



Glenbeigh CHNA Implementation Strategy Annual Update

Reviewed and Approved by the Glenbeigh Board on August 27, 2014

This document provides an update on how Glenbeigh (including Glenbeigh's six outpatient centers) will continue to take steps during 2015 to address needs found in the Community Health Needs Assessment (CHNA) published by Glenbeigh in December 2013. Any amendments planned for 2015 are noted in bold type. The full CHNA report is available at www.glenbeigh.com. This published implementation strategy describes Glenbeigh's planned initiatives for calendar (tax) years 2015 through 2016.

Glenbeigh conducted a comprehensive CHNA between February and April of 2013. The assessment was conducted in a timeline to comply with requirements set forth in the Affordable Care Act, as well as to further the hospital's commitment to community health and population health management. This implementation strategy addresses the community health needs described in the CHNA report that Glenbeigh has determined it is able to meet in whole or in part. Glenbeigh recognizes that a CHNA and an implementation strategy are required to meet current government regulations.

Glenbeigh reserves the right to amend the original implementation strategy and update as circumstances warrant. Glenbeigh's strategy is a planned, managed and measured organizational approach to meeting identified community health needs. Certain needs may become more pronounced and require enhancements to the described strategic initiatives. During the years 2014 through 2016, other community organizations may address certain needs allowing Glenbeigh to amend its strategies and refocus on other identified health problems.

The Glenbeigh CHNA Implementation Strategy includes the following information:

- Glenbeigh's Mission Statement
- Hospital and Community Profile
- Selection of Priority Community Health Needs
- Implementation Strategy to Address Identified Health Needs
- Health Needs Glenbeigh Will Not Address

Glenbeigh's Mission Statement

Glenbeigh is committed to supporting its mission, "to provide the highest quality care to adults, age 18 and over, suffering from alcohol and/or drug addiction," and provides meaningful and sustainable programs that benefit individuals and families struggling with chemical dependency.

Hospital and Community Profile

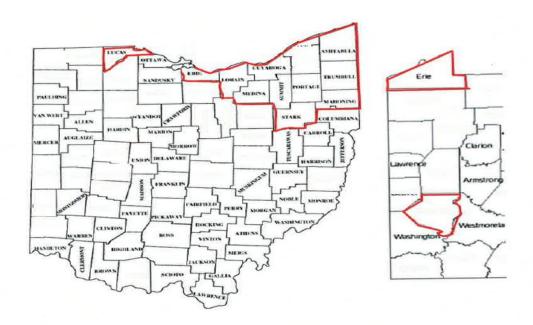
Hospital Profile

Glenbeigh, a non-profit specialty hospital located in Rock Creek, Ashtabula County, Ohio, is a regional provider of inpatient and outpatient services for adults, age 18 and over, with drug and/or alcohol addictions. Glenbeigh's six outpatient centers are located in Beachwood, Canton, Niles, Rocky River and Toledo, Ohio and Erie, Pennsylvania providing regional access to outpatient treatment, continuing care and family programs.

Community Profile - Definition of Service Area

Glenbeigh's patients come from throughout Ohio as well as from other states. In 2012, inpatient admissions primarily came from 27 Ohio counties and 13 counties in Pennsylvania. For purposes of the CHNA, Glenbeigh's service area was defined as counties from which there were 25 or more inpatient admissions in 2012. This ultimately included 13 Ohio counties and 2 Pennsylvania counties.

The map below outlines the defined regional service area for Glenbeigh, Rock Creek, Ohio.



Summary of Regional Service Area Information:

- Glenbeigh's community saw a population decline in 10 of the 15 counties between 2000 and 2012. The average percentage decline was -4.1%. The greatest population decline was observed in Cuyahoga County, Ohio (-9.2%) and the most significant population growth occurred in Medina County, Ohio (15% growth).
- Poverty level statistics revealed that 11.5% of all families in Ohio and 9.2% in Pennsylvania live in poverty. For the Ohio counties in the Glenbeigh service area, the average percentage living in poverty is 10.7%. Counties with the highest poverty rates include Ashtabula, Lucas, Mahoning and Trumbull Counties.
- According to January 2013 statistics, 8.4% of Ohioans and 9.2% of Pennsylvanians were unemployed. The highest unemployment rate, 11.4% is found in Ashtabula County, followed by 10.2% in Erie County, Ohio.
- The fewest number of adults with a bachelor's degree or higher live in Ashtabula County (12.5%) and Trumbull County (16.6%), Ohio. The counties with the highest number of adults with college degrees are Geauga County, Ohio (35.7%) and Allegheny County, Pennsylvania (34.6%).
- Ashtabula County has the largest proportion of uninsured residents in the Glenbeigh service area followed by Lucas County and Trumbull County, Ohio. All three counties have at least 12.4% of their population without insurance coverage.
- The state of Ohio rate for mortality due to drugs or alcohol is 23.2 per 100,000. Pennsylvania is slightly lower at 20.8 per 100,000. Both are slightly above the national rate of 20.6 per 100,000. Mahoning County and Erie County, Ohio, have the highest death rate due to drugs or alcohol. Erie County, Pennsylvania has the lowest rate within the Glenbeigh's defined regional service area.
- The rate for heroin poisoning is greatest in Cuyahoga, Geauga and Lake Counties, Ohio.
- Lake, Mahoning and Trumbull Counties, Ohio, have the highest rates for opioid-related poisoning.
- Summit County, Ohio (20.4%) and Allegheny County, Pennsylvania (18.8%) have the highest figures for binge drinking. The national figure for binge drinking is 15.1%. In Ohio, an estimated 17.2% of adults engage in binge drinking. Pennsylvania reports 15.2% engage in binge drinking.
- Among Ohio high-school students, teens binge drink at higher than national levels.
- Summit, Geauga, Lake and Portage Counties have higher levels of teen alcohol consumption.
- The percentage of high school students in Ohio who have used marijuana at least once in their lifetime (42.8%) is higher than what is seen nationally (39.9%).

Additional information regarding community demographics is reported in the CHNA final report.

Selection of Priority Community Health Needs

Glenbeigh contracted with Holleran, an independent research and consulting firm with more than 21 years of experience in conducting community health assessments, to assemble research in support of the CHNA. Community engagement and feedback were integral parts of the CHNA process.

Glenbeigh's 2013 CHNA revealed several pronounced needs within the defined service community. A committee comprised of hospital leadership and directors met on several occasions to review and assess the CHNA findings and to select the issues Glenbeigh will address in this implementation strategy. The following chart lists the identified community needs and an indication of Glenbeigh's attempt to meet those needs or Glenbeigh's plans to not address the need. Reasons will be detailed later in this document.

The committee team members included the Glenbeigh's Chief Executive Officer, Director of Operations, Director of Regional Operations, Director of Beachwood/Rocky River, Director of Development, Administrative Assistant to the CEO and 2 Development Advisory Board Members. ACMC Healthcare System review team members included the President and CEO, VP of Business Development, Chief Nursing Officer, CFO and Chief Quality Officer.

Community Health Needs Identified for Glenbeigh

Identified Need	Plan to Address 2014	Plan to Address 2015
Drug and alcohol addiction is pervasive and impacts people of all races, income levels and ages.	YES	YES
There are limited resources for the treatment of drug and alcohol addiction, particularly for the uninsured.	YES	YES
There are limited inpatient treatment options for the treatment of drug and alcohol abuse as well as limited detox beds.	YES	YES
Transition services, such as residential housing options and vocational rehabilitation are in great need.	YES	YES
There is a clear connection between drug and alcohol abuse and social determinants of health (e.g. poverty, unemployment).	NO	NO
Indicators point to increasing rates of heroin addiction due to the ease of accessibility and relative low cost compared to other drugs.	YES	YES
The age of the addict is on the decline.	YES	YES
Among providers and other professionals, more education is needed about what services are available and how to fully understand the treatment of addiction.	YES	YES

Implementation Strategy to Address Identified Health Needs

Glenbeigh remains committed to the community where we live and work. Glenbeigh will continue its commitment to our defined regional service area and support efforts and programs that promote recovery. Glenbeigh will allocate appropriate resources to implement the following strategies from 2014 through 2016 in an effort to meet the identified health needs of our community.

A. New or Expanded Strategic Initiatives Continue Through 2015 With One Minor Amendment

- 1. Increase transitional services, such as residential housing options and vocational rehabilitation which are in great need by:
 - i. Exploring opportunities to add transitional beds.
 - ii. Potentially expanding sober living opportunities.
 - iii. Continuing to provide vocational assessments and expanding life skills training targeting the 18 to 26 year old population.
 - iv. Continuing to assess need for transitional housing options.
 - v. Continuing to identify viable residential housing options in various communities and refer appropriately.
- 2. Address the increasing rates of heroin addiction due to the ease of accessibility and relative low cost compared to other drugs by:
 - i. Exploring creation of ProjectDAWN site in Ashtabula County in response to increased number of opioid deaths. Amendment In March 2014 Ohio signed into law legislation allowing greater access to Naloxone through healthcare providers or health departments.
 - ii. Continually distributing information to the recovery community regarding online resources that support recovery efforts.
 - iii. Expanding efforts to attract the young adult population, age 18 to 26, to engage through social media resources.
 - iv. Supporting the efforts of other organizations such as Rock & Recovery Radio that uses music as a medium to spread a positive recovery message broadcasting globally through HD radio streaming webcasting.
- 3. Provide information to young adults as the age of the addict is on the decline by:
 - i. Continuing to offer educational and social events for the recovering community.
 - ii. Developing Public Service Announcements targeting the younger population. Updating frequently to stay fresh.
 - iii. Developing a resource packet about drug and alcohol addiction for use by school guidance counselors. Distribute to Middle Schools and High Schools.
 - iv. Continuing to offer support and education to family/friends of addicted adults.
 - v. Expanding the educational/informational packet distributed for family members.
 - vi. Exploring a means to assist families with finding resources in their own community.

