

Glenbeigh Community Health Needs Implementation Strategy

This document compliments Glenbeigh’s 2019 Community Health Needs Assessment (CHNA) as required by the Treasury Department and the Internal Revenue Service pursuant to the Affordable Care Act of 2010. Within this Implementation Strategy, Glenbeigh, including its six outpatient centers, will address the needs identified in the Community Health Needs Assessment (CHNA) published in December, 2019. Glenbeigh conducted a full Community Health Needs Assessment from January 2019 through October 2019. The final report was presented to the Board of Directors resulting in no significant amendments being recommended to the CHNA.

The full CHNA report is available at www.glenbeigh.com or a printed copy will be provided upon request. The published Implementation Strategy describes Glenbeigh’s planned initiatives for calendar years 2020, 2021 and 2022.

The comprehensive assessment was conducted in a timeline complying with requirements set forth in the Affordable Care Act. The CHNA furthers the hospital’s commitment to community health and population health management in relation to alcohol and drug addiction, the focus of Glenbeigh’s mission. This Implementation Strategy addresses the community health needs Glenbeigh intends to meet in whole or in part. Addressed needs will be tailored to Glenbeigh’s programs and priorities and take into account resources as well as collaboration with other organizations. It also explains any needs that will not be addressed by the hospital and why.

Glenbeigh also took into account key findings from the State of Ohio Health Assessment, which was released on September 9, 2019. The document was prepared by the Health Policy Institute of Ohio. Glenbeigh’s CHNA and Implementation Strategy will complement the State of Ohio improvement plan areas* that are in line with the mission of Glenbeigh – with a focus on addiction and recovery from substance use disorders. This document also aligns with the Ashtabula County Community Health Improvement Plan, released September 20, 2019.

* Note: The State of Ohio had not released the 2020-2022 State Health Improvement Plan prior to Glenbeigh’s Implementation Strategy being written and approved. Therefore Glenbeigh’s CHNA and Implementation Strategy align with the 2017-2019 SHIP and with information published in the 2019 SHA.

Glenbeigh reserves the right to amend and update this Implementation Strategy 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 2020 through 2022, other community organizations may address certain needs allowing Glenbeigh to amend its strategies and refocus on other identified health problems.

The Glenbeigh 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
- Role of Glenbeigh in a Healthy Community

Glenbeigh's Mission Statement

Glenbeigh is committed to supporting its mission, "to provide the highest quality healthcare to those in need of alcohol and drug addiction treatment and to support ongoing addiction recovery efforts" 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 substance use disorders. Glenbeigh's six outpatient centers are located in Beachwood, Canton, Niles, Rocky River and Toledo, Ohio and Erie, Pennsylvania, providing regional access to assessments, outpatient treatment, continuing care and family programs.

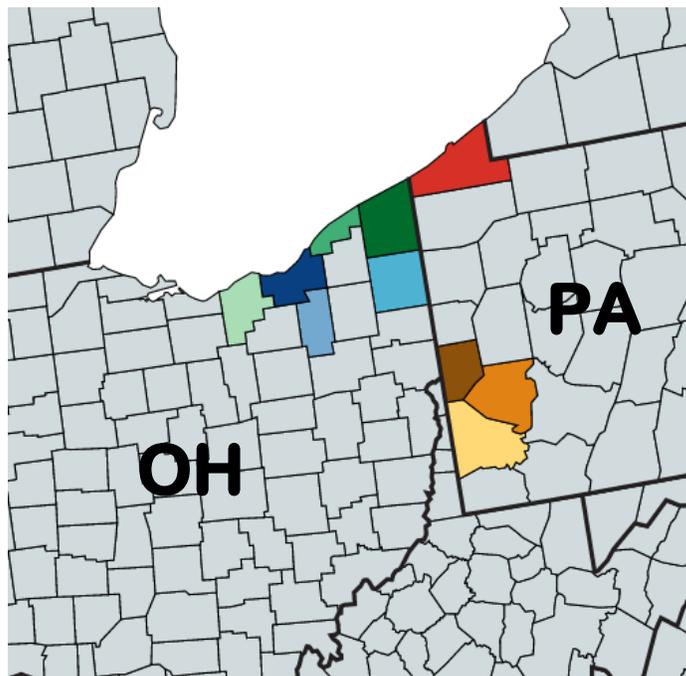
Community Profile - Definition of Service Area

