

# LORAIN COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN

# 2015 ANNUAL REPORT



Completed July 1, 2016

## **Introduction**

The Lorain County Community Health Improvement Plan (CHIP) was finalized on December 18, 2014. It was a huge undertaking that included input from over 50 partner agencies through the coordination of the Lorain County CHIP Steering Committee. The Lorain County CHIP Steering Committee is comprised of the following organizations:

- Alcohol and Drug Addiction Services Board of Lorain County
- Elyria City Health District
- Lorain City Health Department
- Lorain County Board of Mental Health
- Lorain County General Health District
- Lorain County Health & Dentistry
- Lorain County Metro Parks
- Mercy
- Public Services Institute at Lorain County Community College
- University Hospitals Elyria Medical Center

At the CHIP Summit in December 2012, partner agencies prioritized issues that affected Lorain County, and the top five issues became the Lorain County CHIP Priorities. At the CHIP Summit in August 2014, the CHIP Priorities were shared with partners, along with the coordinating agencies for each priority, initial plans for implementation, and progress measures to obtain by 2019. Community partners were asked to join a team to assist with planning and implementation and provision of resources to achieve priorities. Coordinating agencies for each priority were members of the CHIP Steering Committee. Lorain County's CHIP Priorities are

1. Improve Access to Care
2. Expand Coordinated Education and Prevention Services
3. Improve Weight Issues and Obesity Among Adults and Children
4. Reduce Alcohol, Tobacco, and Drug Use and Abuse Among Adults and Children
5. Improve Mental Health of Seniors, Adults, and Children

CHIP Priority Teams began meeting in late 2014 to finalize strategies to address the overarching CHIP Priorities and develop implementation plans. Teams were also expanded to include necessary partners who were not present at the CHIP Summits. Implementation of CHIP Priorities began in earnest in 2015.

## **2015 Lorain County Community Health Assessment**

Lorain County completed its second comprehensive Community Health Assessment (CHA) in fall and winter 2015. The adult survey was conducted by the Hospital Council of Northwest Ohio (HCNO), the organization that also conducted the first comprehensive CHA in 2011. Youth data was collected by the Alcohol and Drug Addiction Services Board of Lorain County and Communities That Care of Lorain County in 2014 through the PRIDE Surveys. Their youth data was added to HCNO's adult data to create the CHA report. CHA data serve as the basis for the CHIP. The tables below show a comparison of the baseline data for CHIP Priorities from the 2011 CHA and the newest data from the 2015 CHA, as well as other state and local data resources.

### CHIP Priority 1: Improve Access to Care

Objective	Goals	Measures	Performance Targets
Strengthen network of patient-centered medical homes	<ul style="list-style-type: none"> <li>Strengthen network of patient-centered medical home activities</li> </ul>	<p><b>2011:</b> 52% of adults had one doctor/healthcare professional they go to for routine medical care, 31% had more than one, and 16% did not have one doctor to see on a routine basis</p> <p><b>2015:</b> 52% of adults had one doctor/healthcare professional they go to for routine medical care, 29% had more than one, and 18% did not have one doctor to see on a routine basis</p>	Help 4,586 adults obtain a medical home (or acquire at least one doctor to see on a routine basis) for a 2% rate of decrease in those who do not have a medical home; reduction from 16% to 14% by 2019
Reduce barriers for access to care	<ul style="list-style-type: none"> <li>Improve access to dental services</li> <li>Help more adults (under age 30, low income, and adults living in the urban areas of Elyria and Lorain) obtain medical insurance and maximize use of their insurance plans</li> <li>Make prescriptions more affordable</li> <li>Reduce barriers for access to care including transportation and access for seniors</li> <li>Expand coordinated transitional care management services including those following inpatient hospital stays</li> </ul>	<p>Location and hours of operation for health care providers</p> <p><b>2015:</b> Transportation barriers assessment completed and used as baseline for county transportation data and hours of operation and location for health care providers</p>	Gather baseline data

