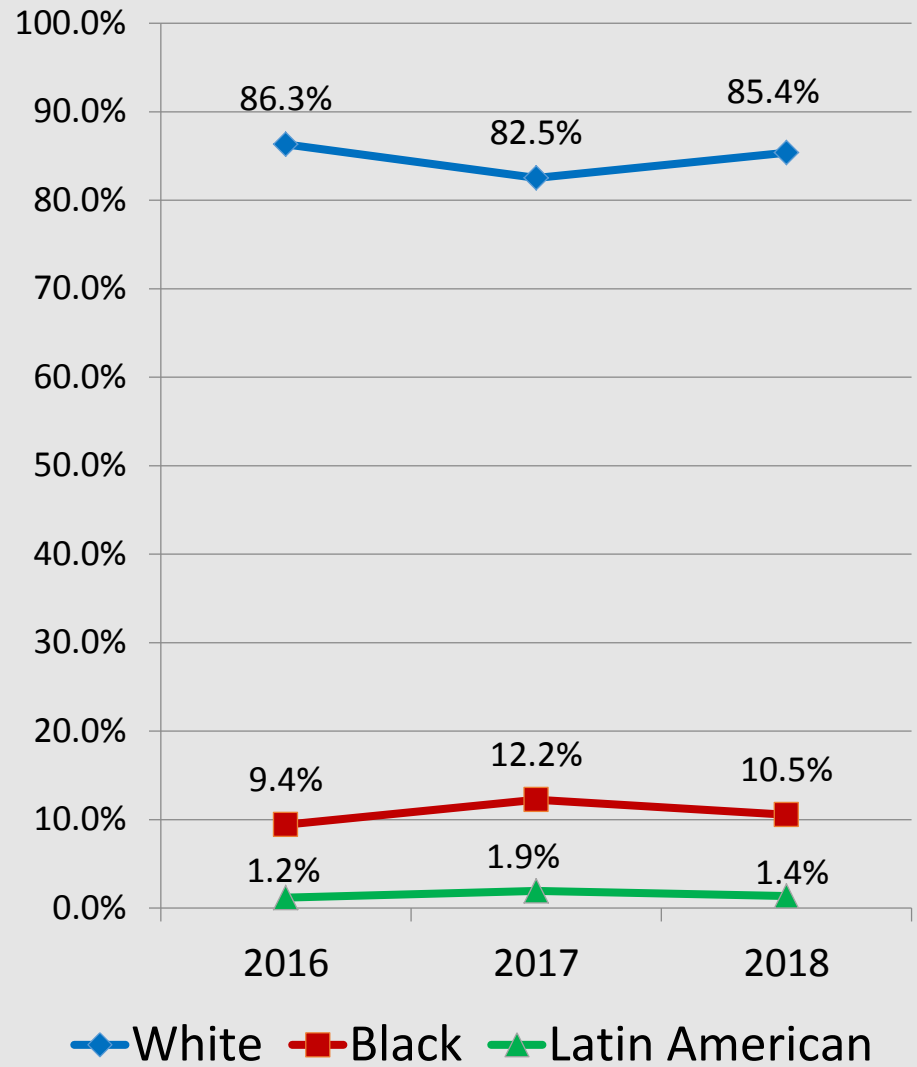
# ED Visits for Addictions-Related Conditions County Comparison



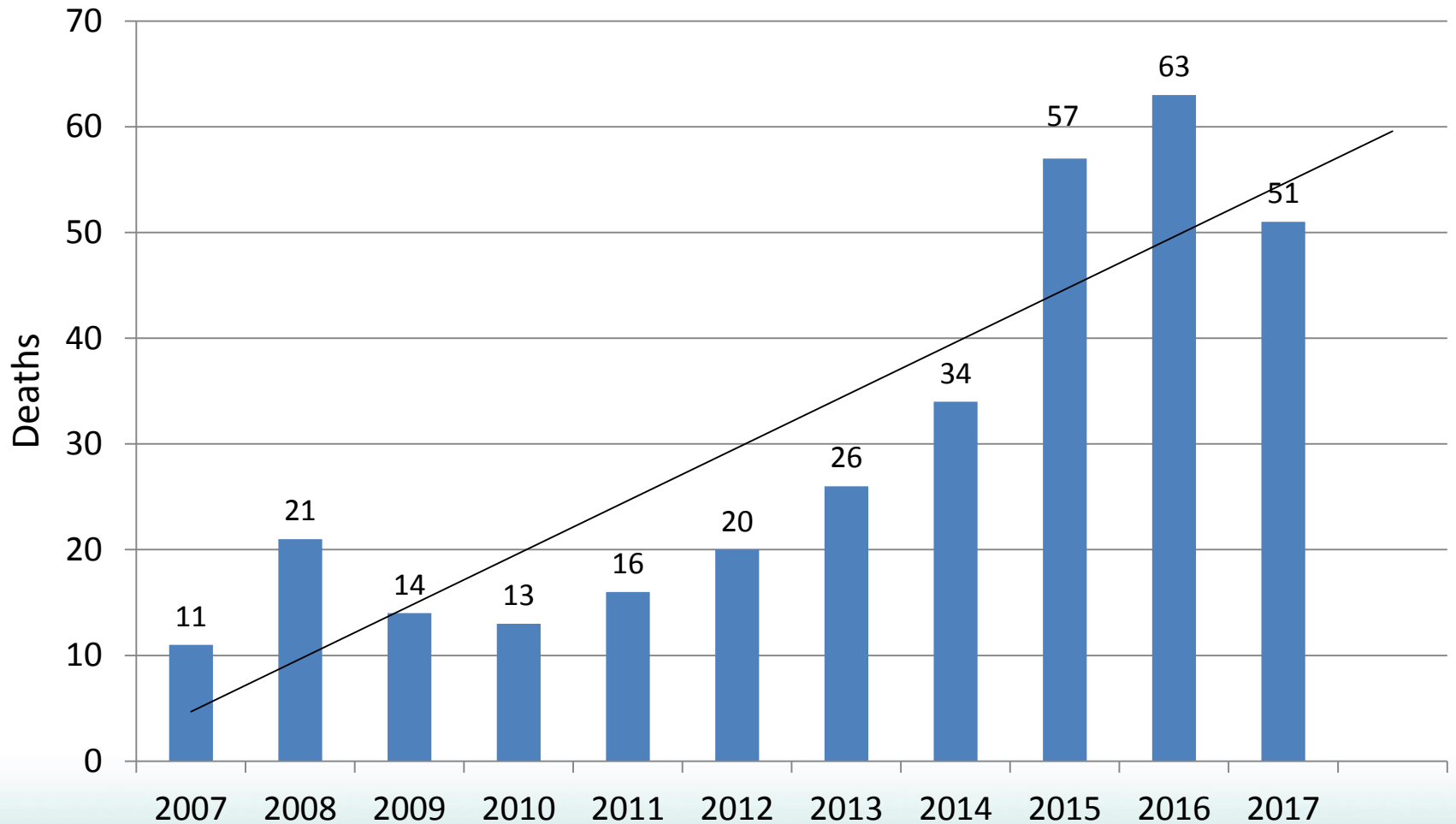
## Drug Overdoses in ED Raw data 3 years



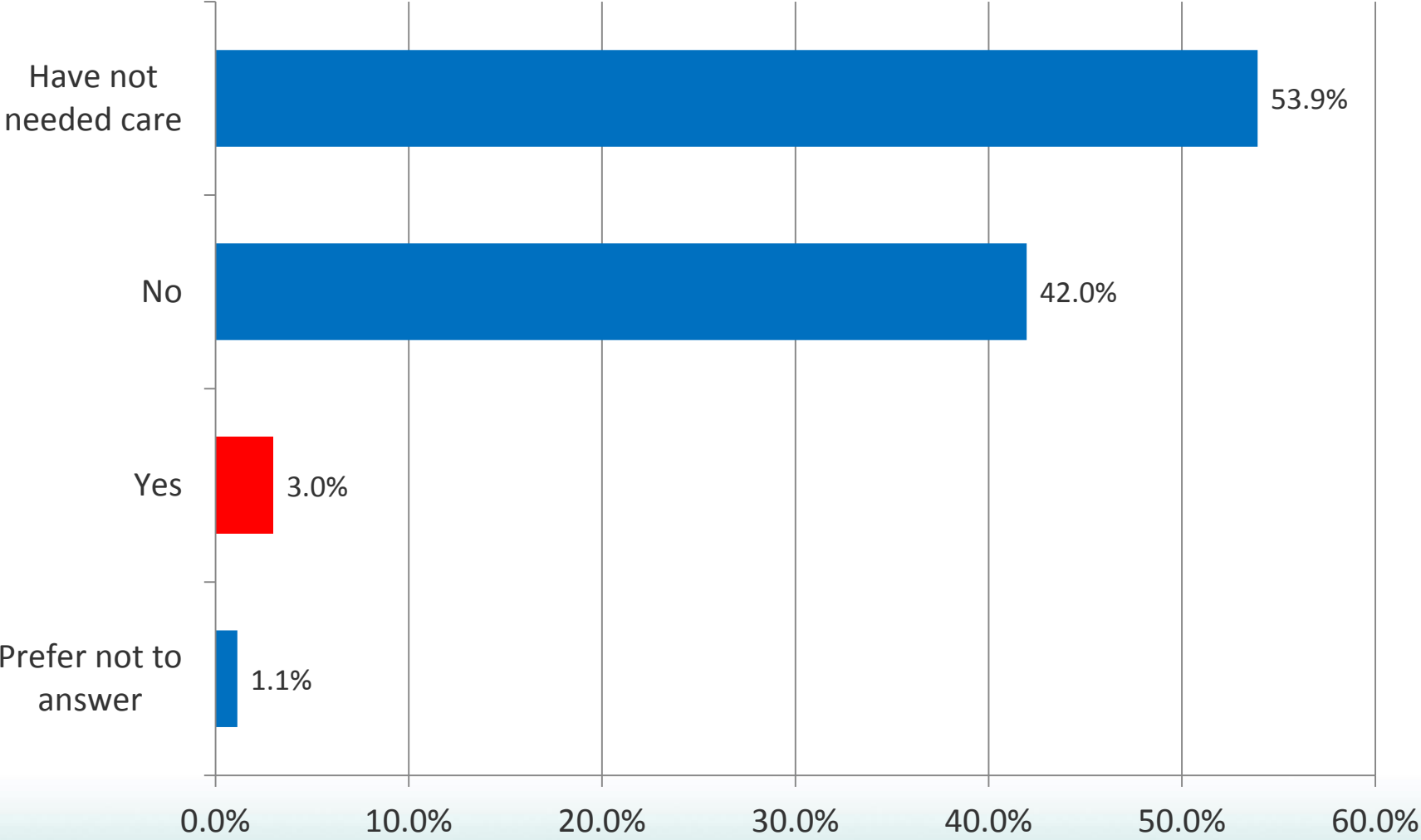
## Drug Overdose in ED



# Total Opioid Overdose Deaths *Washington County*



# Q20. Have you ever needed substance use treatment and couldn't get it?





## Why?

- Drugs are readily available
- Pain management
- Stigma; sometimes viewed as a moral problem, or “weakness”
- Associated with crime
- Socioeconomic factors contribute

## Barriers

- Can't always enter treatment when “ready”
- Location of services / transportation