Glenbeigh services individuals from Ohio as well as other states. For purposes of the 2019 CHNA report, Glenbeigh's community is defined as six (6) counties in Ohio (Ashtabula, Cuyahoga, Lake, Lorain, Summit and Trumbull) and four (4) counties in Western Pennsylvania (Allegheny, Beaver, Erie and Washington) comprising of 66% of the total number of admissions from Ohio and 63% of the total number of admissions from Pennsylvania. While the entire service area has comparatively unfavorable health status and socioeconomic indicators, the counties of Ashtabula and Trumbull in Ohio as well as Allegheny, Beaver, Erie and Washington in Pennsylvania are considered part of the Appalachian Region. The Appalachian Region is noted for limited educational opportunities, employment options, income advancement and access to housing, health care and transportation. Secondary data in the CHNA shows there are significant disparities between northeast Ohio and the rest of the state as well as

western Pennsylvania versus the remainder of the commonwealth. These areas were substantially impacted by the opioid epidemic and have high rates of alcohol use.

The total population of Glenbeigh’s defined service community in 2018 was approximately 4,485,000.

The map below outlines the defined regional service area for Glenbeigh for 2020, 2021 and 2022.



Summary of Regional Service Area Information:

- The total population in the Glenbeigh service community decreased as projected between 2010 and 2018. While Ohio’s overall population increased 1.3%, Ashtabula County decreased by 3.9%, Cuyahoga County by 2.8%, and Trumbull County by 5.6%. Lake and Summit Counties saw insignificant population changes while Lorain County grew by 2.7%. In Pennsylvania the overall population grew by only 0.8%. Allegheny County grew by 0.4% while Beaver and Erie Counties decreased by 3.4% and 3.0%. Washington County decreased by 0.2%.
- Health needs continue to be associated with poverty. The U.S. Census Bureau reported 14.0% of Ohioans and 12.5% of Pennsylvanians were living in poverty in 2017. Low income tracts are prevalent in all of the counties in Glenbeigh’s defined service community. Ashtabula had the highest percent of people living in poverty (19.3%) among the Ohio counties while Erie was the highest (15.7%) out of the Pennsylvania service area.
- In 2018, the average uninsured rate in the Glenbeigh service community was 6.3%, which was lower than the Ohio average of 7.0%, but higher than the Pennsylvanian average of

- 6.6%. Ashtabula County, Ohio had a higher uninsured rate (8.6%) than the Ohio average. Beaver (6.0%) and Erie (6.2%) counties had higher rates than the state of Pennsylvania.
- The defined service area has a high percentage of alcohol-impaired driving deaths and experienced significant increases in the number of overdose deaths through 2017. The drug-induced mortality rate remains significantly higher than the national average for the entire defined service area.
 - The CDC data for 2017 lists West Virginia with the top national death rate from drug overdoses at 57.8 followed by Ohio at 46.3 and Pennsylvania at 44.3.
 - Cocaine involved drug poisoning deaths increased for the fourth straight year with more cocaine deaths recorded in 2016 than any other year since 1999 according to a CDC report. The number of deaths from cocaine-related overdoses increased 52.9% between 2015 and 2016.
 - Pennsylvania recognized the long-term crises that will arise from future opioid related diseases. This includes long-term care for infants born with neonatal abstinence syndrome; impacts from hepatitis C and HIV infection; and the need for long-term sober living options and access to treatment for ancillary disorders.
 - Ohio's 2019 State Health Assessment reported concern due to increases in hepatitis C and the number of children in foster care as a result of the addiction crisis.
 - The overall wellbeing of Ohioans has declined. Trends in premature death, life expectancy and overall health status indicate that the health of Ohioan has worsened since the previous State Health Assessment that was conducted in 2016.
 - Underlying drivers of inequity include: poverty, racism, discrimination, trauma, violence and toxic stress. The impact of racism and discrimination persists – particularly among the African American/black population.