### CHIP Priority 2: Expand Coordinated Education and Prevention Services

Objective	Goals	Measures	Performance Targets
Reduce infant mortality rate	<ul style="list-style-type: none"> <li>Improve maternal and child health to reduce infant mortality rates</li> </ul>	<p><b>2012:</b> Infant mortality rate for those less than 1 year old was 6.8 deaths per 1,000 live births (Ohio Vital Statistics)</p> <p><b>2014:</b> Infant mortality rate for those less than 1 year</p>	Reduction of infant mortality rate to 5.0 deaths per 1,000 births by 2019

### CHIP Priority 2: Expand Coordinated Education and Prevention Services

Objective	Goals	Measures	Performance Targets
		old was 6.1 deaths per 1,000 live births (Ohio Vital Statistics)	

### CHIP Priority 3: Improve Weight and Obesity Among Adults and Children

Objective	Goals	Measures	Performance Targets
Increase rates of physical activity among adults and children	<ul style="list-style-type: none"> <li>Increase awareness of and access to affordable venues for fitness and recreational activities at community and neighborhood levels</li> </ul>	<p><b>2011:</b> 2/3 of adults were overweight (35%) or obese (32%)</p> <p><b>2011:</b> 1/4 of youth were overweight (11%) or obese (14%)</p> <p><b>2011:</b> 56% of adults engaged in physical activity for 30 min 3 or more days; 29% for 5 or more days per week</p> <p><b>2011:</b> Participation in 60 min of physical activity by youth - 65% on 3 or more days; 46% on 5 or more days; 24% everyday</p> <p><b>2015:</b> Over 2/3 of adults were overweight (32%) or obese (37%)</p> <p><b>2015:</b> 53% of adults engaged in physical activity for 30 min 30 or more days; 30% for 5 or more days per week; 23% were not participating in any physical activity</p> <p><b>2014:</b> 12% of 6<sup>th</sup> graders, 9% of 8<sup>th</sup> graders, and 11% of 10<sup>th</sup> graders did not participate in any physical activity on at least 1 day in the past week</p>	<p>Increase rates of physical activity among adults by 5% (11,464 more adults) by 2019</p> <p>Increase rates of physical activity among youth by 5% (1,516 more youth ages 12-18) by 2019</p>

### CHIP Priority 4: Reduce Alcohol, Tobacco, and Drug Abuse Among Adults and Children

Objective	Goals	Measures	Performance Targets
Reduce incidence of smoking among youth and adults	<ul style="list-style-type: none"> <li>Reduce incidence of smoking in Lorain County</li> <li>Improve alcohol, tobacco, and other drugs education within schools</li> </ul>	<p><b>2009:</b> 29% of Lorain County mothers smoked during pregnancy (ODH Vital Statistics)</p> <p><b>2011:</b> 22% of Lorain County adults were current smokers; higher among rural areas (29%), Elyria (25%), and Lorain (25%) versus suburbs (13%)</p> <p><b>2011:</b> 14% of youth ages 12-18 smoked within the past 30 days; 18% for those ages 17-18</p> <p><b>2015:</b> 18.1% of Lorain County mothers smoked during pregnancy (ODH Vital Statistics Warehouse)</p> <p><b>2015:</b> 22% of Lorain County adults were current smokers; higher among urban areas (27%) and rural areas (20%) versus suburbs (14%)</p> <p><b>2014:</b> 2% of 6<sup>th</sup> graders, 10% of 8<sup>th</sup> graders, and 17% of 10<sup>th</sup> graders smoked in the past year</p>	<p>Reduce the incidence of smoking among youth by 2% by 2019 (607 fewer youth ages 12-18, 174 fewer youth ages 17-18)</p> <p>Reduce the incidence of smoking among adults by 2% by 2019 (4,586 fewer adults)</p>
Reduce the number of heroin and opiate-related deaths	<ul style="list-style-type: none"> <li>Reduce misuse of prescription pain medication in Lorain County</li> <li>Increase capacity for treatment and recovery supports</li> </ul>	<p><b>2013:</b> 67 confirmed deaths from heroin/opiates (Lorain County Coroner's Office)</p> <p><b>2015:</b> 65 confirmed deaths from heroin/opiates (Lorain County Coroner's Office)</p>	Reduce overdose deaths from heroin and opiates by 25% within 3 years by the end of 2017 (17 fewer deaths)