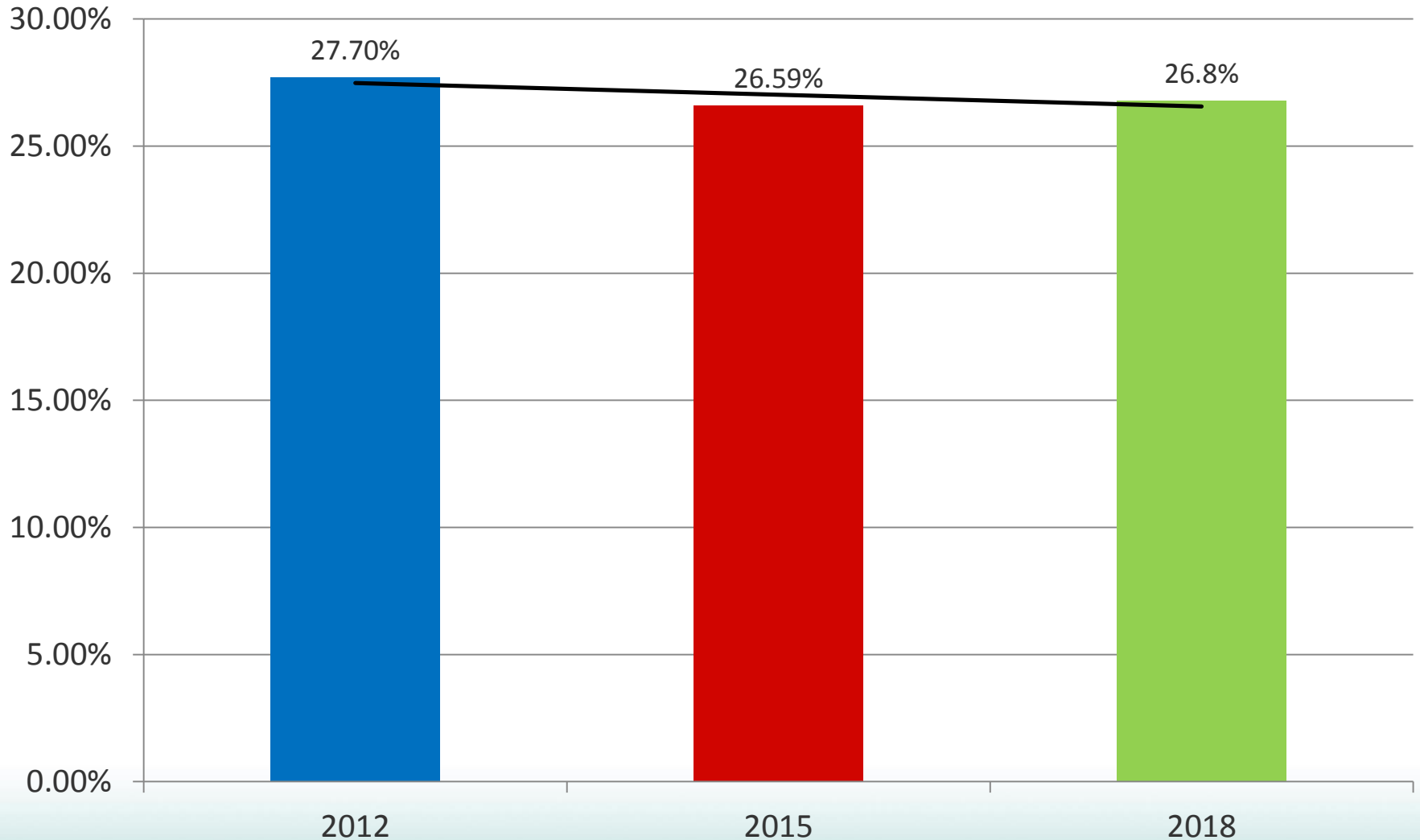


# DENTAL

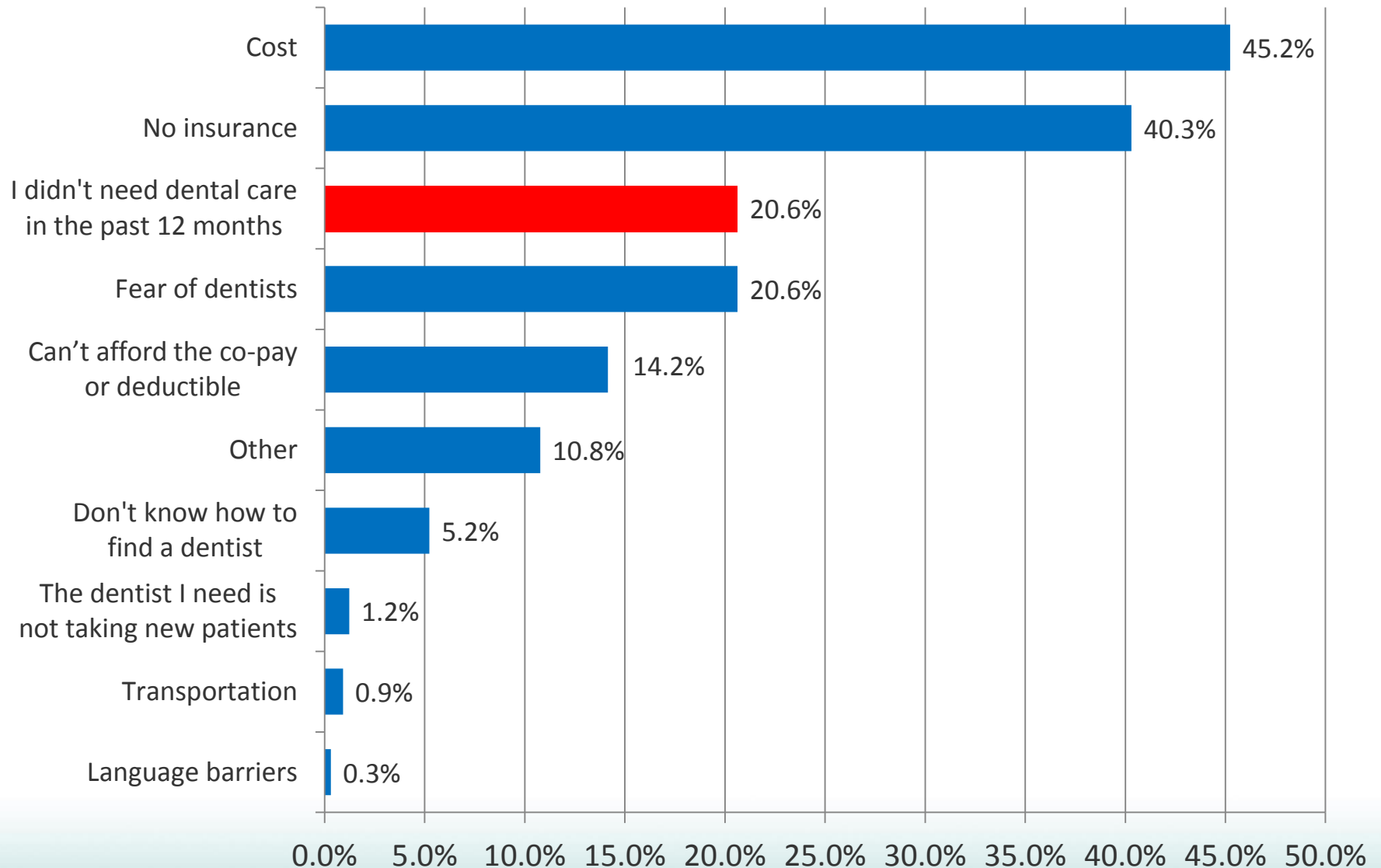
Kim Murdaugh,  
Family Healthcare of Hagerstown



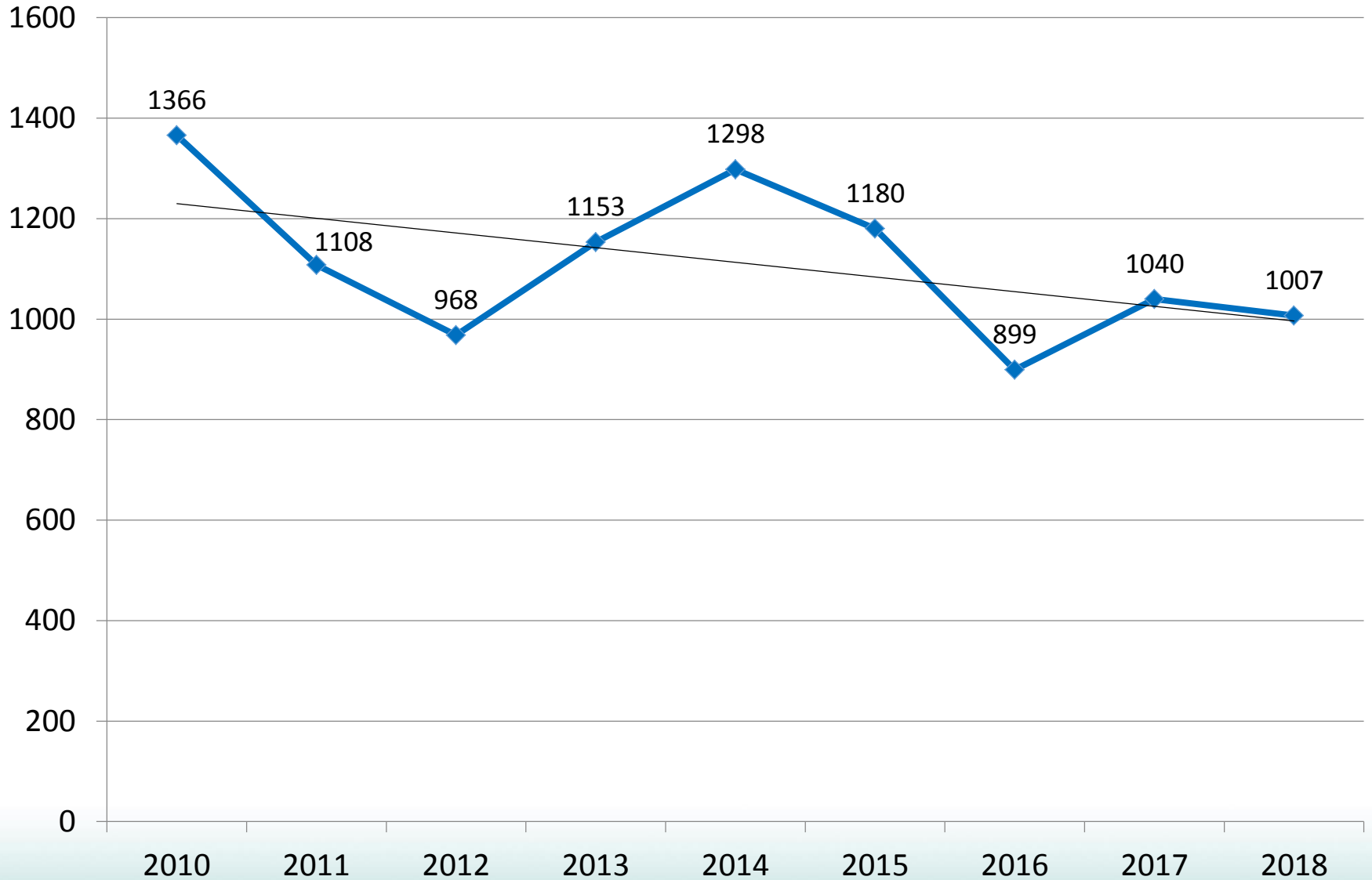
## Q21. In the past 12 months did you receive dental care - NO



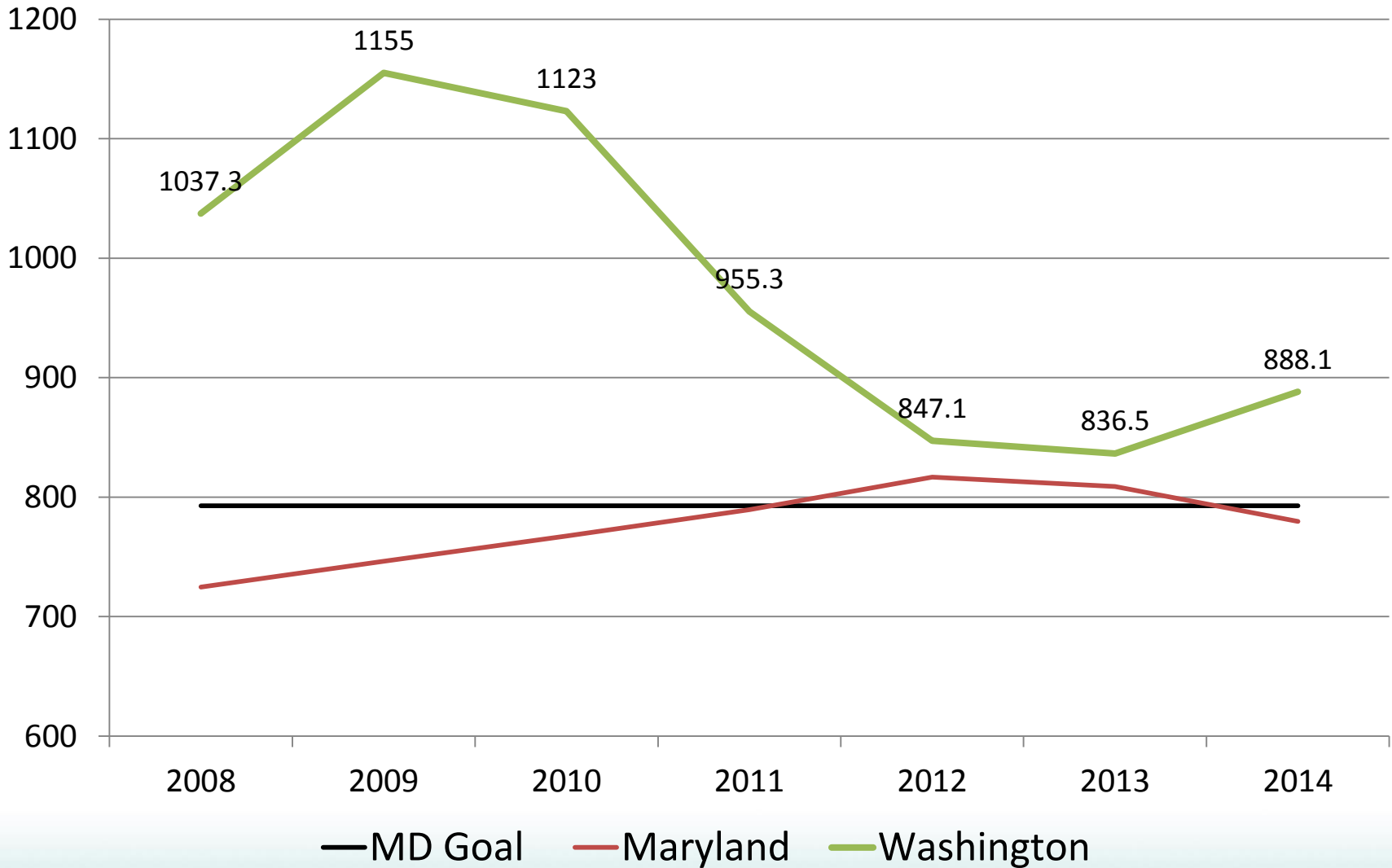
## Q22. If NO, why have you not received dental care?



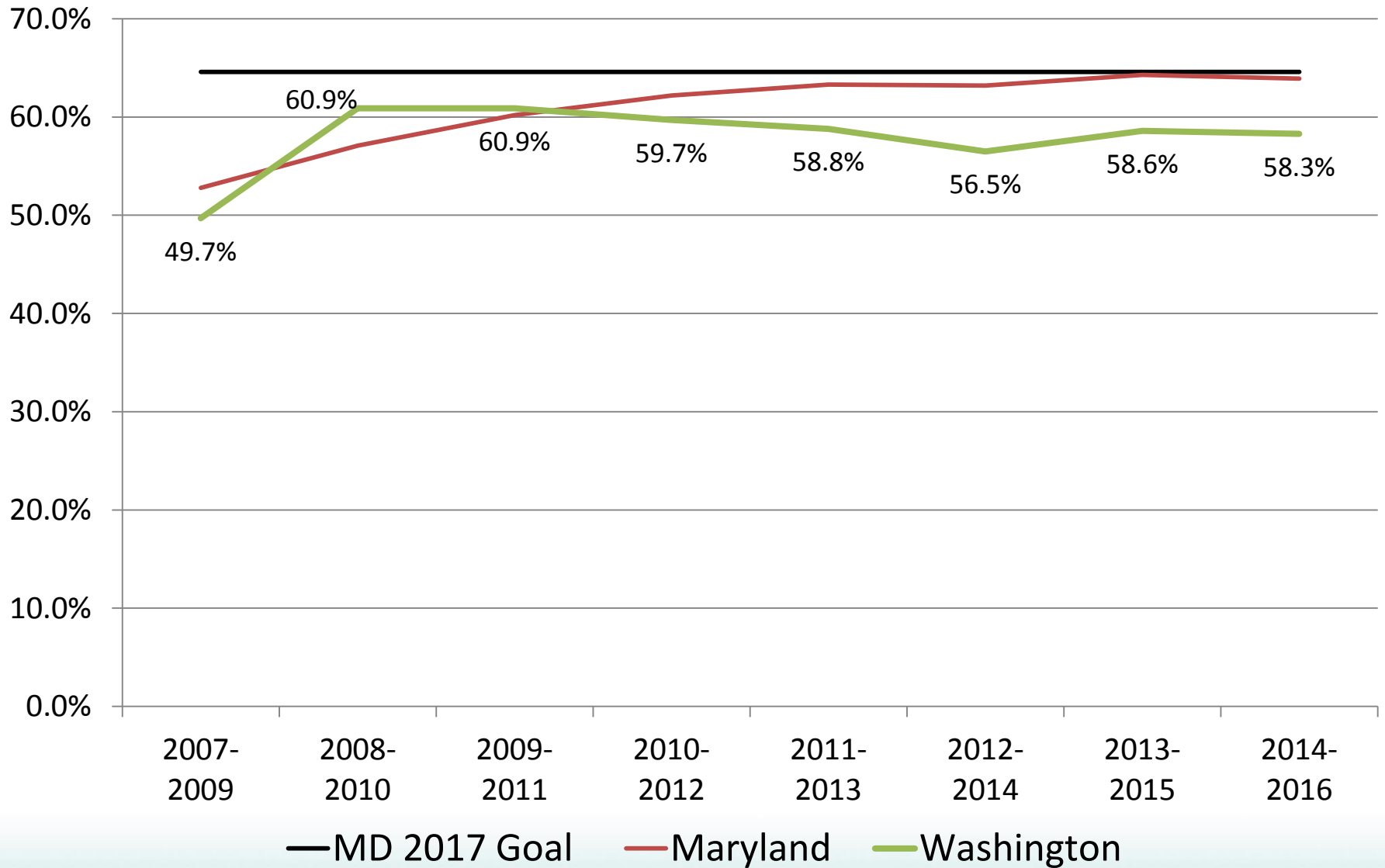
# Dental Conditions Seen in ED - Raw Data



# ED Visit Rate for Dental Care (per 100,000 people)



# Children Receiving Dental Care in the Last Year



## Why?

- Forgo preventative care due to cost
- Tooth extractions are painful and people can't afford it or know where to go