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

Selection of Priority Community Health Needs

In addition to statistical data obtained through multiple sources, community engagement and feedback were integral parts of the CHNA process. Glenbeigh also reviewed the 2019 Ohio State Health Assessment and referenced initiatives identified as priorities. A committee comprised of hospital leadership and directors had the opportunity to review and assess the CHNA findings and to select the key issues Glenbeigh addresses in this Implementation Strategy. The committee team members who reviewed the CHNA and proposed strategies included Glenbeigh's Chief Executive Officer, Director of Operations, Director of Regional Operations, Director of Development, the Administrative Assistant to the CEO and the Development Advisory Board. Prior to final approval, Glenbeigh's CHNA was reviewed by APMC Healthcare System's President and CEO, Vice President of Business Development and the Board of Directors.

Glenbeigh’s 2019 CHNA revealed several pronounced needs within the defined service community. Primary priority outcomes that relate to Glenbeigh’s mission are:

- Access to Treatment for Alcohol and Drug Addiction
- Education on Addiction and Recovery
- Workforce Development

Additionally, Glenbeigh’s efforts align with the following areas identified in Ohio’s State Health Assessment:

- Mental Health and Addiction
- Increases in Hepatitis C

Key Findings were broken down into two components: socioeconomic needs and health needs. The following needs emerged across the various research components and were identified as significant health needs within Glenbeigh’s service area.

Community Health Needs Identified for Glenbeigh

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.

Identified Need	Plan to Address
Socioeconomic Needs	
1. Drug and alcohol abuse continues to impact people of all races and ages. Poverty, income and insurance coverage significantly impact access to treatment and successful recovery. Employment and income, along with other social and economic determinants, correspond to alcohol and drug use.	YES
2. Drug abuse has transitioned from the use of heroin to fentanyl, cocaine and methamphetamines. Alcohol involved accidents continue to occur. Drugs are easily available and inexpensive.	NO
3. Synthetic drug use is becoming more prevalent. Many drugs, such as cocaine, are laced with fentanyl resulting in overdoses. Alcohol use remains a top drug of choice. Prescription abuse continues to be prevalent.	NO
4. People dealing with active addiction do not understand how to get assistance or help a loved one/client sustain recovery. There is a lack of education and information available regarding addiction, treatment and recovery support.	YES
5. In many areas there continues to be a lack of recovery support options. Recovery support includes recovery housing and recovery oriented events.	YES
Health Needs	
1. Barriers exist that affect access to treatment either limiting or excluding certain demographics from obtaining treatment services.	YES
2. Stigma continues. Employers lack education to help employees secure treatment confidentially and return to work. Stigma around drug abuse remains while alcohol use is tolerated.	NO
3. Among providers there is a lack of qualified, educated, licensed individuals to work in the field of addiction treatment: from entry level positions to physicians and nurses.	YES
4. Established healthcare professionals lack education on addiction, treatment and recovery.	NO

The 2019 CHNA provides details for each identified health need.

Glenbeigh has a history of providing significant amounts of community benefit to the areas it serves. Glenbeigh will continue this commitment by allocating appropriate human and financial resources to meet community needs through the implementation of the following strategy beginning in 2020 and continuing through 2022.

Socioeconomic Needs

1. Drug and alcohol abuse continues to impact people of all races and ages. Poverty, income and insurance coverage significantly impact access to treatment and successful recovery. Employment and income, along with other social and economic determinants, correspond to alcohol and drug use. **YES**

No single organization has the capacity to address poverty along with contributing factors within the defined service community. Addressing the factors connected to poverty is beyond the scope of Glenbeigh's expertise. There are other agencies that provide assistance with food and housing. Glenbeigh will continue to support those efforts and provide assistance when possible to other agencies. Glenbeigh recognizes that substance abuse is a contributing factor that may drive individuals into poverty.

Action: Glenbeigh will continue to provide treatment services to all patients regardless of race, creed, gender identity, disability, origin or ability to pay. Glenbeigh works to improve access to care for individuals suffering with alcohol and drug addictions.