### CHIP Priority 5: Improve Mental Health of Seniors, Adults, and Children

Objective	Goals	Measures	Performance Targets
Improve access to the continuum of mental health care among adults	<ul style="list-style-type: none"> <li>Improve access to the continuum of care</li> <li>Enhance the quality of mental health services</li> </ul>	<p><b>2011:</b> 17% of adults reported obstacles that interfered with their ability to get needed mental</p>	Reduce the incidence of adults not seeking or securing mental health

CHIP Priority 5: Improve Mental Health of Seniors, Adults, and Children			
Objective	Goals	Measures	Performance Targets
		<p>health services for themselves or their families</p> <p><b>2015:</b> 15% of adults reported obstacles that interfered with their ability to get needed mental health services for themselves or their families</p> <p><b>2014:</b> Mental health providers ratio 1,570:1 (2014 County Health Rankings, Robert Wood Johnson Foundation)</p>	<p>services when needed by 5% by 2019</p>
Reduce suicide	<ul style="list-style-type: none"> <li>Reduce the incidence of suicide in Lorain County adults and youth</li> </ul>	<p><b>2011:</b> 11% of Lorain County youth ages 12-18 had seriously considered suicide in the past year and 6% attempted suicide in the past year</p> <p><b>2013:</b> 50 adults and 4 youth (under the age of 18 years) had completed suicide (Lorain County Coroner)</p> <p><b>2015:</b> 38 adults and 0 youth had completed suicide (Lorain County Coroner)</p>	<p>Reduce deaths by suicide by 25% by 2019 (approximately 14 fewer deaths)</p> <p>Reduce rate of youth suicide attempts by 5% by 2019 (91 youth)</p>

### 2015 Progress - Improve Access to Care

Due to the broad nature of the Improve Access to Care CHIP Priority, the team was led by Lorain County Health & Dentistry, Mercy, and University Hospitals Elyria Medical Center. The CHIP Priority team identified two objectives - strengthen network of patient-centered medical homes and reduce barriers to access to care. Comparing the data from the 2011 and 2015 CHAs, the percentage of adult residents who had one doctor they go to for routine care did not change (52%). The percentage of adult residents who did not have one doctor to see on a regular basis increased from 16% in 2011 to 18% in 2015. The 2019 target for residents who did not have one doctor to see on a regular basis is 14%.

Large priorities like improving access to care take time, but the CHIP Priority Team set a strong foundation in 2015. Additional team members were added, which increased the number of resources available to improve access to care. Accomplishments in 2015 include:

- An assessment of transportation barriers was finalized in August 2015. The survey, which was distributed in English and Spanish, was completed by nearly 1,000 clients at 19 survey sites. The assessment provided baseline data on transportation issues, as well as the location and hours of

operation of local health care providers. A Transportation Sub-Committee was created to work specifically with transportation-related access issues.

- The groundwork was laid for the Community Health Worker (CHW) Program at Lorain County Community College. CHWs provide outreach in populations and communities where they live. The first course is scheduled for fall 2016.
- Bus stops were added to bring clients to Lorain County Health & Dentistry. These stops were added in Lorain/South Lorain and Elyria.
- Lorain County Health & Dentistry opened an additional location in Oberlin to make it easier for residents in that community and southern Lorain County to obtain services.
- The Lorain County General Health District started a pilot project to collect demographic data from emergency room intake forms. The purpose was to decrease rates of avoidable ER visits in Lorain County by bridging gaps in service through awareness and education. Once completed, the data will be shared with the CHIP Priority Team for future planning and implementation efforts.
- The CHIP Priority Team encouraged utilization of United Way - 211 to its full capacity to promote healthcare and transportation listings already available to residents. There was also enhanced promotion of Spanish 211 operated by El Centro.
- The Lorain County Public Transit Forum was held in February 2015 at Lorain County Community College to discuss a county public transportation plan. This free event was presented by the League of Women Voters Oberlin Area, Lorain County Commissioners, and Public Services Institute at Lorain County Community College.
- A Lorain County Public Transportation Forum was held in March 2015 at the Lorain County Administration Building as part of M.O.V.E - Mobility & Opportunity for a Vibrant Community. The purpose of the forum was to develop of a public transit system to support economic development for Lorain County residents.