## Barriers

- Cost, lack of insurance
- Funding
- Capacity



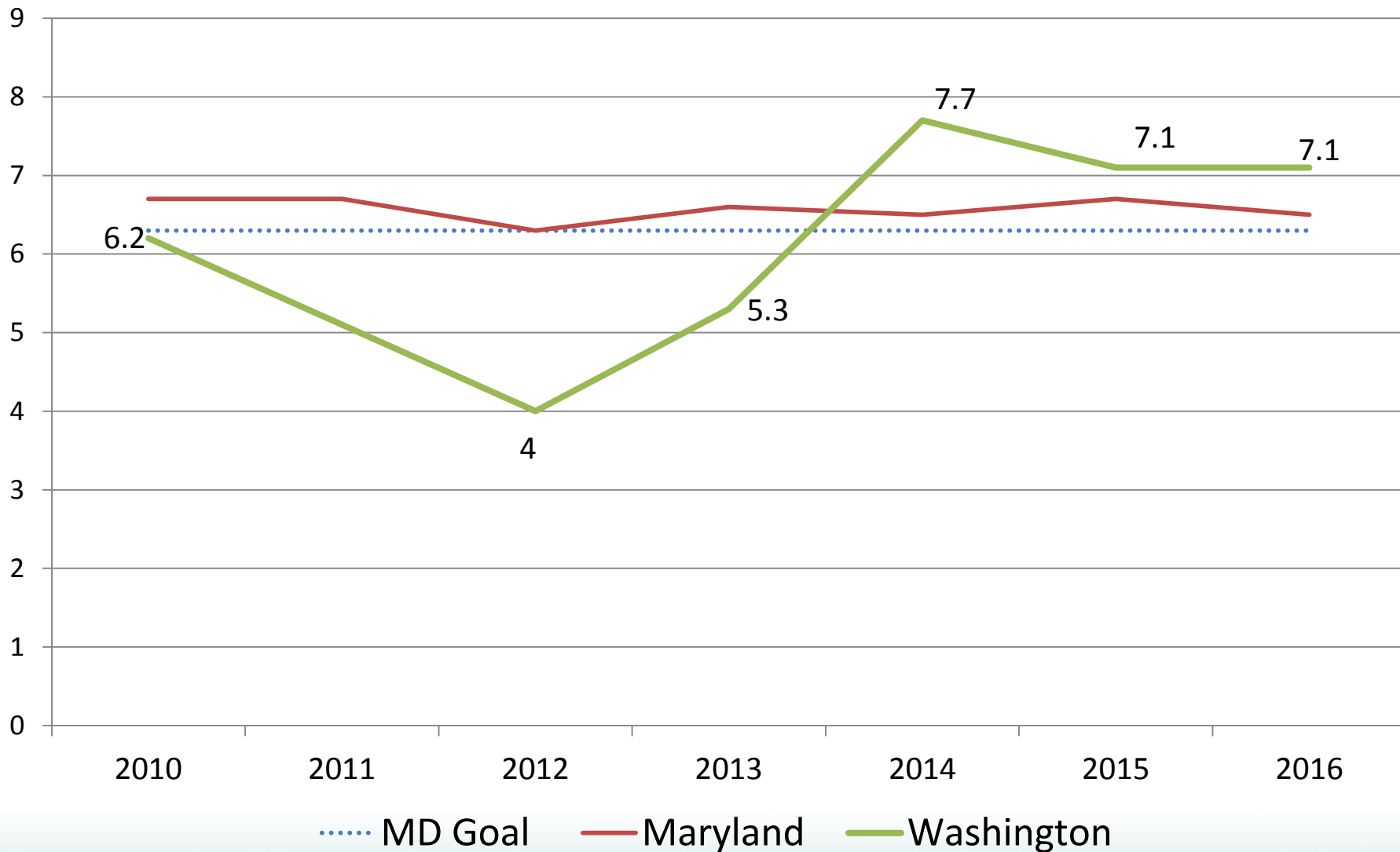


# CHILD HEALTH

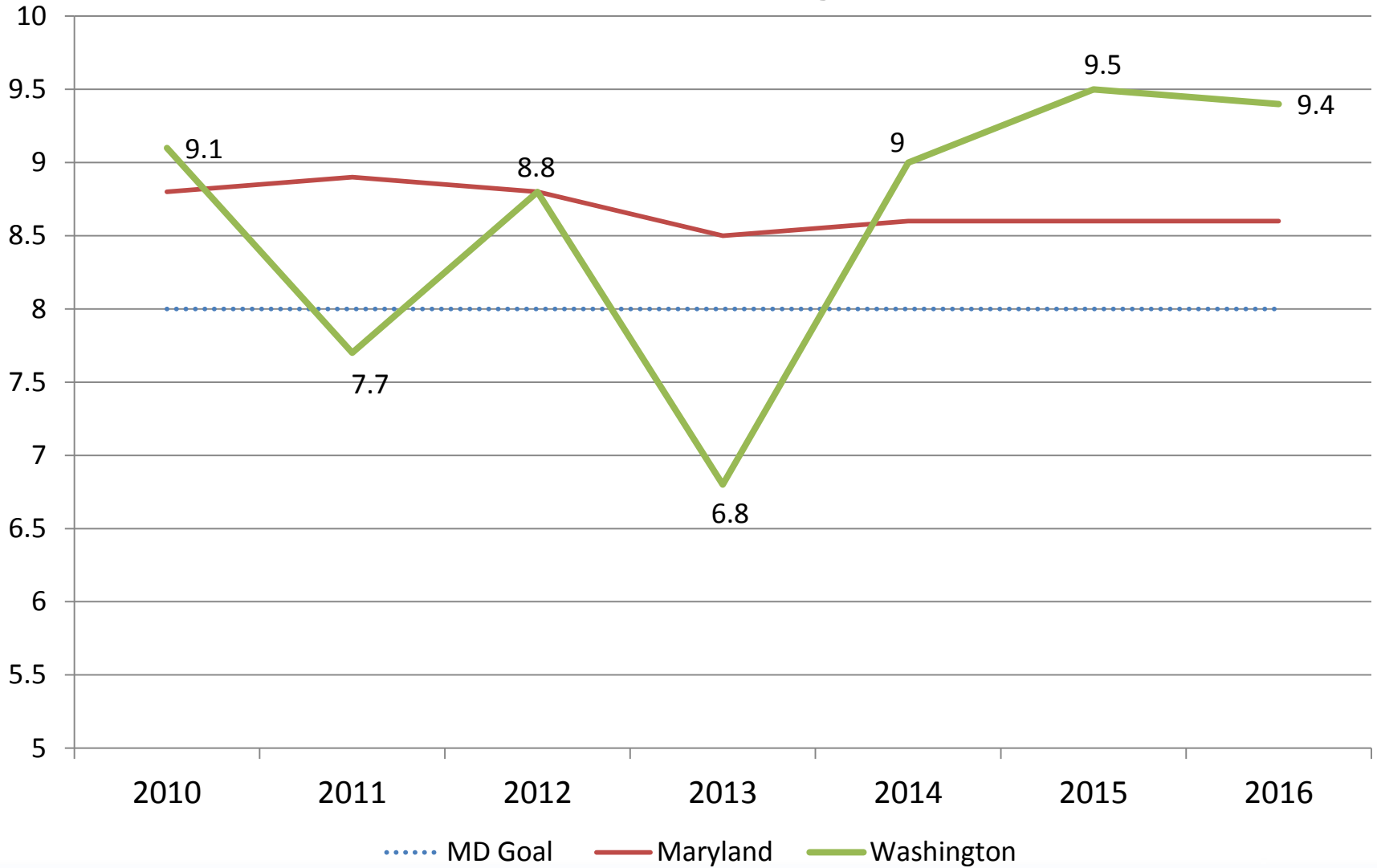
Dianna Gaviria, Deputy Health Officer  
MD Dept. of Health



