



**Indiana University Health Blackford Hospital
Community Health Needs Assessment**

2015



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1 INTRODUCTION

1.1 Purpose

This report provides an overview of findings from a community health needs assessment (CHNA) conducted on behalf of Indiana University Health (IU Health) Blackford Hospital (IU Health Blackford) in order to identify the leading health needs in Blackford County, the area defined as the community served by the hospital, to develop an effective implementation strategy to address such needs and to respond to the regulatory requirements of the Patient Protection and Affordable Care Act of 2010 (PPACA), which requires that each tax-exempt hospital facility conduct an independent CHNA.

1.2 Objectives

The 2015 IU Health Blackford CHNA has three main objectives:

- 1.** Identify the priority health needs (public health and healthcare) within the IU Health Blackford PSA.
- 2.** Serve as a foundation for developing implementation strategies that can be utilized by healthcare providers, communities and policy makers in order to improve the health status of people living in the Blackford County community.
- 3.** Supply public access to the CHNA results in order to inform people in the community and provide assistance to those invested in the transformation to the community's healthcare network.

2 EXECUTIVE SUMMARY

IU Health Blackford's entire community service area extends into five counties: Blackford, Grant, Delaware, Jay and Wells. Poor social and economic factors may contribute to the poor lifestyle choices that are prevalent in the community, such as substance abuse, poor diet and lack of physical activity.

The needs listed below specify the health issues identified through the assessment as priority needs across the entire community served by the hospital. These problems affect most of the community service area counties, but particularly apply to the primary service area of Blackford County.

Top Community Health Needs

This assessment identified five priority health needs across the entire community served by IU Health Blackford Hospital. These problems affect most of the community service area counties, but particularly apply to the PSA of Blackford County.



Obesity



Infant Health Factors/Prenatal Care



Mental Health/Substance Abuse



Smoking and Tobacco Use



Access to care

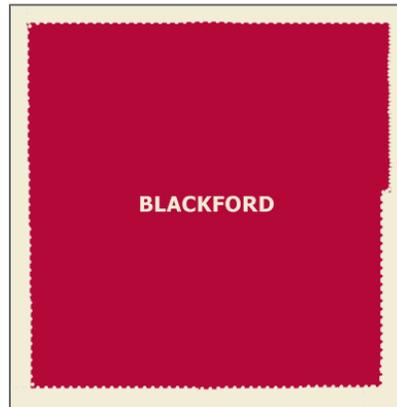
To identify these needs, IU Health Blackford Hospital collected comments to the prior CHNA, surveyed residents of the county through an online portal and using paper surveys, conducted a focus group which included a public health official and representative of the medically underserved and reviewed available resources about health status indicators. From these sources, the Hanlon Method was used to identify the priority needs:

- Obesity
- Infant Health Factors/Prenatal Care
- Mental Health and Substance Abuse
- Smoking and Tobacco Use
- Access to Care

IU Health Blackford Hospital is the only hospital in Blackford County.

2.1 Primary Service Area

Blackford County comprises the majority of the IU Health Blackford Hospital community. It accounts for all of the primary service area (PSA) population and 84% of the inpatient discharge population of the total community.



Blackford County has higher rates of unemployment than the state of Indiana and the national average. The median household income of Blackford County is also below the Indiana state average and the national average. The county is adversely affected by a combination of chronic health conditions, low educational attainment and the low availability of higher paying jobs.

3 STUDY METHODS

3.1 Analytical Methods

In order to identify the community's health needs, both quantitative and qualitative data were utilized. For this CHNA, quantitative analyses assessed the health needs of the population through data abstraction and analysis and qualitative analyses were conducted by gathering input from community members through a survey and through a structured interview with community leaders in Blackford County.