## **2015 Progress - Expand Coordinated Education and Prevention Services**

The CHIP Priority Team for Expand Coordinated Education and Prevention Services, led by the Elyria City Health District, chose to focus its efforts on improving the infant mortality rate for Lorain County, especially the rate among African Americans. When the CHIP was finalized in December 2014, the most recent Lorain County infant mortality rate was from 2012. At that time, the rate was 6.8 deaths per 1,000 live births. In December 2015, the Ohio Department of Health (ODH) released updated data in the 2014 Ohio Infant Mortality Data: General Findings report. Lorain County's infant mortality rate had dropped from 6.8 deaths to 6.1 deaths per 1,000 live births. Preliminary data from ODH estimated the 2015 infant mortality rate to be even lower at 5.6 deaths per 1,000 live births. While this is an accomplishment, there was a large discrepancy between the infant mortality rates of Whites and African Americans. African American babies were nearly three times as likely to die in the first year of life as White babies - 14.3 deaths per 1,000 live births versus 5.3 deaths per 1,000 live births according to 2014 data).

The CHIP Priority team expanded its membership in 2015 and was able to make progress in terms of strategy implementation. In an effort to decrease infant mortality rates, the team documented progress with the following strategies: explore new approaches to maternal, infant, and child health; expand newborn home visiting program; expand the Ohio Infant Mortality Reduction Initiative program (OIMRI) that targets pregnant African Americans; partner with OIMRI advisory group to increase young girls' self-esteem; become a Cribs for Kids organization; and continue safe sleep campaign within the county. Specific accomplishments are noted below.

- The Elyria City Health District (ECHD) contracted with Cornerstone Pregnancy Services to provide funding for smoking cessation classes and support groups to help reduce the percentage of pregnant women who smoke. A community health worker from ECHD became a trained Tobacco Cessation Specialist and conducted 2 six-week support sessions. Continuation of this initiative will be examined based on contractual agreements with Medicaid HMOs and insurance carriers.
- The Lorain County General Health District and ECHD continue to make newborn home visits available to all parents within the jurisdiction. Health district nurses visit families in their homes to provide education and information on community resources for mothers, infants, and children.
- Outreach activities through OIMRI were expanded to increase awareness of the program. This included radio interviews on local stations, outreach to faith-based organizations, health fairs, newspaper articles, and school-based outreach in the Elyria City and Lorain City School Districts.
- To increase the self-esteem of young girls and focus on the resiliency of youth, the “Believing in Our Girls: A Symposium on Resiliency” was held free of charge in May 2015 at the Lorain County Community College. This symposium was a contractual effort between the YWCA and Elyria City Health District.
- ECHD is the Cribs for Kids partner for the county. In the last three years, 300 cribs have been distributed to Lorain County residents through the partnership with El Centro, Elyria Fire Department, Head Start, Lorain City Health Department, Lorain County Children Services, and Lorain County General Health District. In 2015, 108 cribs were distributed.
- Early Head Start, offered through the Lorain County Community Action Agency, continued to expand its reach to pregnant moms and children ages 0-3 years.
- Mercy Resource Mothers continued to provide home visiting to mothers in the prenatal period through the infant’s first year of life. In 2015, 246 mothers were served through the long-term home visiting program, and 928 mothers were served on a short-term basis where they were provided emergency assistance and referrals. In 2015, there were 96 births to clients, and 91% of these babies were born at a weight over 5.5 pounds.
- Breastfeeding education and support groups and a breastfeeding peer programs through Lorain County WIC offered support to mothers throughout the county. ECHD received a demonstration grant to reduce breastfeeding disparities among African American women by providing community-based support groups and expanding county capacity. Potential for continuation of this initiative is being examined by community providers.