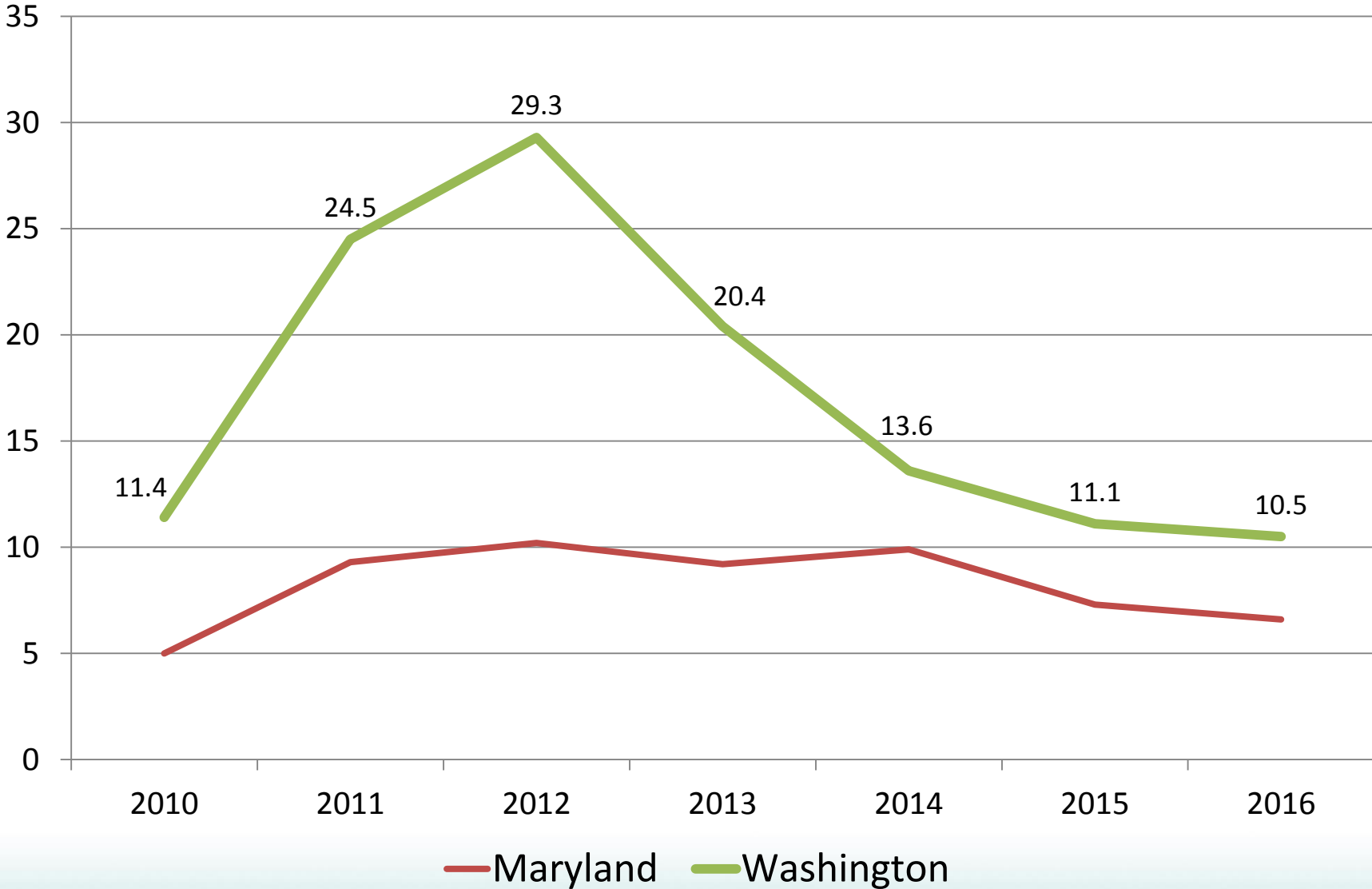
# Infant Death Rate



# Low Birth Weight

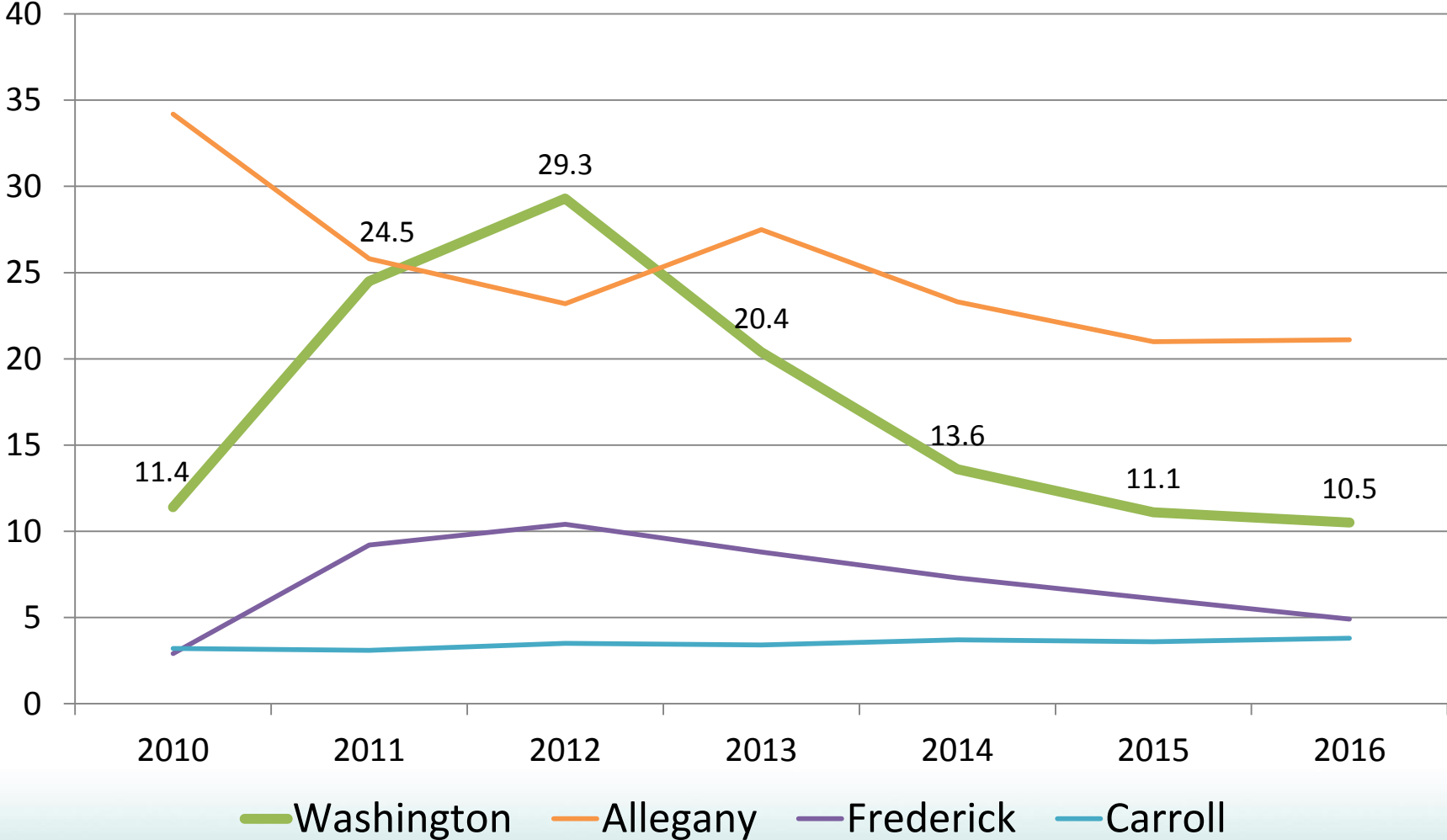


# Child Maltreatment Rate



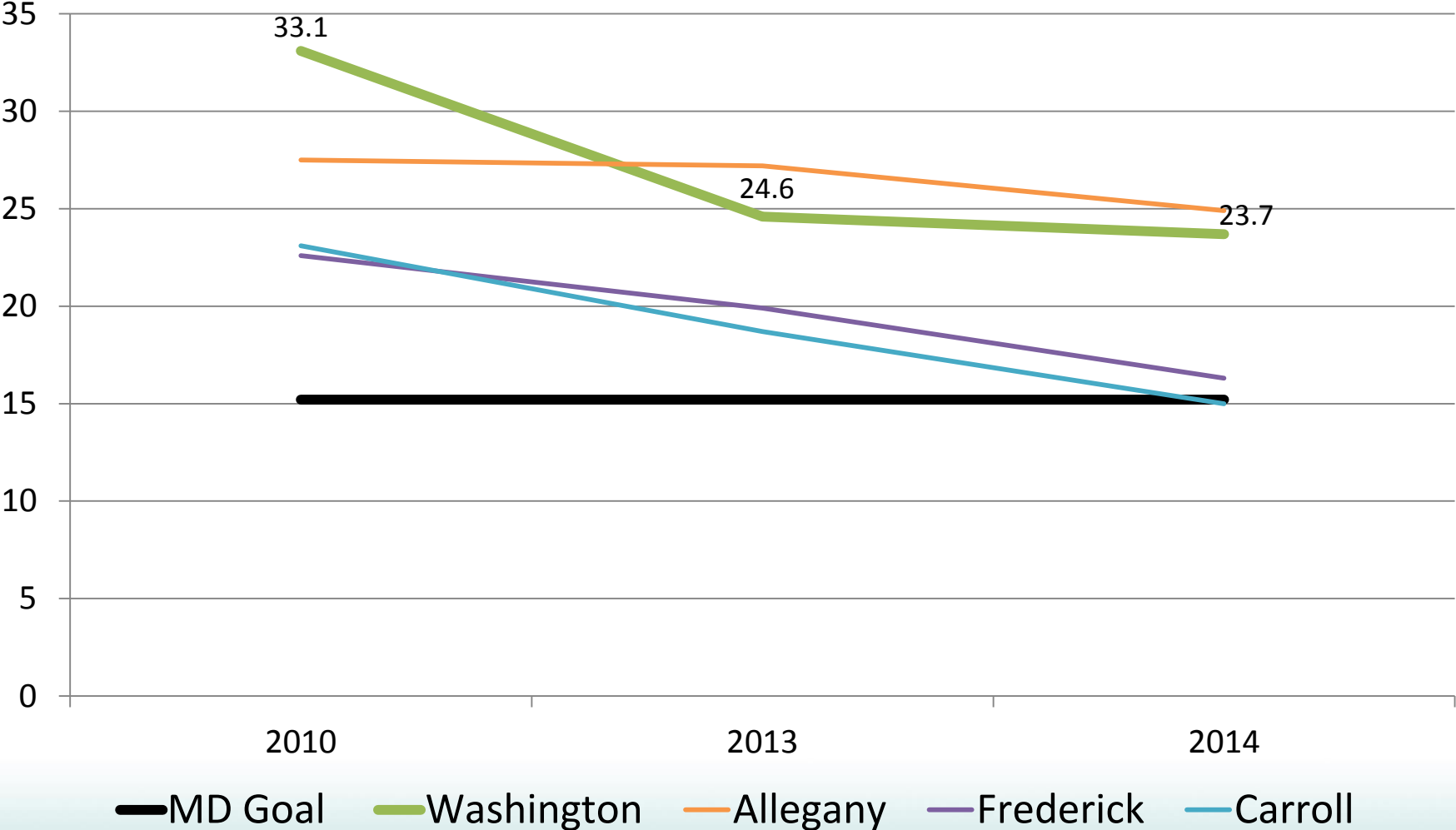
Source: Maryland SHIP 2018

# Child Maltreatment Rate County Comparison



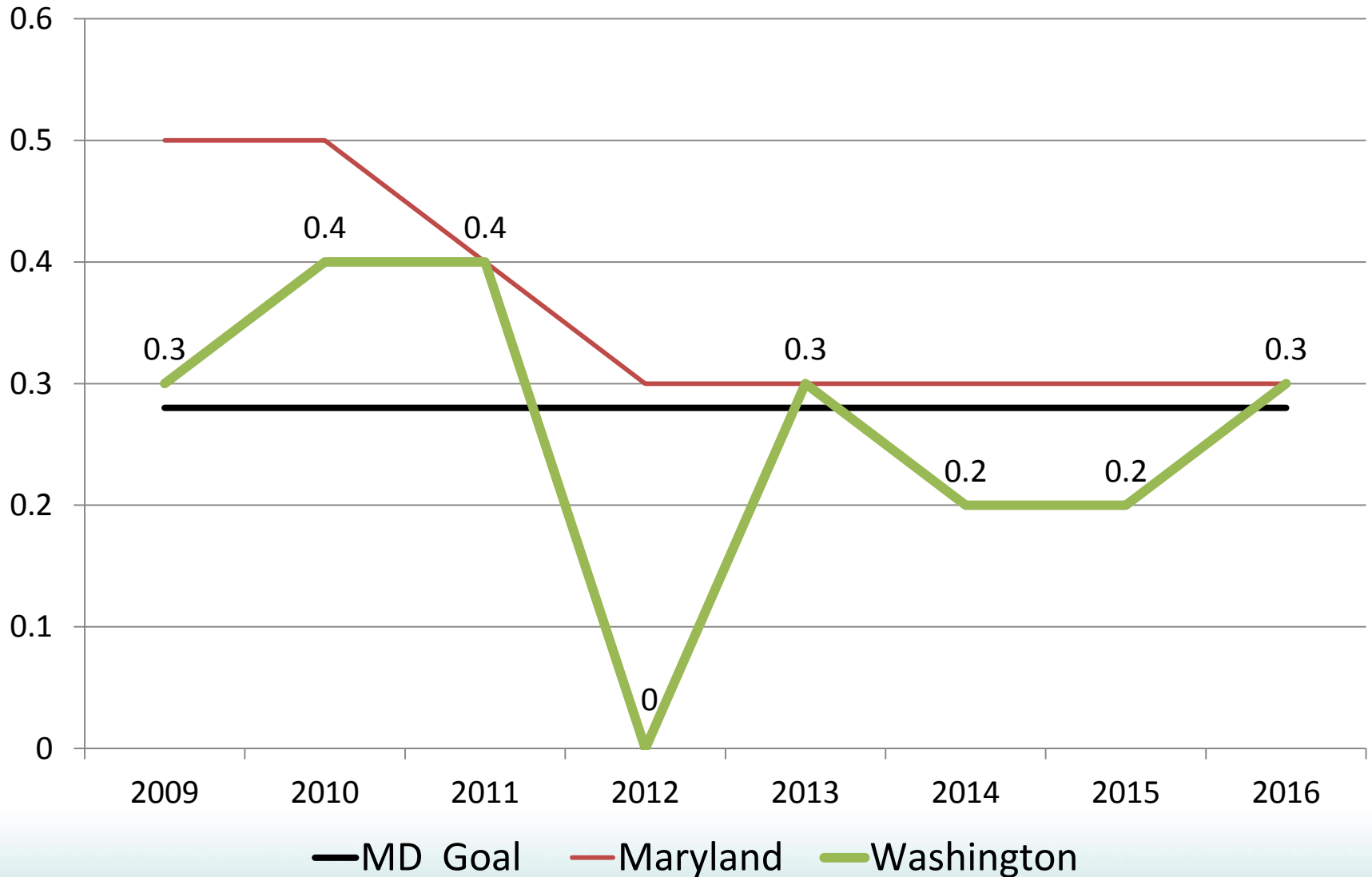
Source: Maryland SHIP 2018

# Adolescents Who Use Tobacco Products County Comparison

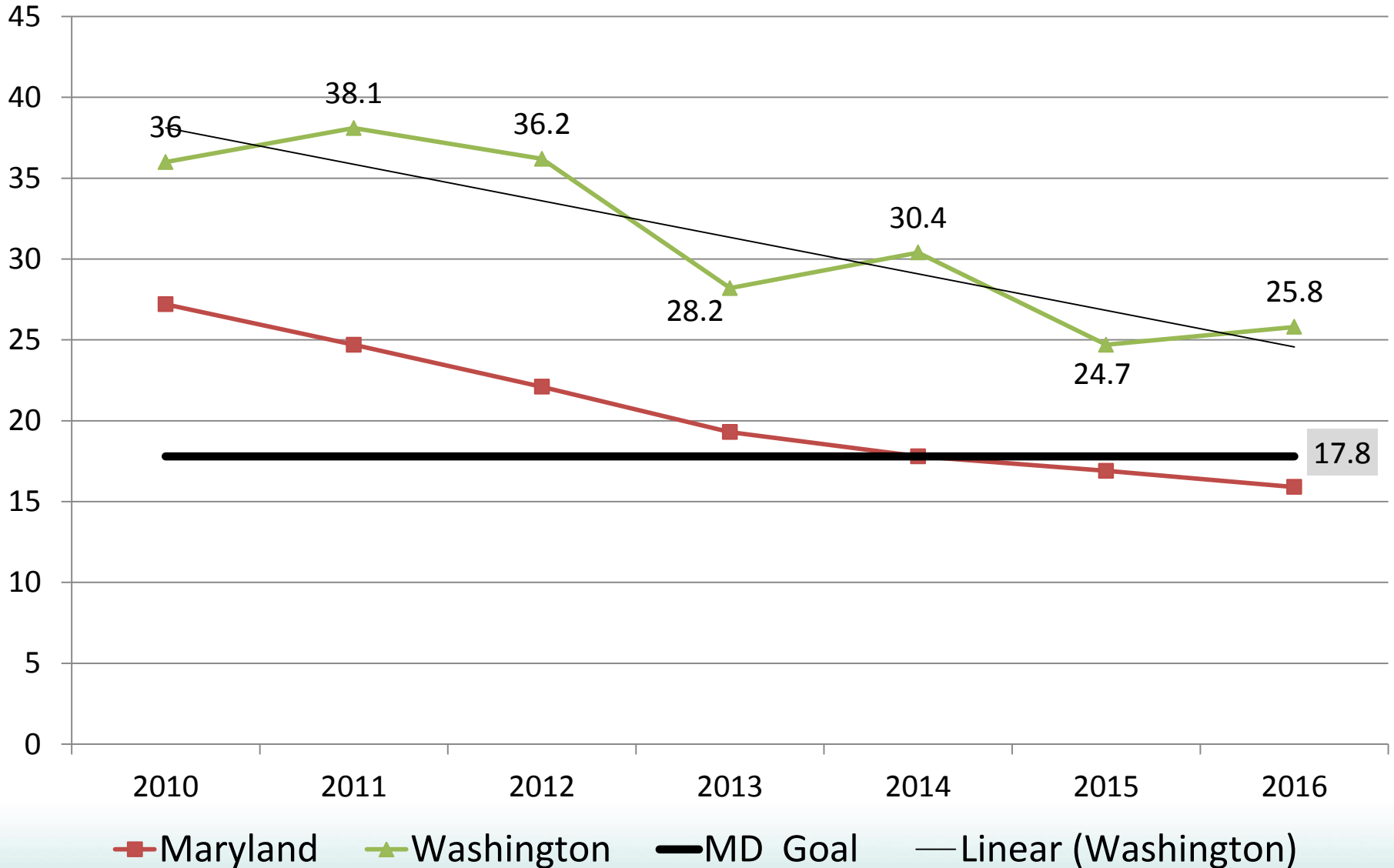


Source: Maryland SHIP 2018

# Children with Elevated Blood Lead Levels



# Teen Birth Rate

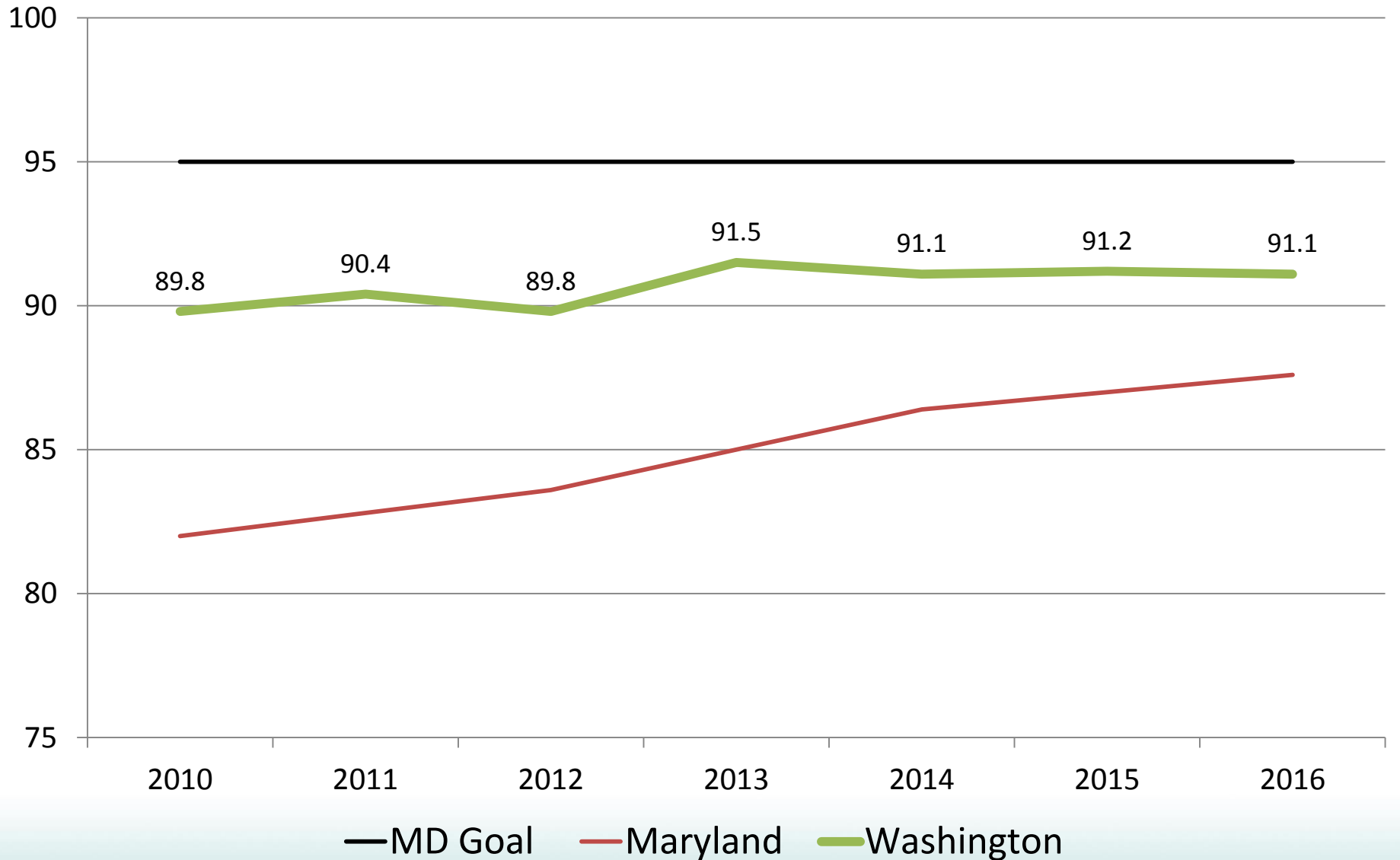


Rate of births to teens ages 15-19 years (per 1,000 population).