3.2 Data Sources

CHNAs seek to identify priority health needs and access issues for particular geographic areas and populations. Accordingly, the following topics and data are assessed:

- Demographics, e.g., population, age, sex, race
- Economic indicators, e.g., poverty and unemployment rates
- Health status indicators, e.g., causes of death, physical activity, chronic conditions and preventive behaviors
- Health access indicators, e.g., insurance coverage, ambulatory care sensitive condition (ACSC) discharges
- Availability of healthcare facilities and resources

Data sets for quantitative analyses included:

- Centers for Disease Control and Prevention
- Centers for Medicare & Medicaid Services
- Community Health Status Indicators Project
- Dartmouth Atlas of Health Care
- Indiana Department of Workforce Development
- Indiana Hospital Association Database
- Kaiser Family Foundation
- Robert Wood Johnson Foundation—County Health Rankings
- STATS Indiana data—Indiana Business Research Center, IU Kelley School of Business
- US Bureau of Labor Statistics
- US Census Bureau
- US Department of Commerce, Bureau of Economic Analysis
- US Health Resources and Services Administration

While quantitative data can provide insights into an area, these data need to be supplemented with qualitative information to develop a full picture of a community's health and health needs. For this CHNA, qualitative data were gathered from responses collected online to the prior Community Health Needs Assessment through surveys of members of the public and in a focus group with health leaders and public health experts.

3.3 Process for determining priorities

The quantitative, secondary data sources identified health needs for which Indiana or Blackford County is above or below average in comparison with other regions. Qualitative information from survey results, which included responses from under-served or underrepresented groups, supplemented the secondary data. Survey results and secondary data findings were shared with a focus group of community health leaders. This group prioritized leading health needs. The priorities from the focus groups, plus survey results and health indicator data were compiled. IU Health Blackford Hospital representatives used the Hanlon Method to identify the top five needs.

The Hanlon Method seeks ratings from 0 to 10 on three criteria: size of the health problem based on the percentage of the population affected, seriousness or magnitude of the health problem and the effectiveness of potential interventions.¹ With the ratings compiled, analysts identify specific health problems that can feasibly be addressed by the community served. From that list, priority scores are calculated, where the seriousness of the problem is given the most weight. Ranks are assigned based on the priority scores.

3.4 Information Gaps

To the best of our knowledge, no information gaps have affected IU Health Blackford Hospital's ability to reach reasonable conclusions regarding community health needs. While IU Health Blackford has worked to capture quantitative information on a wide variety of health conditions

¹ The Hanlon Method is one of the possible prioritization methods presented in material from the National Association of County and City Health Officials. For more information, please see <http://www.naccho.org/topics/infrastructure/accreditation/upload/Prioritization-Summaries-and-Examples.pdf>.

from a wide array of sources, IU Health Blackford realizes that it is not possible to capture every health need in the community and there will be gaps in the data captured.

To attempt to close the information gap qualitatively, IU Health Blackford conducted focus group with public health experts and community health leaders and community input surveys to gather input from general and underserved community members. However, it should be noted that there are limitations to these methods. If an organization from a specific group was not present during the focus group as seniors or injury prevention groups, then that need could potentially be underrepresented in the focus group. Due to the community survey's small sample size, extrapolation of these results to the entire community population is limited.

3.5 Collaborating Organizations

The IU Health system collaborated with other organizations and agencies in conducting this needs assessment for the IU Health Blackford community. These collaborating organizations are as follows:

Blackford County Mayor

Blackford County Health Department

Blackford County School System

Citizens State Bank

Family Practitioner

Hearts with Integrity (Home Health)