## **2015 Progress - Improve Weight and Obesity**

Lorain County General Health District and Lorain County Metro Parks were the coordinating agencies for the Improve Weight and Obesity CHIP Priority Team. The team’s focus was to improve the rates of physical activity among adults and children. In the 2011 CHA, 56% of Lorain County adults had 30 minutes or more of physical activity 3 or more days each week, and 29% of adults engaged in 30 minutes or more 5 or more days each week. The 2015 CHA data showed a decrease in the percentage of adults engaging in 30 minutes or more of physical activity 3 or more days each week (53%), but there was a slight increase in the percentage of people who engaged in 30 minutes or more 5 days or more each week (30%). Youth data was collected differently in 2014 than it was in 2011, making it difficult to compare the results. However, it was noted in the PRIDE Surveys in 2014 that 12% of sixth graders, 9% of eighth graders, and 11% of tenth graders did not participate in physical activity on any day during the week before the survey was completed.

Behavior changes, like increasing physical activity levels, take time, but the team has already implemented strategies to increase the number of adults and children engaging in physical activity. Those activities include the following:

- United We Sweat, a collaboration aimed at raising awareness on types of fitness and nutrition options available, offered free fitness classes throughout the county, and the number of fitness opportunities offered through the collaborative increased in 2015. A United We Sweat website was also created to make it even easier for residents to find resources and free fitness opportunities.
- A GPS map was created with overlays of fitness events offered through United We Sweat and median household income. This was used as a tool to identify gaps in physical activity options throughout the county and identify locations in need of fitness opportunities.
- The CHIP Priority Team became an advocate for built environment by supporting communities discussing pertinent policy changes, such as Oberlin. Opportunities for involvement with built environment include policies, complete streets, and bike lanes.
- Seven mini-grants, offered through the Lorain County General Health District, were awarded to community groups throughout Lorain County to increase physical activity and improve nutrition. One example was a mini-grant provided to the Lorain County Metro Parks, Grafton-Midview Public Library, and the Village of Grafton for a hydration stations and a fitness trail that included signs, directions, and tips for exercise.
- The Lorain County General Health District and Lorain County Metro Parks applied for a Plan4Health grant offered by the American Planning Association and the American Public Health Association. The purpose of Plan4Health grants is to increase health equity through nutrition and physical activity. It provided funding for planners and public health professionals to convene and work together to leverage resources and improve health outcomes through the creation of healthy spaces.

## **2015 Progress - Reduce Alcohol, Tobacco, and Drug Use and Abuse**

The Reduce Alcohol, Tobacco, and Drug Use and Abuse CHIP Priority is split into two focus areas - one is drug and alcohol and the other is tobacco. The drug and alcohol focus area is coordinated by the Alcohol and Drug Addiction Services (ADAS) Board of Lorain County. Goals of this workgroup include a reduction in the misuse of prescription pain medication and an increase in the capacity for treatment and recovery supports. The group also plans to meet the progress measure of reducing overdose deaths from heroin and opiates by 25% by the end of 2017. According to data from the Lorain County Coroner, there were 67 overdose deaths in 2013. That number dropped to 65 deaths in 2015.

Progress made in 2015 to reduce the use and abuse of drugs and alcohol included:

- Local community task forces were formed with the assistance of CHIP Priority Team organizations to address addiction in their communities. Communities with task forces include Amherst, Avon Lake, Elyria, Lorain, North Ridgeville, and Vermilion.
- The availability of Naloxone kits was expanded in 2015. Individuals were able to attend walk-in clinics at Lorain County General Health District any day between 8:00AM and 4:00PM to receive a kit and education free of charge. Additional walk-in clinics were held at the Elyria City Health District.
- Two drug take back days were conducted in 2015 through collaboration with the Lorain County Drug Task Force and U.S. Drug Enforcement Administration.
- Collaboration with local school districts increased. Activities included proactive drug testing policies; evidence-based prevention programs for earlier grades beginning in grade 5; and training of school personnel on screening, identification, and referral for substance abuse issues.

- SOLACE Lorain County (Surviving Our Loss and Continuing Everyday) continued to provide support and education for family members struggling with addiction in their families. SOLACE also conducted advocacy training for family members of addicts.

The tobacco focus area is coordinated by University Hospitals Elyria Medical Center. Goals for this workgroup include reducing the incidence of smoking along adults and youth by 2% and improving tobacco, alcohol, and drug education in the schools. Data from both the 2011 and 2015 CHAs showed that approximately one-fifth (22%) of Lorain County adults were current smokers. Data from the 2014 PRIDE Surveys showed 2% of sixth graders, 10% of eighth graders, and 17% of tenth graders smoked in the past year.