Source: MD SHIP 2018



# High School Graduation Rate



# **ADVERSE CHILDHOOD EXPERIENCES (A.C.E.s)**

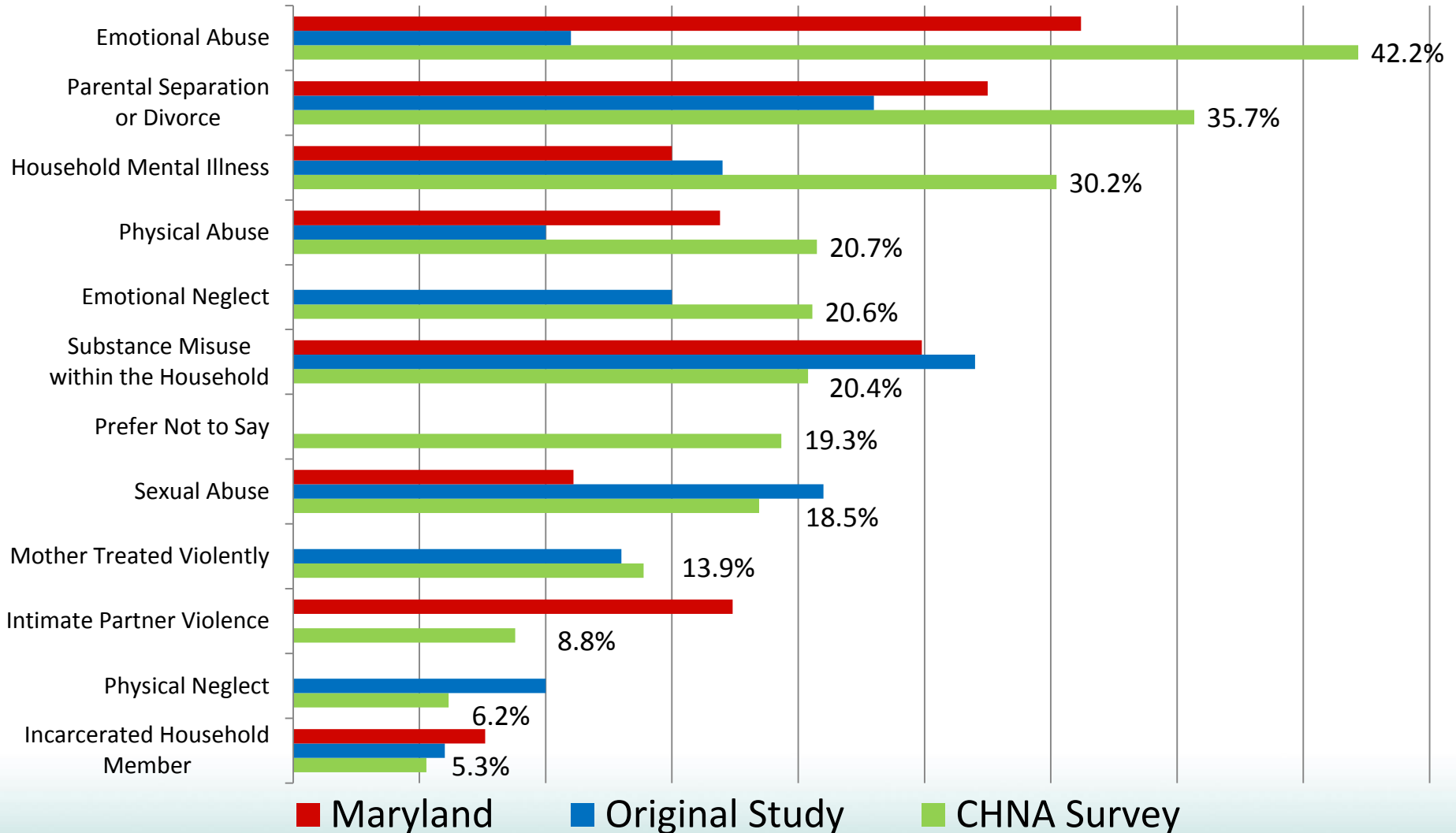
Kathy Powderly,

Hagerstown Association Religious Council

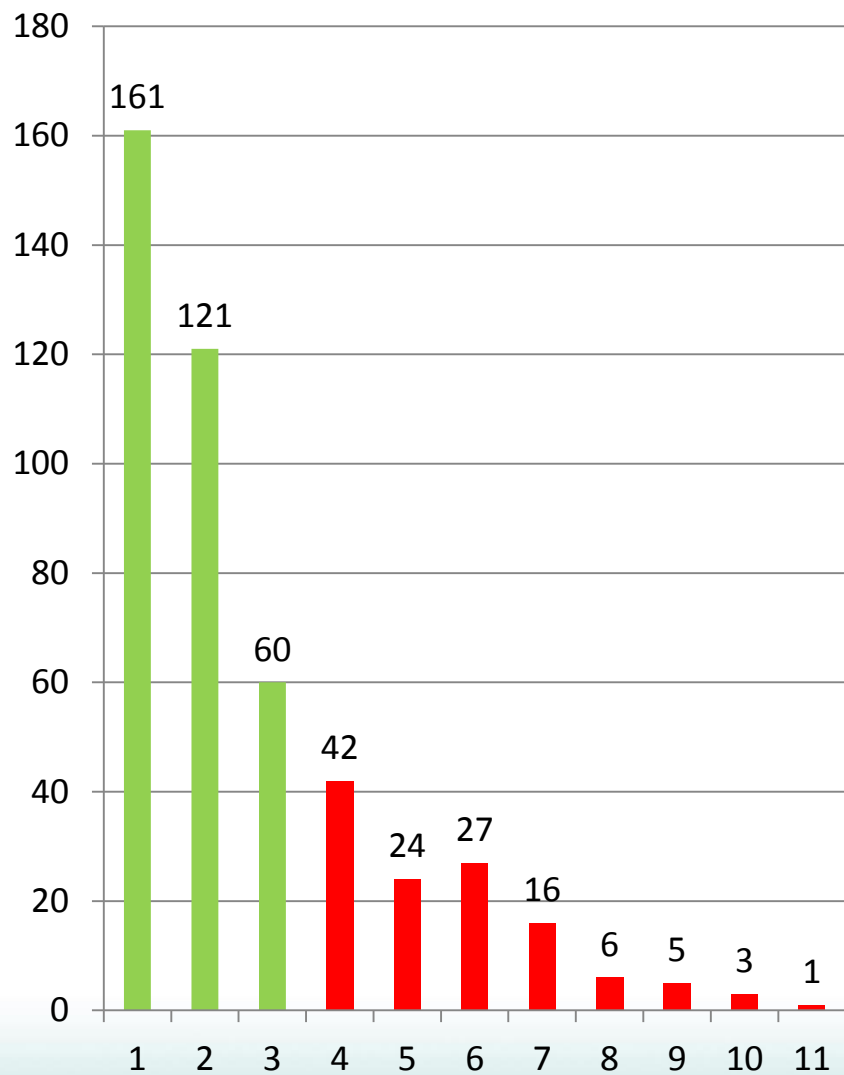


# Q34. Studies show that sometimes childhood trauma affects adult health. In your childhood, were you exposed to any of the following?

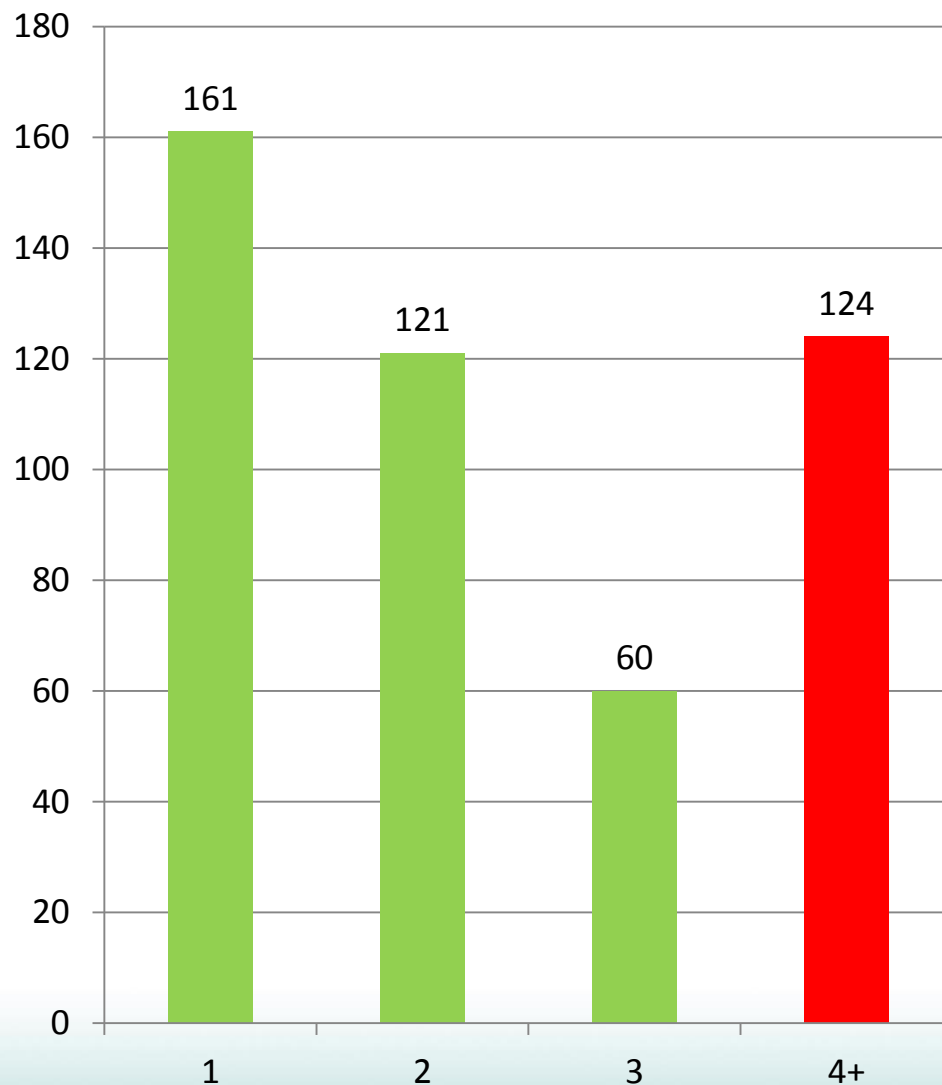
37.6% of survey participants answered at least 1



### Number of Respondents reporting 1 or more A.C.E.s



### Number of A.C.E.S.



## 4+ A.C.E.s Highlights

- 92.7%, reported at least one health issue (from Q2)
- 63%, reported 3 or more health issues (from Q2)
- 39.5%, reported 4 or more health issues (from Q2)
- 42.7%, reported mental health issues
- 31.5%, reported being down or depressed at least 6 days in the prior month; 18%, reported 10+ days down or depressed
- 51%, reported they have been bothered with little interest or pleasure in doing things in the past month
- 9%, reported alcohol or drug abuse (lower than expected)
- 36% had an income of \$0-\$49K
- 12% male vs. 88% female

Of all people who responded with 1 or more ACE:

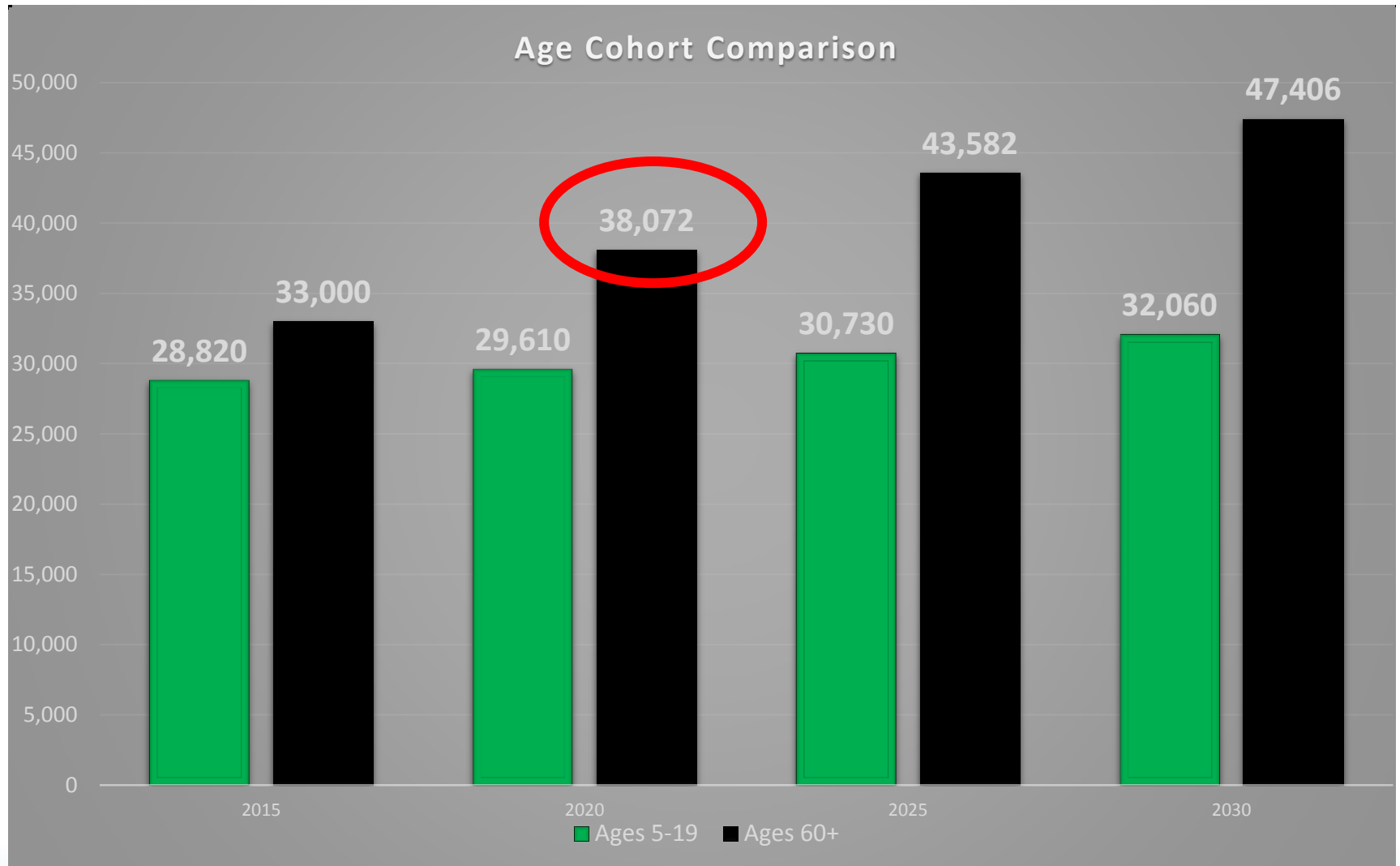
- 53% answered “no exercise” or “once in past week” (significantly higher than overall)

# SENIOR HEALTH

Amy Olack, Commission on Aging



# Number of Older Adults (60+) in Washington County





**Statistically  
similar  
results to  
other cohorts**

\*Only notable difference is the decreased reporting of illicit drug use.