IU Health Ball Memorial Hospital

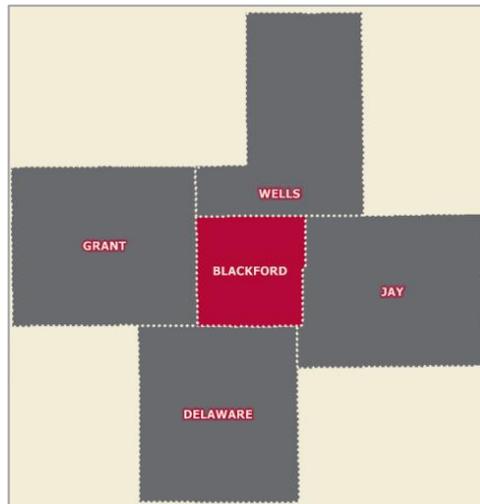
IU Health Blackford Hospital

Life Stream Services

4 DEFINITION OF COMMUNITY ASSESSED

This section identifies the community assessed by IU Health Blackford Hospital. The community was defined as Delaware County, the community where IU Health Blackford is located. The secondary service area (SSA) is comprised of four contiguous counties. The community definition is consistent with the inpatient discharges for 2015, as illustrated Figure 1 below.

Figure 1: Counties in the IU Health Blackford Hospital Service Area Community, 2015



In 2014, the IU Health Blackford PSA included 442 discharges and its SSA 124 discharges. The community was defined based on the geographic origins of IU Health Blackford inpatients. Of the hospital's inpatient discharges, approximately 78% originated from the PSA and 22% from the SSA (Source: IU Health).

5 SECONDARY DATA ASSESSMENT

5.1 Demographics

IU Health Blackford Hospital is located in Blackford County, a county located in east-central Indiana. Blackford County includes ZIP codes within the towns of Hartford City and Montpelier. Based on the most recent Census Bureau (2014) statistics, Blackford County's population is 12,401 persons with approximately 50.4% being female and 49.6% male. The county's population estimates by race are 97.2% White, 1.6% Hispanic or Latino, 1.3% Black, 0.5% Asian, 0.8% American Indian or Alaska Native and 1.3% persons reporting two or more races.

Blackford County has a high degree of high school completion but a comparatively low level of college attendance, compared with the United States. Based on data for 2013 from the American Community Survey, In Blackford County, among adults age 25 and above, 13.5% did not complete high school; 50.8% stopped school with a high school diploma or equivalent. Just over a quarter (25.4%) have some college, including those with an associate's degree. And just over 1 in 8 (13.4%) have a bachelor's degree or higher. Nationally, 86.4% of adults have completed high school; in Blackford County, it is nearly 90%. However, nationally, 28.9% of adults over 25 have a bachelor's degree, compared with 13.4% in the county.

Total population for the PSA is 12,401 and the total population for surrounding counties is 247,715, as illustrated in Table 1 below.

Table 1: Service Area Population, 2014

	County	Population	Percent of Total
Primary	Blackford	12,401	5.0%
	Subtotal	12,401	5.0%
Secondary	Grant	68,569	27.7%
	Delaware	117,704	47.5%
	Jay	21,179	8.5%
	Wells	27,862	11.2%
	Subtotal	235,314	95.0%
Total Service Area		247,715	100.0%

Source: U.S. Bureau of the Census. County Characteristics Datasets: Annual County Resident Population Estimates by Age, Sex, Race and Hispanic Origin: April 1, 2010 to July 1, 2014

5.2 Economic Indicators

The following topics were assessed to examine various economic indicators with implications for health: (i) Employment, (ii) Household Income and People in Poverty, and (iii) Uninsured.

5.2.1 Employment

The share of jobs in Blackford County was highest within the industry sectors manufacturing, retail trade, healthcare and social assistance, accommodation and food services, wholesale trade. From 2010 to 2013, total private employment increased by 3.1%. However employment in some sectors declined dramatically, including a 15% drop in employment in government (federal, state and local), which led to a slight decline in overall employment, a change of -0.4%.

Blackford County has a diverse group of major employers reported by the Indiana Department of Workforce Development, including: 3M Corporation, IU Health Blackford Hospital, Key Plastics LLC, 5 Star Commercial Roofing, Stanley Engineered Fastening, Blackford County High School, BRC Rubber Group, Cadence Innovation, Hartford City Paper LLC and Indiana Veneer.

Blackford County reported a relatively higher unemployment rate than the rates of some surrounding counties and had a slightly higher rate of unemployment than the state of Indiana and the national average rates. Table 2 summarizes unemployment rates at December 2013 and December 2014.