The tobacco workgroup made progress with initiatives and activities devoted to reducing tobacco use.

Highlights from 2015 are listed below.

- CHIP Priority Team organizations were instrumental in the passage and/or implementation of tobacco-free policies. Organizations that have gone tobacco-free include the Lorain County JVS, Lorain County Metro Parks Lakeview Park, and the Wellington Exempted Village School District.
- Screening and Resources for Maternal and Pediatric Behavioral Health notebooks were provided to area OB/GYNs. Protocol were created for screening OB patients about tobacco usage.
- The Ohio Department of Health Tobacco Quit Line was promoted by Lorain County Alcohol and Drug Abuse Services (LCADA) to pregnant women seeking assistance.
- Lorain County Metropolitan Housing proceeded with smoke-free housing at the Amherst location and began an interest in smoke-free housing in Oberlin.

## **2015 Progress - Improve Mental Health**

The Improve Mental Health CHIP Priority Team, coordinated by the Lorain County Board of Mental Health (LCBMH), has made progress on both objectives related to improving mental health in Lorain County - improving access to the continuum of mental health care and reducing suicide. Seventeen percent (17%) of adults reported obstacles that interfered with their ability to receive needed mental health care in the 2011 CHA. By 2015, this percentage had dropped to 15%; however, the results from the last CHIP assessment pointed to a need for public education. Activities completed in 2015 to increase education and access to mental health include the following:

- A Mental Health Navigator Program was instituted at El Centro to connect residents to appropriate mental health services. Staffed by a bilingual clinician, the program can offer assistance to anyone in the community seeking services. The goal of this service is to connect residents to the *right* mental health service the *first* time, while assisting potential clients overcome obstacles to care.
- Marketing efforts were increased. Efforts included targeted messaging and a social media campaign.
- The Lorain County Mental Health Board collaborated with six community mental health agencies and El Centro to create a system for Spanish-speaking clients to utilize interpretation services during mental health appointments.
- Community mental health agencies were given financial support to help clients without transportation means get to and from appointments.

The goal related to suicide prevention has been embedded within the Suicide Prevention Coalition of Lorain County. Regarding suicide prevention, some progress has been made since the last report, but there is much work to be done, as the state and national data reflect an increasing trend in suicides. Data obtained from the Lorain County Coroner's office in 2013 showed 54 Lorain County residents, including four youth, died by suicide. In 2015, 38 residents died by suicide, none of which were under the age of 18. The focus of the Coalition has

been to create and implement local solutions to address emerging trends reflected in the suicide data. Some initiatives are derived directly from the Coalition while others require participants to participate in workgroups. The Suicide Prevention Coalition and its workgroups have implemented or supported the following initiatives:

- Our local health departments, Alcohol and Drug Addiction Services Board of Lorain County, and the Lorain County Board of Mental Health created a binder of resources to assist pediatricians, family practice doctors, and OB/GYNs with (1) understanding the importance of screening for depression, (2) seeing the tools for screening, (3) learning about local referral options. Because of the Behavioral Health Tool Kits, screening and referrals for mental health services increased. In 2015, 860 OB/GYN clients were screened, and 30 were referred. The number of pediatric and family practice clients screened was 5,125, and 444 were referred for services.
- A suicide risk prevention forum for parents designed to provide them with information needed to keep children safe was held in May of 2015. Over 200 residents attended the forum.
- Training for school professionals on the signs of suicide (SOS Program) was held in August 2015. Staff from six school districts, as well as mental health professionals, attended the training.
- Training on Lifelines Postvention - designed to help school and mental health staff avoid any contagion following a death by suicide - was conducted in October 2015. A combination of 35 school and mental health professionals attended.
- A youth-lead initiative was funded, allowing for students from six middle schools to develop and implement plans for reducing social alienation, a risk factor for youth suicide. Outcomes from this initiative indicated that most schools had great success in increasing the degree to which their fellow middle school students felt safe and supported by their peers.
- Based upon information regarding those who died by suicide following a hospital stay, training was provided for hospital staff, and a community mental health agency was funded to provide outreach to clients in the psychiatric emergency room to ensure patients get connected with follow-up care.
- Applied Suicide Prevention Skills Training (ASIST), Safe TALK training, and Mental Health First Aid trainings have been offered to the community to increase the number of residents who are aware of mental health symptoms and how to respond.
- A “warmline” was added to the continuum of crisis services, so residents who are not in mental health crisis but need support can receive assistance from a peer with live experience recovering from mental illness.
- Given that family members of someone who completed suicide are at greatest risk, the Coalition supported the development of a Loss Team to provide outreach to loved ones after a suicide. Additionally, the Coalition and LCMHB promoted information about support groups for those who have lost a loved one by suicide.
- An older adult workgroup has been established due to a spike in suicides by older adults. The workgroups developed a training to help non-mental health workers who may be in contact with older adults at risk of depression/suicide and has provided this training to Meals on Wheels workers in the local community.