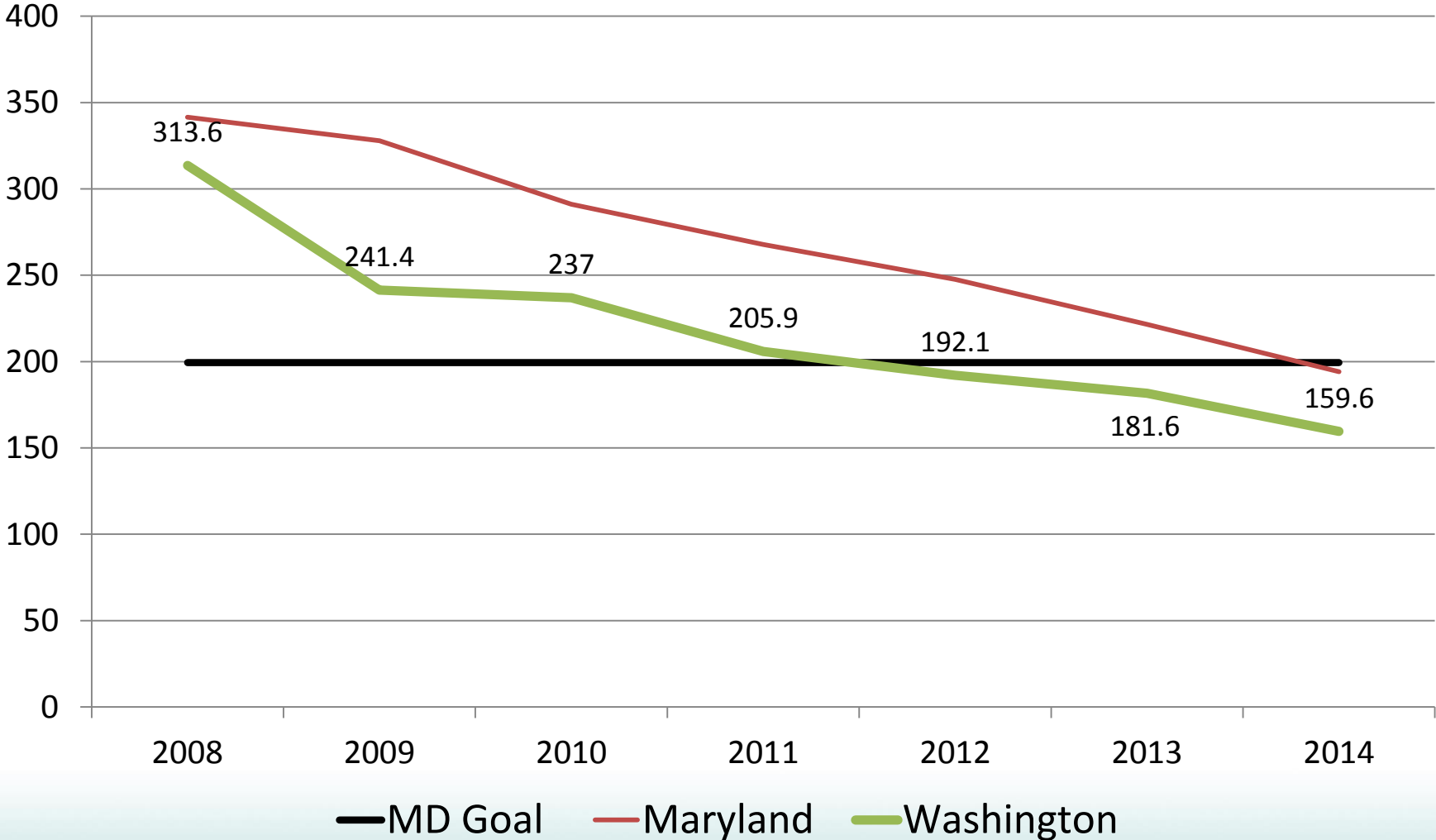


## Senior Focus Group (65+)

- **Held August 28, 2018 at the Williamsport Fire Hall & facilitated by Cindy Earle, MPH, RN**
- **65 participants (all Caucasian with majority making \$20,000-\$25,000/year)**
- **All participants indicated that they have a regular healthcare provider and health insurance.**
- **What they/their family do to stay healthy...**
  - Walk
  - Swim
  - Stay Busy
  - Drink water
  - Drink wine
  - Read
  - Mall Walker's Group
- **Where do they get their healthcare information?**
  - Doctor's office
  - AARP
  - Internet
  - 55up
  - Smart Seniors group
  - Homewood Nurse
  - Mayo Clinic Newsletter
  - Church-Parish Nurse
  - Senior Center
  - Newspaper
  - Magazine
  - Hospital Newsletter
  - Health Fairs

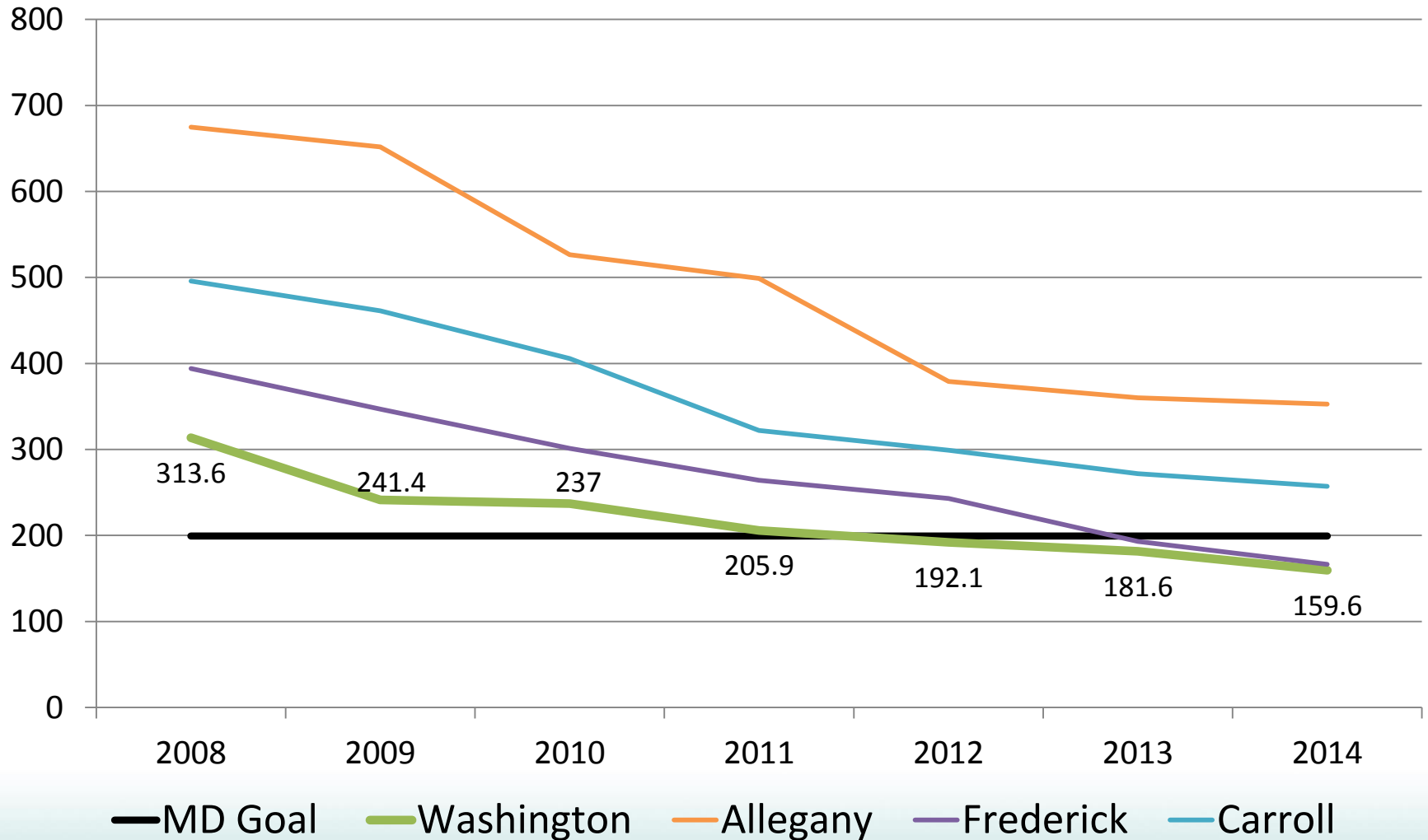
- **What health problems are they dealing with?**
  - Diabetes
  - COPD
  - High Blood Pressure
  - Arthritis/joint replacements
  - Depression
  - Cancer
  - Falls
  - Heart Disease
  - Dementia
- **What they would have done sooner...**
  - Stop smoking earlier or not at all
  - Use more sunscreen
  - Healthy eating
  - Different career choice
  - Take better care of my back
  - Wear sunglasses
- **What keeps them from eating a well-balanced diet?**
  - Lack of funds
  - Don't want to cook for only one person
  - Can't eat salad due to health problems, poor ability to chew
- **What keeps them from getting enough exercise?**
  - Balance problems
  - Health/endurance problems
  - Fatigue
  - Depression
- **What frustrates them about the health care industry?**
  - Getting in for an appointment
  - Seeing a physician assistant instead of their physician
  - Insurance & pharmaceutical needs and costs- do I eat or purchase my meds?

# Hospitalization Rate Related to Alzheimer's or Other Dementias

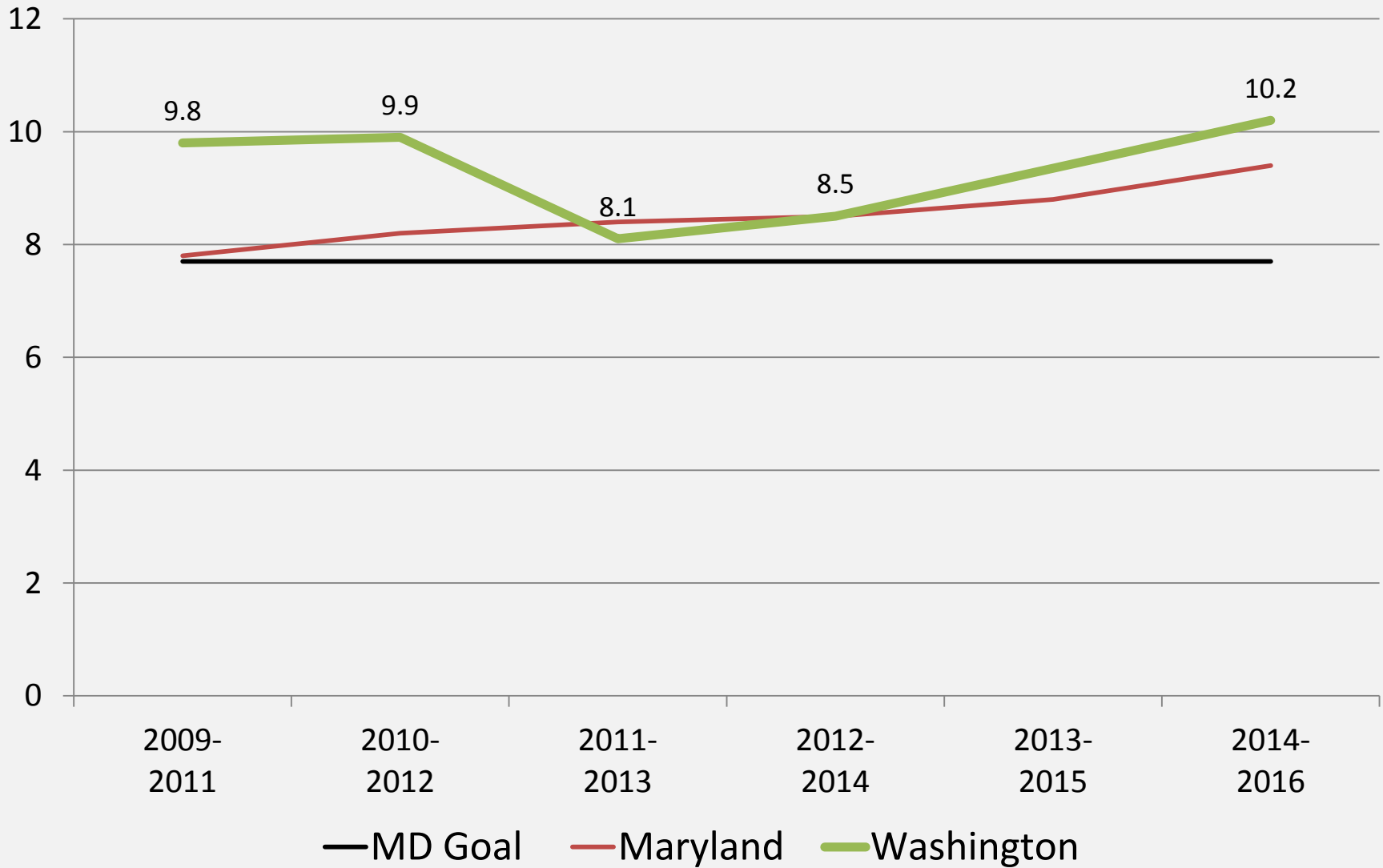


Source: MD SHIP 2018

# Hospitalization Rate Related to Alzheimer's or Other Dementias County Comparison



# Fall-Related Death Rate



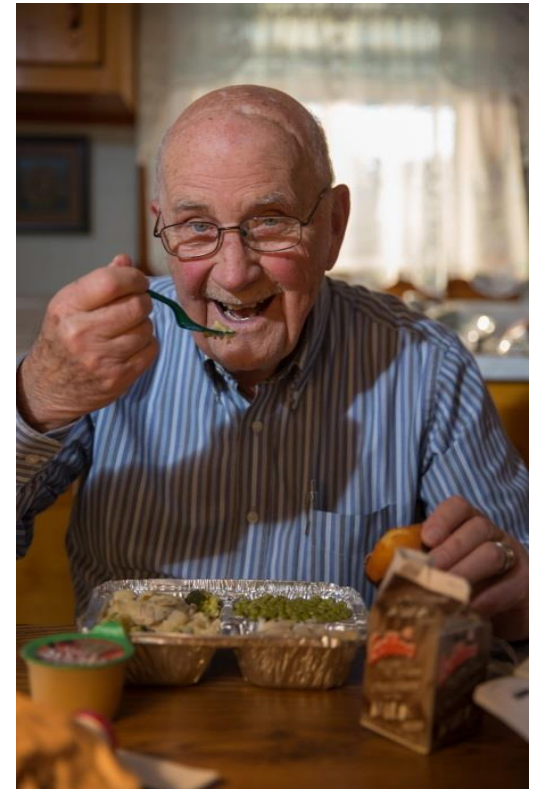
## **Malnutrition...leading cause of morbidity & mortality among older adults**

- 1. Older adults experiencing food insecurity suffer from higher rates of chronic disease, including diabetes, heart disease and depression.
- 2. Conversely, good nutrition has been shown to help support a healthy and active lifestyle, reduce frailty and disability, improve health outcomes, and reduce health disparities and health care costs.



## Food Insecurity in Washington County Seniors

- While food insecurity may seem like it is only about hunger, it is just as much about having access to healthy, affordable foods. Unsurprisingly, food insecurity can be associated with an increased risk for obesity as “eating less or skipping meals to stretch food budgets may result in overeating when food does become available”. <sup>1</sup>
- 10.8% (approx. 16,150) in Washington County are Food Insecure <sup>2</sup>
- Over 50 medically homebound seniors on a waiting list for Meals on Wheels.