- 4. Educate providers and other professionals about what services are available and how to fully understand the treatment of addiction by:
 - i. Continuing to offer educational workshops to professionals who work with individuals and families struggling with addiction.
 - ii. Continuing to train future counselors, social workers and nursing students interested in working in the field of chemical dependency including internship programs.
 - iii. Continuing to distribute information that educates the general population about addiction and about current trends in addiction and recovery.
 - iv. Developing an educational forum targeting physicians and ministers.
 - v. Creating an electronic newsletter as a resource for professionals targeting current addiction and recovery trends.

B. Continuing Strategic Priorities Have Not Changed for 2015

Planning programs and services that address community need was accomplished through an assessment and evaluation process. Certain community health needs are being addressed by programs currently in place. Glenbeigh has not changed plans to expand these programs or services unless a need becomes more pronounced and circumstances warrant expansion. These initiatives include:

- 1. Drug and alcohol addiction is pervasive and impacts people of all races, income levels and ages.
 - a. Glenbeigh has been providing treatment for substance abuse for over 31 years and will continue to do so. Glenbeigh treats a diverse adult population and collaborates with, and refers to, other organizations that provide treatment and support services to all demographics.
- 2. There are limited resources for the treatment of drug and alcohol addiction, particularly for the uninsured.
 - a. Glenbeigh will continue to provide charitable care opportunities to the uninsured in need of treatment for those who meet clinical and financial eligibility.
 - b. Glenbeigh will continue to provide charity care at outpatient centers for those who meet clinical and financial eligibility.
 - c. Continue to provide charitable care opportunities for underinsured individuals in need of additional care.
 - d. Continue to refer to other agencies to effectively meet the needs of people seeking help for drug and/or alcohol addiction.
- 3. There are limited inpatient treatment options for the treatment of drug and alcohol abuse as well as limited detox beds.
 - a. Glenbeigh will continue to work with individuals in need of treatment and will continue to provide detox services to counties with no resources.
 - b. Glenbeigh will continue to assess the need for additional beds for all levels of care and to explore the possibility of expanding residential and inpatient beds.

C. Needs Glenbeigh Does Not Plan to Address Have Not Changed For 2015

No one organization can address all the heath needs identified within its service community especially given Glenbeigh's expansive service area. Glenbeigh will focus on meeting the priority and specified community health needs selected from the CHNA. Glenbeigh will not focus on the following needs:

- 1. There is a clear connection between drug and alcohol abuse and social determinants of health (e.g. poverty, unemployment).
 - a. Addressing issues such as poverty and unemployment is beyond the scope of Glenbeigh's expertise. The issue is being effectively addressed by other agencies.

D. Planned Collaboration(s) With Other Related or Unrelated Organizations Remain Unchanged for 2015

Glenbeigh's strategies will be implemented with community partners including, but not limited to:

- Glenbeigh Outpatient Centers
- Community-based non-profit organizations
- Community-based social service agencies
- Community-based family services organizations
- Faith-based organizations
- Educational institutions

Glenbeigh's Role in a Healthy Community

The health of the community affects everyone. Glenbeigh is committed to providing the highest quality of care to those among us who are struggling with the disease of chemical dependency. We help patients learn to make healthy choices so they can return to their lives with a positive approach to living and wellness that is free from alcohol or other drugs. This positive approach emphasizes the whole person – mind, body and spirit – and encourages each individual integrate into their community and to make better choices in life.

The Glenbeigh Community Health Needs Assessment and the Implementation Strategy may be found on the Glenbeigh website at www.glenbeigh.com

Both the Community Health Needs Assessment and the 2014 Community Health Needs Assessment Implementation Strategy were reviewed and approved by Glenbeigh's Executive Management and Board of Directors in September 2013. The 2015 Implementation Strategy was reviewed and approved in August 2014.

Glenbeigh
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