Table 2: Unemployment Rates, December 2013 and December 2014

Service Area	County	Dec-13	Dec-14	% Change from 2013-2014
Primary	Blackford	8.4%	6.8%	-2.4%
Secondary	Grant	7.4%	6.6%	-1.2%
	Delaware	7.0%	6.7%	-0.3%
	Jay	6.3%	5.6%	-1.1%
	Wells	5.3%	4.7%	-0.6%
Indiana		6.3%	5.9%	-0.4%
USA		6.7%	5.6%	-1.1%

Source: US Bureau of Labor Statistics, 2015.

5.2.2 Household Income and People in Poverty

Areas with higher poverty rates tend to have poorer access to healthcare, lower rates of preventive care, higher rates of preventable hospital admissions and poorer health outcomes in general. According to 2013 data from the US Census, the national poverty rate was 14.8%, down from 15.0% in 2012. In Indiana, 15.8% of the state population lived in poverty in 2013, a 0.3% increase from the 2012 poverty rate (15.5%).

For Blackford County, a poverty rate of 15.4% was reported in 2013, up from 14.9% reported for 2012 (+0.5%). Comparatively for Indiana, Hamilton County had the lowest poverty rate at 5.5% and Monroe County had the highest at 24%. Table 3 below illustrates the poverty rates by year between 2011 and 2013 for counties served by or near IU Health Blackford.

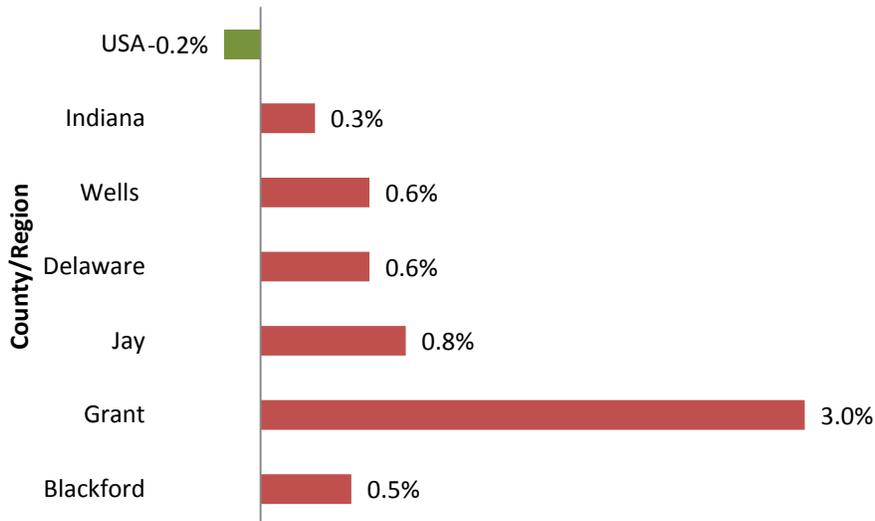
Table 3: Percentage of People in Poverty, 2011-2013

Service Area	County	2011	2012	2013	% Change from 2012-2013
Primary	Blackford	16.1%	14.9%	15.4%	0.5%
Secondary	Grant	17.4%	18.7%	21.7%	3.0%
	Jay	15.9%	14.2%	16.0%	0.8%
	Delaware	23.0%	22.4%	23.0%	0.6%
	Wells	10.2%	11.2%	11.8%	0.6%
Indiana		15.8%	15.5%	15.8%	0.3%
USA		15.0%	15.0%	14.8%	-0.2%

Source: American Community Survey 2015.

Poverty increased in each county in the IU Health Blackford service area from 2012 to 2013. Grant County had the highest poverty rate increase between 2012 and 2013 (3.0%), followed by Jay County (0.8%). Comparisons of each service area county's poverty rates, as well as those for the state of Indiana and the entire US, are displayed in Figure 2 below.