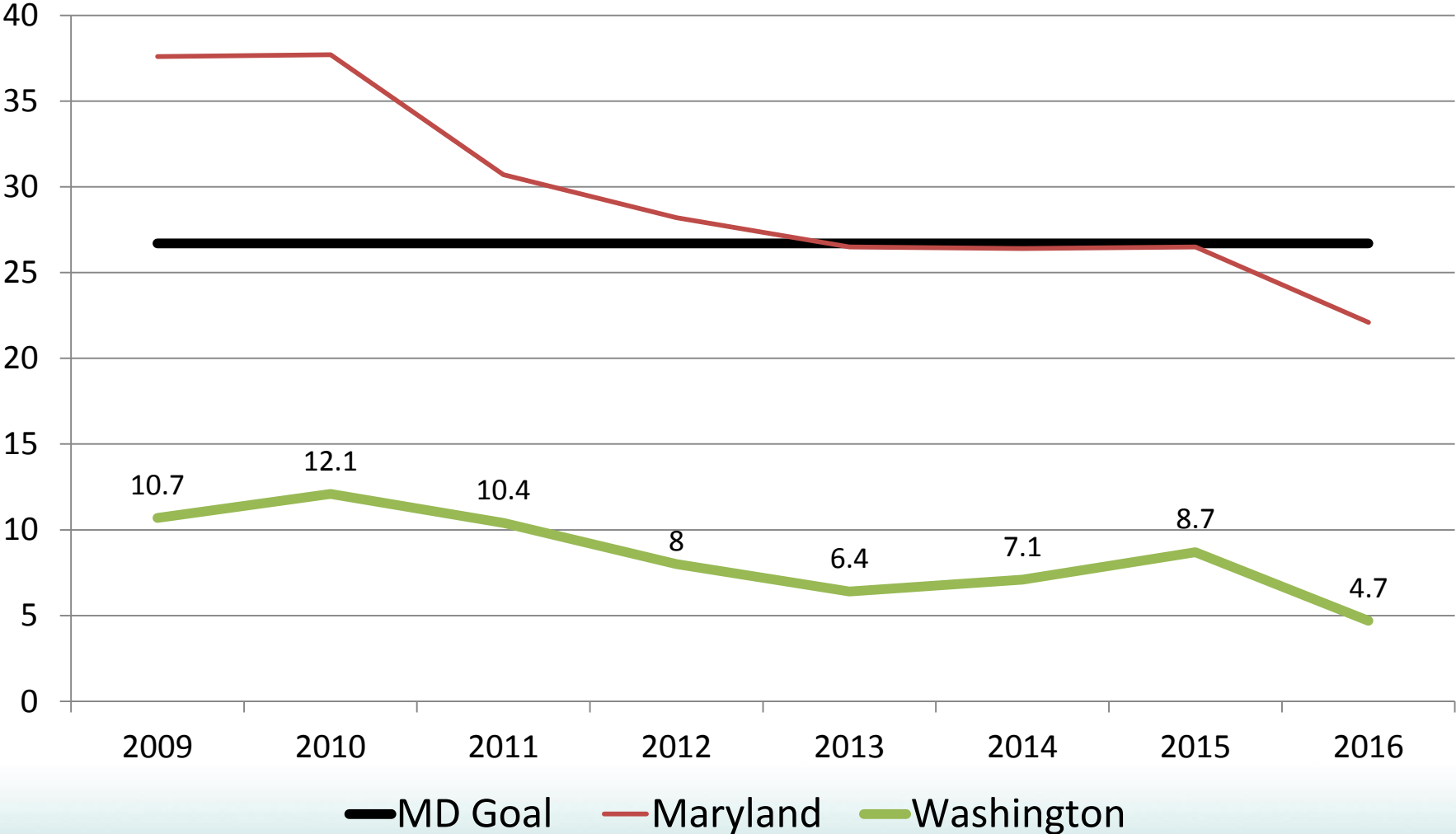


# Sexually Transmitted Disease



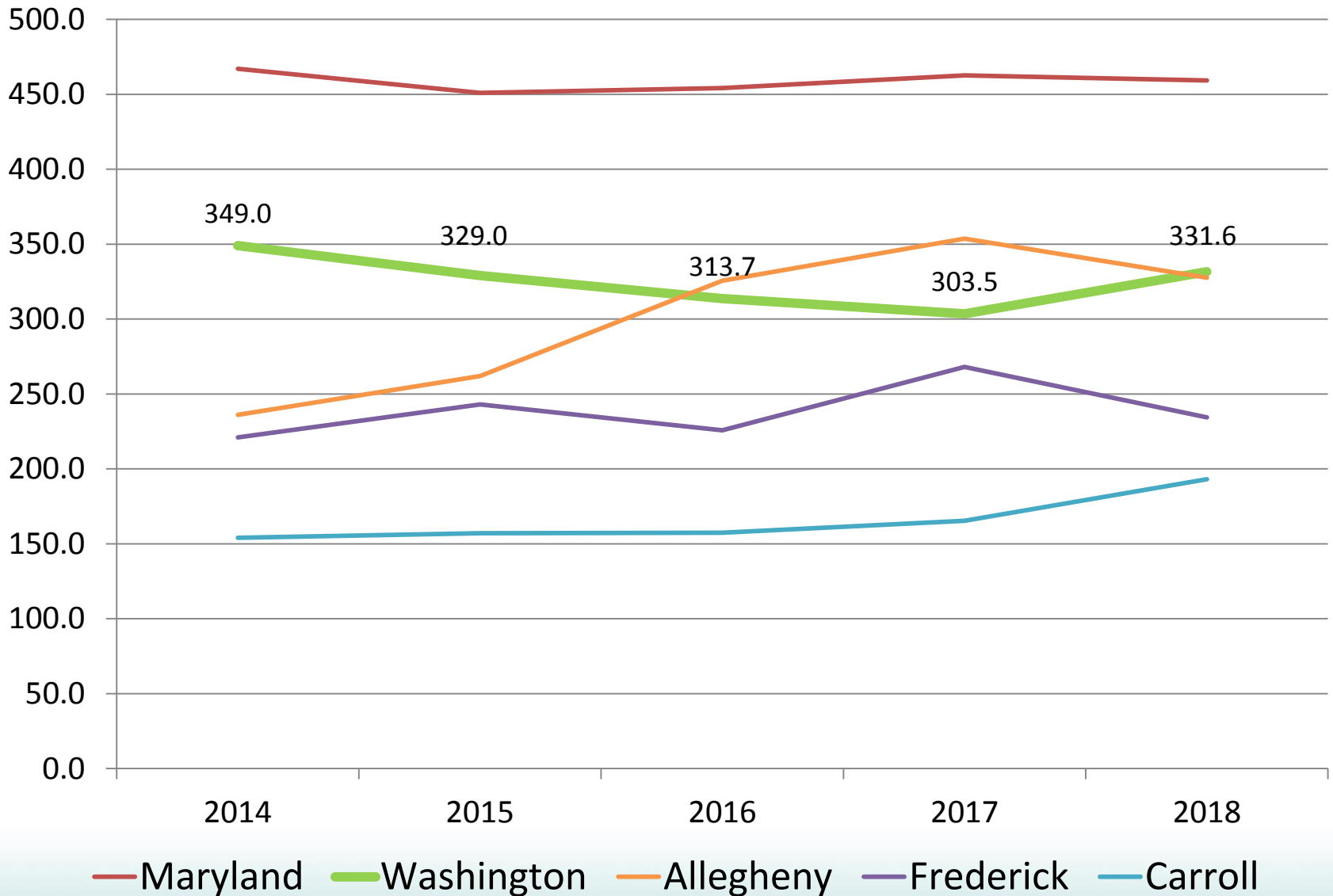


# HIV Incident Rate (per 100,000 people)

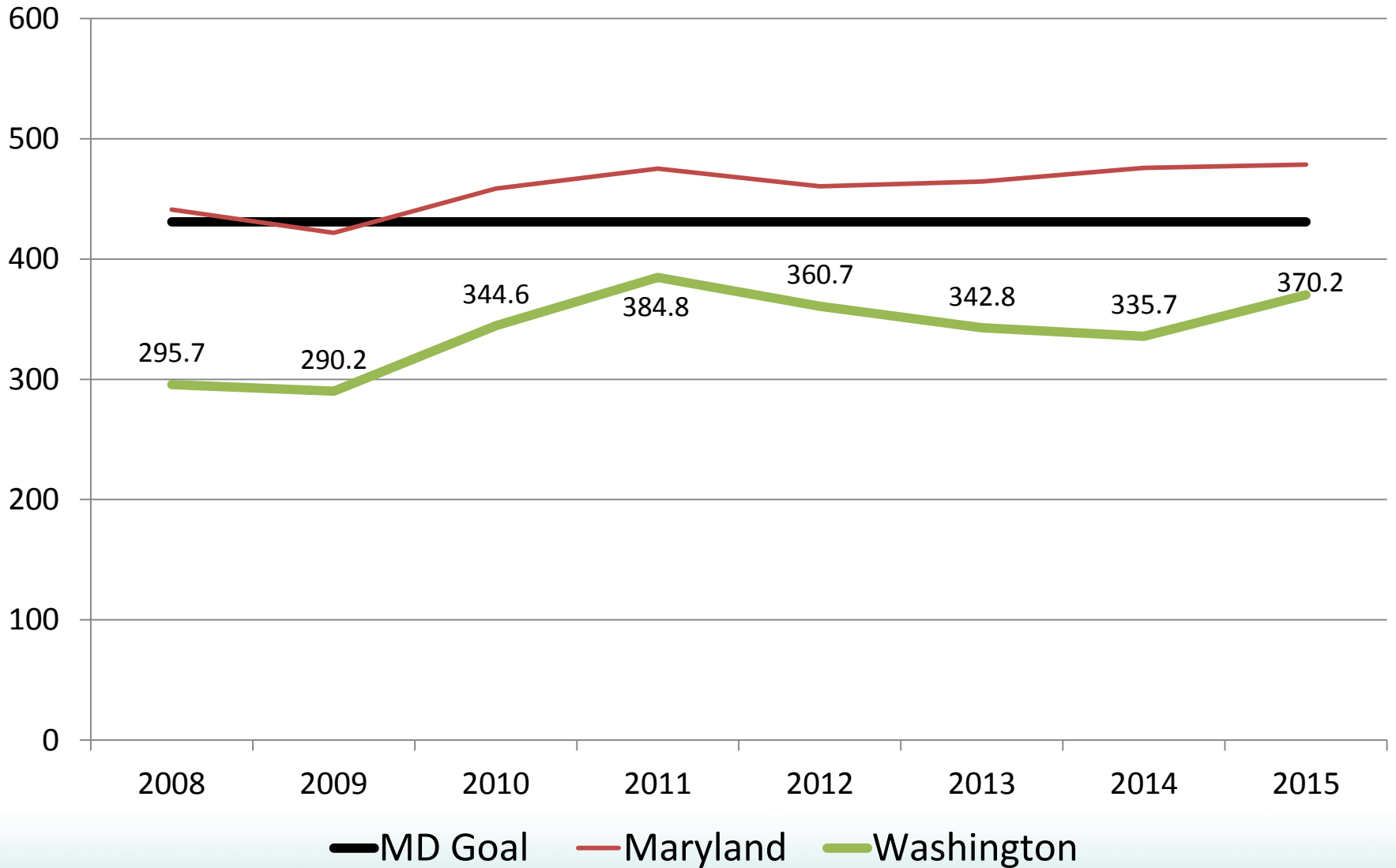


Source: MD SHIP 2018

# Sexually Transmitted Infections



# Chlamydia Infection Rate

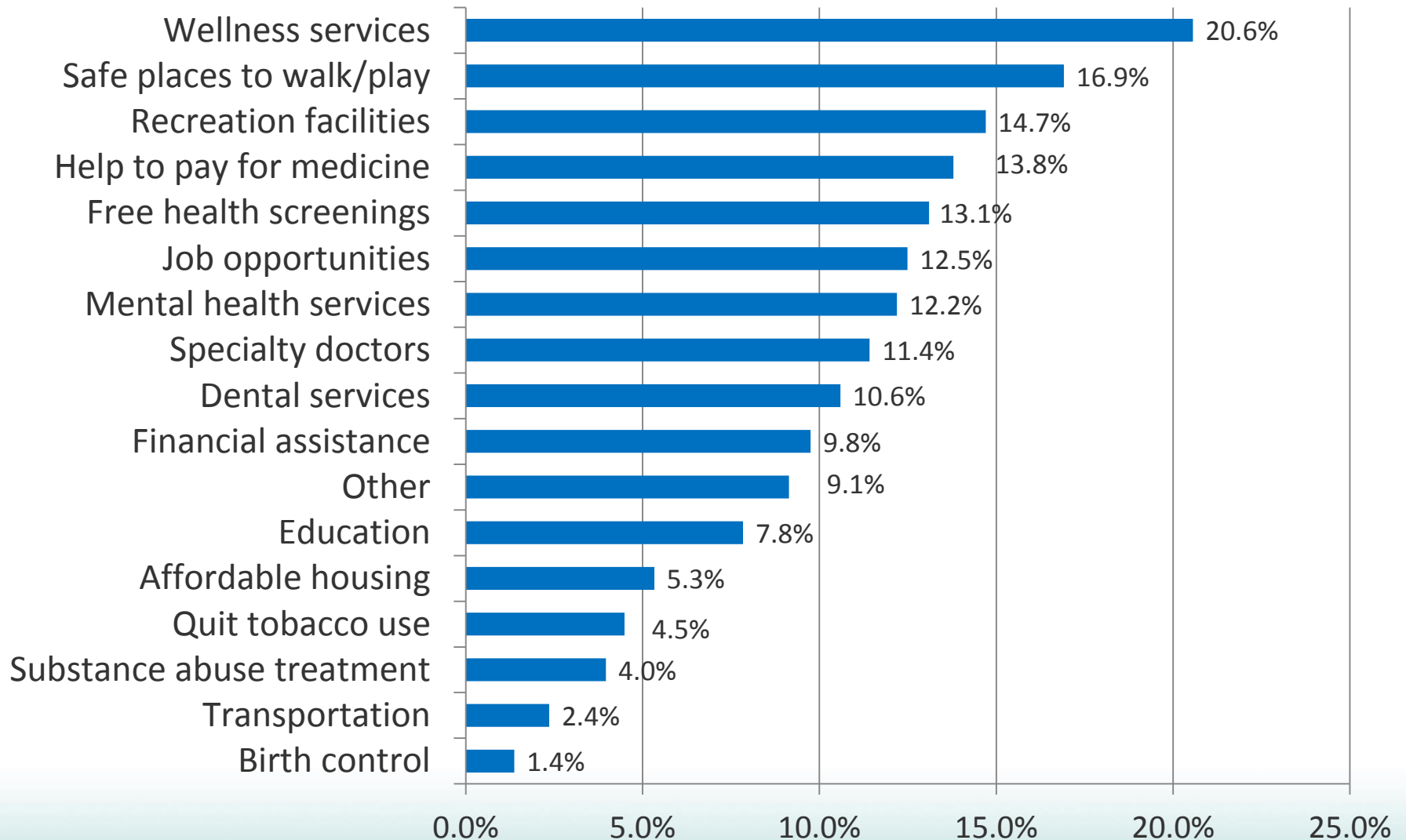


# What's needed?

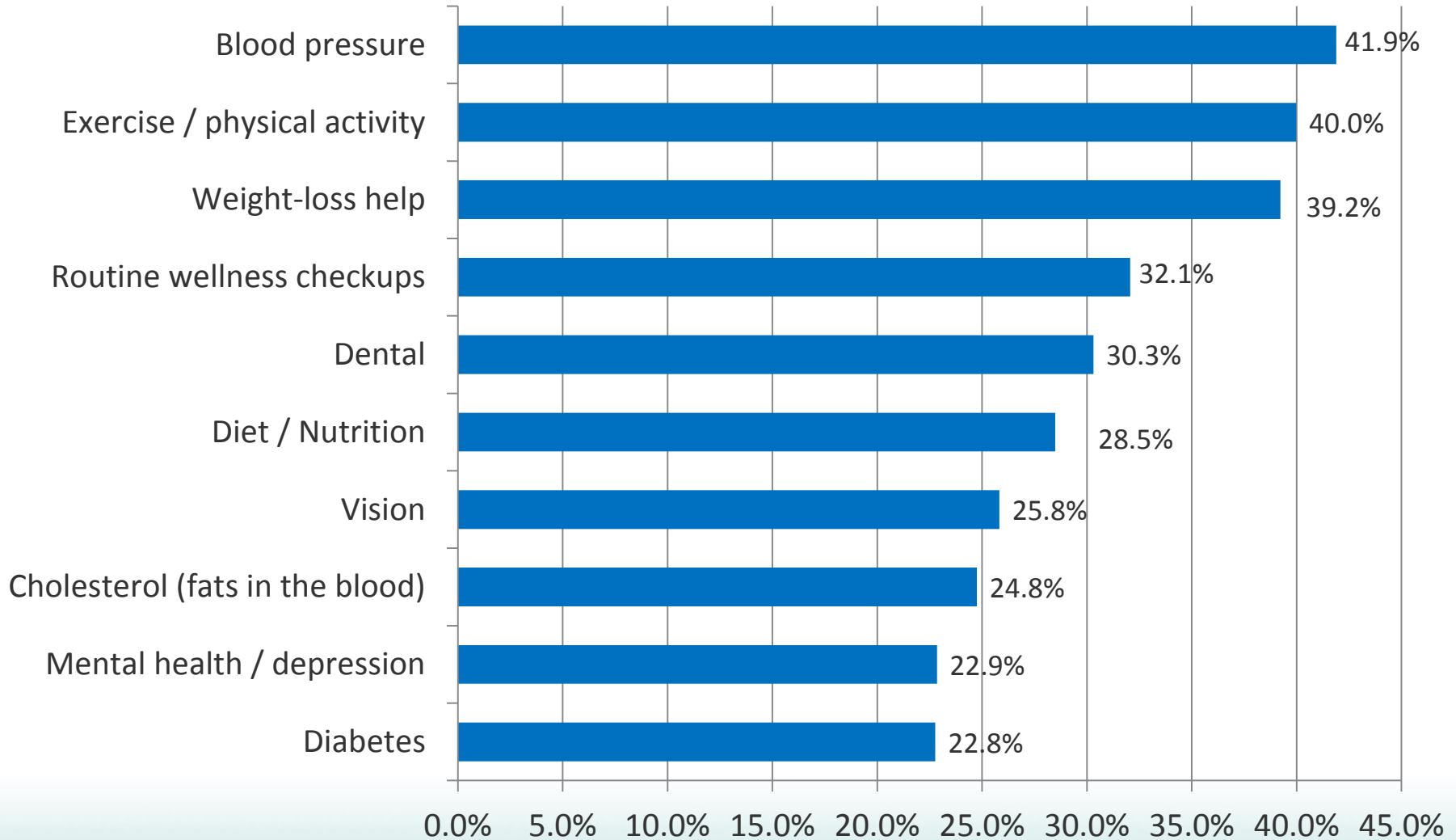
Community perceptions



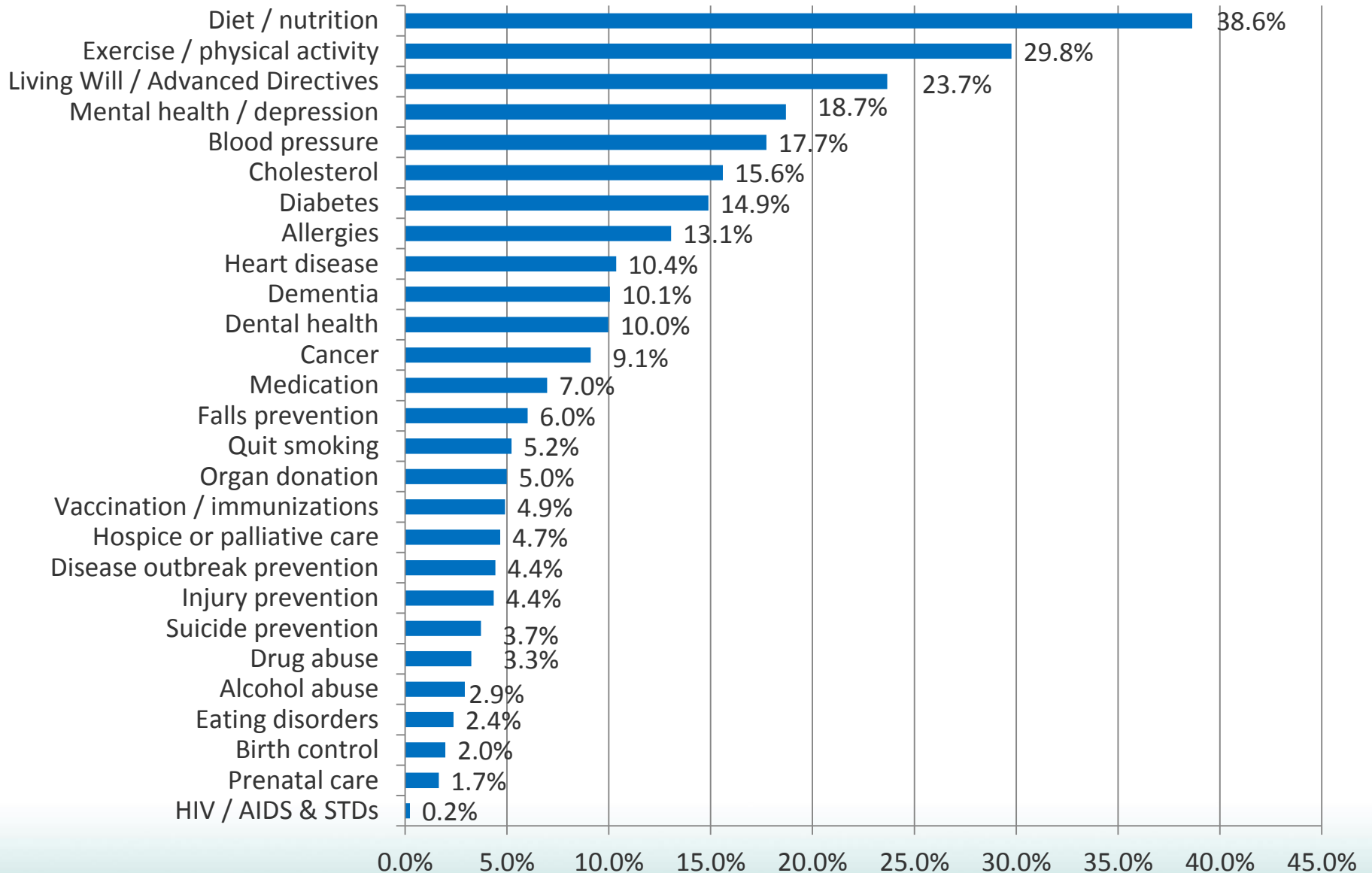
# Q9. What is MOST needed to improve the health of your family?



# Q10. What types of health screenings and/or services are needed to keep you and your family healthy?



## Q14. What health issues do you need more information about?



## **Focus Groups (n= 112)**

### **Q: What community services are needed?**

- Preventative care and wellness education
- Free health screenings
- Mobile health services
- Reduced cost health services and medications
- Transportation for those who need it
- Guidance with diet and nutrition
- Food security
- Greater support for health issues; addictions, mental health, cancer

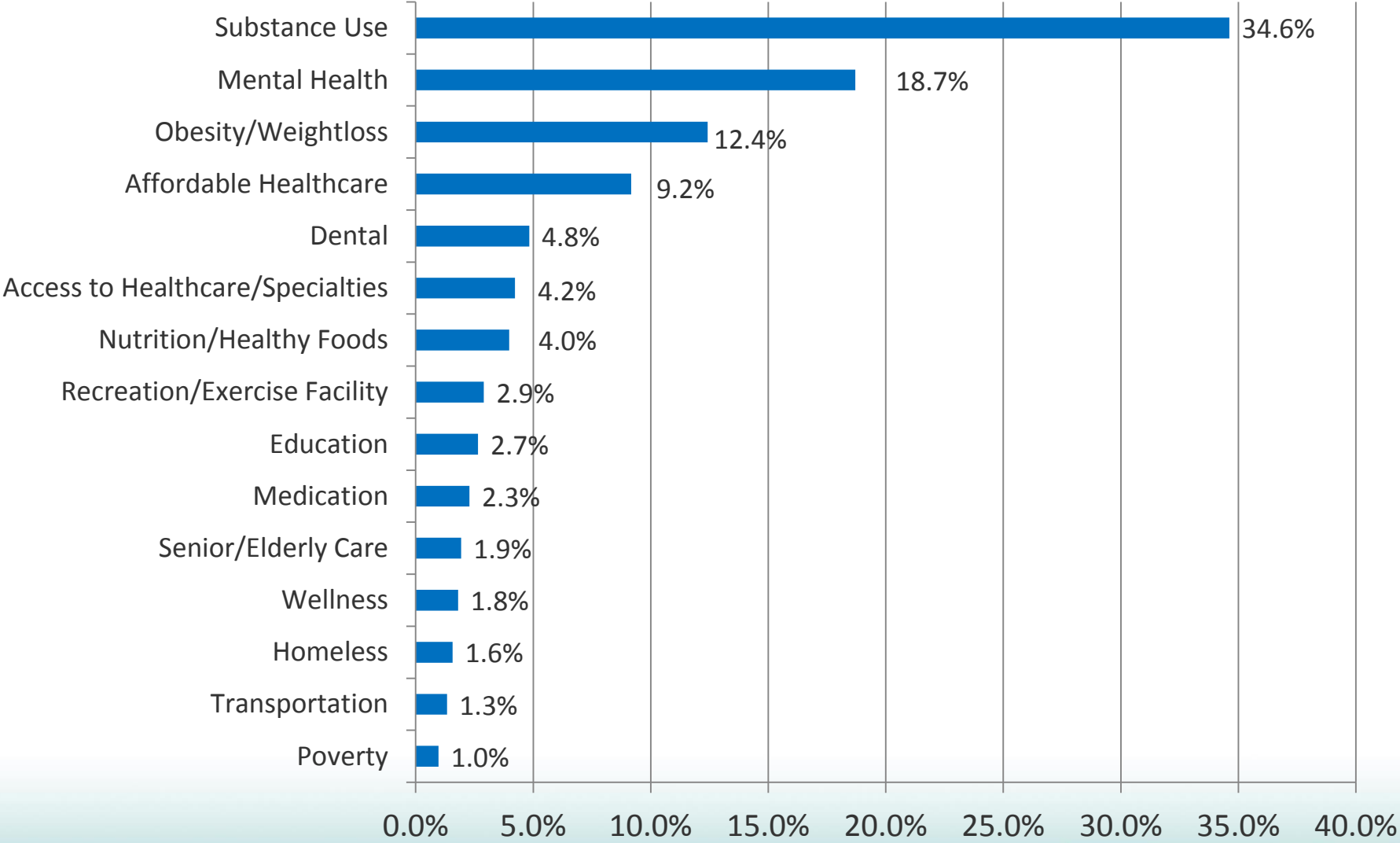


# Biggest unmet need?

Community perceptions



# Q32. What is the biggest unmet health need in Washington County?



Source: Healthy Washington County Survey FY2019

## Focus Groups (n = 112)

### Q: What is the biggest health need in Washington County?

- Drug and alcohol treatment & support (21%)
- Obesity (14.5%)
- Diabetes (13.3%)
- Mental health treatment & support (12%)
- HTN & cardiovascular disease (10.8%)
- Chronic obstructive pulmonary disorder (8.6%)
- Cancer (6%)
- Poor diet & nutrition (5%)
- Smoking (3.6%)
- Physical inactivity (3.6%)
- Kidney disease (1%)

# Prioritization Criteria

Item	Definition	Scoring		
		Low (1)	Medium	High (10)
<b>Magnitude</b> of the problem	The degree to which the problem leads to death, disability or impaired quality of life and/or could be an epidemic based on the rate or % of population that is impacted by the issue	Low numbers of people affected; no risk for epidemic	Moderate numbers/ % of people affected and/or moderate risk	High numbers/ % of people affected and/or risk for epidemic