- i. Work with individuals in need of treatment and continue to collaborate with counties that lack resources to provide detox services to vulnerable populations.
- ii. Continue to provide charitable care opportunities for substance use treatment and recovery support to individuals who meet clinical and financial eligibility and who may be uninsured or underinsured.
- iii. Continue to maintain a referral network to assist individuals in need of support services. Collaborate and refer to, or accept referrals from, other agencies in order to assist individuals seeking treatment.
- iv. Continue to collaborate with drug courts and social service agencies to provide treatment and education options.
- v. Identify at-risk patients. Increase knowledge of and access to screening of infectious diseases such as HIV and hepatitis C and provide follow-up care, referral or prevention information.
- vi. Increase sensitivity in addressing the needs of diverse patient populations.

2. Drug abuse has transitioned from the use of heroin to fentanyl, cocaine and methamphetamines. Alcohol involved accidents continue to occur. Drugs are easily available and inexpensive. **NO**

Action: Law enforcement takes the lead addressing access to and availability of drugs. Local, State and Federal agencies are dedicated to reducing access to alcohol by youth, alcohol related accidents, drug use and crime. Glenbeigh cannot address this community health need as it does not specialize in enforcing laws. Glenbeigh will continue to support enforcement efforts that promote prevention and assist individuals with substance use disorders.

3. Synthetic drug use is becoming more prevalent. Many drugs, such as cocaine, are laced with fentanyl resulting in overdoses. Alcohol use remains a top drug of choice. Prescription abuse continues to be prevalent. **NO**

Action: Drug use, and the resulting overdoses, is being addressed by multiple agencies including law enforcement. Glenbeigh will not specifically address the availability of synthetic drugs but will continue to provide information and education that targets specific demographics on the topics of alcohol and drug addiction and recovery.

- i. Offer public education opportunities on the topics of addiction and recovery.
- ii. Make resources available through various forms of communication. Utilize traditional, social media and web related resources.
- iii. Work with other organizations to develop and launch public service messaging targeting different sectors. Update frequently to keep material relevant to trends.
- iv. Support the efforts of other organizations to educate and spread positive recovery messaging.

4. People dealing with active addiction do not understand how to get assistance or help a loved one/client sustain recovery. There is a lack of education and information available regarding addiction treatment and recovery support. **YES**

Action: Glenbeigh continually strives to be a resource and meet the needs of its service community by offering education, treatment, referral and recovery support services.

- i. Assess various ways other communities are successfully helping people seeking treatment. Adopt successful programs.
- ii. Continue to provide education and support services that can reduce opioid relapse and overdose deaths.
- iii. Continue to collaborate with providers and sponsor access to naltrexone within various communities as long as there is a need and demand for services.
- iv. Continue to offer and support training and distribution of Narcan (naloxone) to the public as well as to first responders, businesses and other entities in need.
- v. Sponsor or host non-clinical programs to educate the public on substance use disorder, treatment options and sustaining recovery.

5. In many areas there continues to be a lack of recovery support options. Recovery support includes recovery housing and recovery oriented events. **YES**

Action: Glenbeigh endeavors to meet the needs of people suffering from the disease of addiction by providing treatment, long-term support, housing opportunities and events that promote and enhance recovery. Increase supportive housing census for individuals in recovery.

- i. Continue to assess the need for transitional housing and recovery living options and explore opportunities to add beds as needed.
- ii. Connect with other recovery residences and providers to build a recovery support network that benefits the community.
- iii. Continue to explore ways to engage people in recovery through social events and by offering various means to sustain long-term recovery.
- iv. Utilize social media to publicize events and opportunities.
- v. Continue to work with other agencies to expand recovery support within communities that lack or have limited resources.

Health Needs:

1. Barriers exist that affect access to treatment either limiting or excluding certain demographics from obtaining treatment services. **YES**

Action: Transportation remains among the top barriers to securing inpatient and outpatient treatment services especially in the Appalachian Region. Being uninsured or underinsured remains a significant barrier to seeking treatment. Another identified barrier was insurance bias – not paying for adequate length of treatment.

- i. Work with individuals in need of treatment and continue to provide detox services to counties that lack resources.
- ii. Provide charitable care opportunities for substance use treatment and recovery support to individuals who meet clinical and financial eligibility and who may be uninsured or underinsured.
- iii. Continue to maintain a referral network to assist individuals in need of support services. Collaborate and refer to, or accept referrals from, other agencies in order to assist individuals seeking treatment.
- iv. Provide transportation for both inpatient and outpatient services when available and possible.
- v. Increase ways to provide easy access to testing services such as for HIV and hepatitis within the community and distribute information on where to seek further care.