Figure 2: Percentage Change in Poverty Rates between 2012 and 2013



Source: American Community Survey 2015.

Income level is an additional economic factor that has been associated with the health status of a population. Based on US Census Bureau (2009) data, Blackford County's per capita personal income was estimated to be \$27,948, with a median household income around \$38,371, both of which are below the state rates. The rates are compared to the Indiana state average of per capita income of \$33,323 and the median household income of around \$45,427, as well as the US national average of per capita income of \$38,846, with a median household income of \$50,221.

5.2.3 Insurance Coverage

National statistics on health insurance indicate that 10% of the United States population is uninsured. Of the US population that is insured, 49% are insured through an employer, 6% through individual providers, 19% through Medicaid, 13% through Medicare and 2% through other public providers.

In Indiana, it is estimated that 11% of the population are uninsured. Of the Indiana residents who are insured, 17% residents are insured through Medicaid, 15% through Medicare, 51% through their employer, 5% through individual providers and 1% through other public providers.²

² Kaiser State Health Facts 2015, Kaiser Family Foundation. <http://www.statehealthfacts.org>

5.3 County Level Health Status and Access Indicators

5.3.1 County Health Rankings

The Robert Wood Johnson Foundation, along with the University of Wisconsin Population Health Institute, created County Health Rankings to assess the relative health of county residents within each state for all 50 states. These assessments are based on health measures of health outcomes, specifically length and quality of life indicators and health factors, including indicators related to health behaviors, clinical care, economic status and the physical environment.

With 92 counties in Indiana, a county may be ranked from 1 to 92, where 1 represents the highest ranking and 92 represents the lowest. Table 5 summarizes County Health Ranking assessments for La Porte and surrounding counties in Indiana. Table 4 below presents a summary of the County Health Ranking assessments for Blackford and surrounding counties.

Table 4: Relative Health Status Indicators for Blackford County and Delaware County - Summary

Key

In top 25% for state health status indicator	
Next best 25%	
Third best 25%	
Lowest 25% for state	

County Indicator	Blackford	Delaware	Grant	Jay	Wells	Average Ranking for Service Area
Health Outcomes	86	84	87	77	16	70
Length of Life	75	73	84	71	13	63
Quality of Life	90	89	87	76	28	74
Health Factors	78	58	71	56	9	54
Health Behaviors	81	67	80	76	11	63
Clinical Care	86	13	15	67	22	41
Social and Economic Factors	70	72	80	43	10	55
Physical Environment	40	42	12	23	21	28

Source: County Health Rankings, 2015

Blackford County ranked 86th in the state for overall health outcomes which is above the average ranking for health outcomes among the IU Health Blackford Hospital service area. Comparatively, Delaware County ranked 84th in overall health outcomes.

In preventable health factors, Blackford County ranked 78th in terms of overall health-related factors (determinants of health). Individual scores for Blackford County and the two most populous contiguous counties, Delaware and Grant, are displayed in Table 5 on page 12. For Blackford County, some specific indicators that ranked poorly included length of life (75th), quality of life (90th), health behaviors (81st), clinical care (86th) and social and economic factors (70th). Blackford County ranked higher than the overall service area for the physical environment indicator (40th).

Across all IU Health Blackford service area counties except Wells, length of life, quality of life, health behaviors, clinical care and social and economic factors ranked most consistently in the bottom quartile or bottom half of Indiana counties.

Table 5: Relative Health Status Indicators for Blackford County and Selected Contiguous Counties– Detail