<b>Variance</b> against benchmarks or goals	This would include variance with selected benchmarks, state standards or state data, Healthy People 2010 goals and/or other prevention agenda standard or state data	Local / regional rates meet or exceed the goal or standard	Local/ regional rates are somewhat worse than the goal or standard	Local/ regional rates are significantly worse than the goal or standard
<b>Impact</b> on other health outcomes	The extent to which the issue impacts health outcomes and/or is a driver of other conditions	Little impact on health outcomes or other conditions	Some impact on health outcomes or other conditions	Great impact on health outcomes and other conditions
<b>Capacity</b> (systems and resources) and practical ability to change or influence	This would include the capacity to implement evidence based solutions	There is little or no capacity (systems and resources) to implement evidence based solutions	Some capacity (system and resources) exist to implement evidence based solutions	There is solid capacity (system and resources) to implement evidence based solutions in this area

# FY19 CHNA Health Needs Prioritization Ranking

<b>RANK</b>	<b>Topic</b>	<b>Weight</b>	<b>RANK</b>	<b>Topic</b>	<b>Weight</b>
1	Substance Abuse	16.1%	11	Rec/Exercise	2.5%
2	Mental Health	13.3%	12	Access to Healthcare	2.2%
3	Obesity/Weight loss	12.2%	13	Poverty	1.8%
4	Wellness	8.2%	13	Teenage Pregnancy	1.8%
5	Diabetes	6.8%	14	Dental	1.0%
6	Heart Disease & HTN	5.4%	14	Education	1.0%
6	A.C.E.	5.4%	14	Affordable Healthcare	1.0%
7	Senior/Elderly	5.0%	14	Smoking	1.0%
8	Cancer	4.7%	14	Medication	1.0%
8	Nutrition/Eating	4.7%	15	Child health	0.7%
9	Transportation	4.3%	15	Employment	0.7%
10	Homeless	3.6%	16	Crime	0.3%
11	Rec/Exercise	2.5%		Affordable Housing	0
				Vision/Hearing	0

## NEXT STEPS

- Develop action plans; hospitals, community
- Submit report and action plan to the hospital boards for approval
- Publish written report and make publicly available, Spring 2019
- Strategically direct community resources to help meet identified needs
- Measure outcomes and trends over the next 3 years



# **Community Action Planning**

**January 8, 2019**

Washington County Health Dept.

1302 Pennsylvania Avenue

2nd floor auditorium

10:00 am – 12 noon