## **Conclusion and Next Steps**

In some CHIP Priority Teams, such as Improve Access to Care and Improve Weight and Obesity, data from the 2015 Lorain County CHA showed we moved further from our performance targets. The percentage of people who do not have a doctor to see on a routine basis increased from 16% in 2011 to 18% in 2015, moving further from the 2019 performance target of 14%. In Improve Weight and Obesity, the percentage of adults who engaged in 30 minutes of physical activity three or more days each week dropped from 56% in 2011 to 53% in 2015. The 2019 target is to increase physical activity among adults by 5%. Teams are aware of these increases and are working to address them.

2015 CHA data and outside data sources, like the Ohio Department of Health, showed some CHIP Priority Teams moved closer to their performance targets. Those teams include Expand Coordinated Education and Prevention Services; Reduce Alcohol, Tobacco, and Drug Use and Abuse; and Improve Mental Health. In 2012, the Lorain County infant mortality rate was 6.8 deaths per 1,000 live births. In 2014, that rate dropped to 6.1 deaths per 1,000 live births based off on data from the Ohio Department of Health's Office of Vital Statistics. However, there is still a large disparity among the White infant mortality rate and the African American infant mortality rate. The CHIP Priority Team will continue interventions to focus on that special population, such as the Ohio Infant Mortality Reduction Initiative program (OIMRI).

The Reduce Alcohol, Tobacco, and Drug Use and Abuse saw an improvement in their objective concerning the number of deaths related to heroin and opiates. According to numbers from the Lorain County Coroner's Office, the number of deaths decreased from 67 deaths in 2013 to 65 deaths in 2015. Possible causes for the reduction are the increase in number of first responders, including police officers, who carry Naloxone, increased availability of Naloxone kits to the public, and increased education about heroin and opiates. However, there is a lot of work to be done to reach the performance target, which is reducing the number of deaths by 25% (17 fewer deaths) by the end of 2017. Data on the adult smoking rate did not show a change. It was reported that 22% of Lorain County adults were current smokers in both the 2011 and 2015 CHAs.

The CHIP Priority Team for Improve Mental Health saw a decrease in the percentage of residents who experienced an obstacle that interfered with their ability to access mental health services. In 2011, 17% of adults reported obstacles, and in 2015, the percentage dropped to 15%. The 2019 performance target is to reduce the incidence of adults not seeking mental health services by 5%. The team also noted a decrease in the number of deaths by suicide between 2013 and 2015. According to the Lorain County Coroner, the number of deaths decreased from 54 in 2013 to 38 in 2015.

Looking ahead in 2016, the Lorain County CHIP Steering Committee and CHIP Priority Teams will continue to move forward with the goals and objectives originally outlined in the Lorain County CHIP, which are found on pages 3-6 of this annual report. Changes have not been made to goals and objectives, as this is only the first full year of implementation for the CHIP. CHIP Priority Teams can use data collected from the 2015 Lorain County Community Health Assessment (CHA) to determine potential changes to strategies and implementation of the goals and objectives. Teams have also done some data collection of their own, including the transportation barriers assessment, and can use those data sets to make decisions.

A CHIP Priority Team report will be written yearly through the life of the Lorain County CHIP. Reports will provide an update on annual progress, as well as any changes to strategies, implementation, and resources. The next comprehensive CHA process will begin in 2018. The report and data from that assessment will be used for Lorain County to create its second CHIP.