Indicator	County	Blackford	Delaware	Grant
Health Outcomes		86	84	87
Length of Life		75	73	84
Premature death per 100,000		8,987	8,839	9,505
Quality of Life		90	89	87
Poor or fair health		26%	20%	19%
Poor physical health days reported in the past 30 days		5.2	4.6	4.5
Poor mental health days reported in the past 30 days		5	4.9	4.3
Low birth weight (<2500 grams)		8.60%	9.40%	9.70%
Health Factors		78	58	59
Health Behaviors		81	67	80
Adult smoking		29%	25%	29%
Adult obesity		37%	33%	33%
Food environment index 0 (worst) 10 (best)		7.6	6.6	6.7
Physical inactivity		31%	30%	31%
Access to exercise opportunities		55%	75%	47%
Excessive drinking		14%	12%	12%
Alcohol-impaired driving deaths		0%	29%	21%
Sexually transmitted infections (chlamydia) per 100,000		272	562	423
Teen births ages 15-19 per 1,000		49	25	40
Clinical Care		86	13	15
Uninsured (under age 65)		16%	17%	16%
Primary care physicians ratio of population to primary care physicians		2,500 to 1	1,129 to 1	2,101:1
Dentists ratio of population to dentists		4,160 to 1	1,807 to 1	1,920:1
Mental health providers ratio of population to mental health providers		6,241 to 1	464 to 1	576:01:00
Preventable hospital stays per 1,000		110	61	68
Diabetic monitoring of Medicare enrollees ages 65-75 that receive HbA1c		83%	85%	86%
Mammography screening ages 67-69 of female Medicare enrollees		54.70%	65.30%	68.20%
Social & Economic Factors		70	72	80
High school graduation		93%	92%	90%
Some college ages 25-44		42%	61.80%	52.20%
Unemployment ages 16 and older		8.90%	8.70%	8.80%
Children in poverty (under the age of 18)		25%	28%	33%
Income inequality ratio at the 80th percentile to income at the 20th percentile		3.4	4.8	4.4
Children in single-parent households		41%	39%	39%
Social associations per 10,000		22.4	14.7	16.2
Violent crime per 100,000		111	339	162
Injury deaths per 100,000		80	56	68

Table 5 - Continued

Indicator	County	Blackford	Delaware	Grant
Physical Environment		40	42	12
Air pollution - particulate matter in micrograms per cubic meter (PM2.5)		13.5	13.5	13.5
Drinking water violations during the past year		0	0	0
Severe housing problems with at least 1 of 4 problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities		11%	16%	13%
Driving alone to work		85%	80%	80%
Long commute - driving alone for more than 30 minutes		36%	20%	18%

Source: County Health Rankings, 2015

5.3.2 Community Health Status Indicators

The Community Health Status Indicators (CHSI) Project of the US Department of Health and Human Services compares many health status and access indicators to both the median rates in the US and to rates in “peer counties” across the US. Counties are considered “peers” if they share common characteristics such as population size, poverty rate, average age and population density.

Blackford County has 46 designated “peer” counties in 15 states, including: Carroll, Fountain, Fulton, Perry, Tipton and Vermillion counties in Indiana; Carroll, Crawford, DeWitt, Edwards, Ford, Hancock, Marshall, Piatt and Shelby counties in Illinois; and Charlevoix and Leelanau counties in Michigan. Table 6 on page 14 demonstrates the analysis of CHSI health status indicators for Blackford, Delaware and Grant Counties, with highlighting in cells that compare favorably or unfavorably to the US as a whole and to peer counties. Indicators are found to be unfavorable for a county when its rates are higher than those of the entire nation and designated peer counties and are considered favorable when the rates for the county are lower than those of the US and peer counties.

Several indicators related to mortality and morbidity that were unfavorable for Blackford County included Alzheimer’s disease, chronic kidney disease, male life expectancy, adult diabetes, adult overall health status, cancer and older adult asthma. Favorable indicators for Blackford County (where rates and percentages for the indicators in Blackford County are lower than those for the entire nation or for peer counties) included stroke, preterm births, syphilis, primary care provider access, on time high school graduation, limited access to healthy food and living near highways.