2. Stigma continues. Employers lack education to help employees secure treatment confidentially and return to work. Stigma around drug abuse remains while alcohol use is tolerated. **NO**

Action: Glenbeigh strives to break down the stigma associated with substance use disorders. Other agencies are working to reduce the stigma associated with drug addiction and alcoholism. There is still considerable work needed in this area therefore Glenbeigh may support the efforts of these other agencies by providing resources.

- i. Continue to work with and support other organizations dedicated to positive messaging about addiction, treatment and recovery.
- ii. Assess the need for workforce education. Explore possibility of distributing educational material targeting businesses through non-traditional methods.
- iii. Assist other organizations to educate the public on the dangers of alcohol misuse, binge drinking and alcoholism.
- iv. Participate in health fairs and health events held at businesses, in hospitals and throughout the community and distribute educational materials to help reduce stigma.

3. Among providers there is a lack of qualified, educated, licensed individuals to work in the field of addiction treatment from entry level positions to physicians and nurses. **YES**

Action: Glenbeigh is committed to workforce development and providing opportunities in order for individuals within the service region to advance their education and secure sustainable wage employment. Increase the number of individuals completing educational workshops, internships or obtaining continuing education credits for sustaining licensure.

- i. Develop educational workshops for professionals who work with individuals and families struggling with addiction.
- ii. Continue to provide internships and other educational programs targeting future counselors, social workers, counseling assistants, nurses and other healthcare professionals interested in entering the field of chemical dependency.
- iii. Update topics and create relevant educational programs for professionals seeking continuing education credits to retain licensure.
- iv. Collaborate with other agencies to ensure the educational needs of local workers are being met and opportunities are present to advance.
- v. Provide resource material and education to address drug and alcohol use.
- vi. Work with community agencies and become a resource for workforce development programs.
- vii. Continue to target other demographics, such as clergy, that would benefit from specialized education.
- viii. Offer educational workshops to professionals who work with individuals and families struggling with addiction.
- ix. Create and distribute information about trends, addiction and recovery.

4. Established healthcare professionals lack education on addiction, treatment and recovery. **NO**

Action: As an expert in the field of treatment for substance use disorders, Glenbeigh has the resources to educate established healthcare professionals, such as physicians. That said, it is difficult to persuade busy professionals to attend educational symposiums on addiction and recovery. Glenbeigh will support the efforts of other organizations and offer materials designed to increase the knowledge of physicians and other healthcare providers so they can better serve patients in active addiction or in recovery. Glenbeigh will continue to:

- i. Offer resources that help healthcare professionals work with patients living in recovery.
- ii. Assist in education and training opportunities that target healthcare providers.
- iii. Collaborate with organizations that connect with medical schools, colleges and universities to educate future caregivers.
- iv. Provide resource material and education that addresses alcohol and drug use and how to successfully promote/achieve long-term recovery after treatment.
- v. Provide information on how families can secure appropriate treatment, available community resources and living in recovery.

Implementation Strategy to Address Identified Health Needs

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

Planned Collaboration(s) With Other Related or Unrelated Organizations

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 Implementation Strategy is a representation of the actions the hospital, along with its outpatient centers, intends to undertake in an effort to address the identified community health needs in the 2019 CHNA. The actions listed are not intended to be a comprehensive directory of Glenbeigh's goals. The Implementation Strategy is reviewed annually and goals and actions may be adjusted as community needs related to substance use and addiction can change frequently. Significant changes to the Implementation Strategy will be documented and reported in Glenbeigh's community benefit reports.

Glenbeigh's Role in a Healthy Community

The health of the community affects everyone. Glenbeigh is committed to providing the highest quality care to those among us who are struggling with the disease of addiction. Glenbeigh helps patients learn to make healthy choices so they can return to their lives with a positive approach to living and wellness that does not include the use of alcohol or other drugs. This positive approach emphasizes the whole person – mind, body and spirit – and encourages each individual to 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 or at www.glenbeigh.org

The Community Health Needs Assessment was reviewed and approved by Glenbeigh's Executive Management and Board of Directors in October 2019. The corresponding Implementation Strategy was reviewed and approved on March 25, 2020.

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