Table 6: Favorable and Unfavorable Health Status Indicators, Blackford, Delaware and Grant Counties

Key

Better – most favorable quartile

Moderate - middle two quartiles

Unfavorable - least favorable quartile

Indicator	Delaware	Blackford	Grant
Mortality			
Alzheimer's Disease	Moderate	Unfavorable	Unfavorable
Diabetes	Unfavorable	Moderate	Unfavorable
Cancer	Unfavorable	Moderate	Moderate
Chronic Kidney Disease	Moderate	Unfavorable	Unfavorable
Chronic Lower Respiratory Disease	Unfavorable	Moderate	Unfavorable
Coronary Heart Disease	Moderate	Moderate	Moderate
Female Life Expectancy	Moderate	Moderate	Moderate
Male Life Expectancy	Moderate	Unfavorable	Unfavorable
Motor Vehicle	Better	Moderate	Better
Stroke	Moderate	Better	Better
Unintentional Injury (including motor vehicle)	Moderate	Moderate	Moderate
Morbidity			
Adult Diabetes	Moderate	Unfavorable	Moderate
Adult Obesity	Moderate	Moderate	Moderate
Adult Overall Health Status	Unfavorable	Unfavorable	Moderate
Alzheimer's Disease/Dementia	Moderate	Better	Better
Cancer	Moderate	Unfavorable	Unfavorable
Gonorrhea	Moderate	Moderate	Unfavorable
HIV	Moderate	Moderate	Moderate
Older Adult Asthma	Moderate	Unfavorable	Unfavorable
Older Adult Depression	Moderate	Moderate	Unfavorable
Preterm Births	Moderate	Better	Moderate
Syphilis	Moderate	Better	Better
Health Care Access and Quality			
Cost Barrier to Care	Unfavorable	Unfavorable	Moderate
Older Adult Preventable Hospitalization	Moderate	Moderate	Moderate
Primary Care Provider Access	Better	Better	Moderate
Uninsured	Unfavorable	Moderate	Moderate
Health Behaviors			
Adult Binge Drinking	Better	Moderate	Better
Adult Female Routine Pap Tests	Moderate	Unfavorable	Unfavorable
Adult Physical Inactivity	Moderate	Moderate	Moderate
Adult Smoking	Moderate	Unfavorable	Unfavorable
Teen Births	Better	Moderate	Moderate

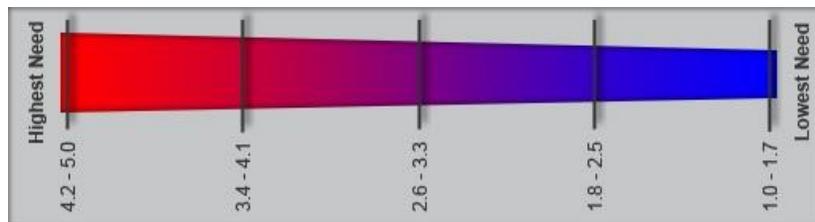
Table 6 - continued			
	Delaware	Blackford	Grant
Social Factors			
Children in Single-Parent Households			
High Housing Costs			
Inadequate Social Support			
On Time High School Graduation			
Poverty			
Unemployment			
Violent Crime			
Physical Environment			
Access to Parks			
Annual Average PM2.5 Concentration			
Housing Stress			
Limited Access to Healthy Food			
Living Near Highways			

Source: Community Health Status Indicators Project, Department of Health and Human Services, 2015

5.4 ZIP Code-Level Health Access Indicators

The Community Need Index (CNI) was created in 2005 by Dignity Health (formerly Catholic Healthcare West) in collaboration with Thomson Reuters. CNI identifies the severity of health disparities related to housing, English as a second language (ESL) and education level for ZIP codes in the United States. In addition to health indicators, CNI includes economic and structural indicators in its assessment of the overall health of a community. Scores are assigned on a scale of one to five, with one indicating the least amount of community need and five indicating the most (see Figure 3). The CNI assessments illustrate correlations between high need/high scores and high hospital utilization in specific ZIP codes. Table 7 below summarizes the CNI for ZIP codes in Blackford County.

Figure 3: Community Need Index Rating Scale



Within Blackford County, CNI scores indicate needs are moderate within both ZIP codes.

Table 7: CNI Scores for Blackford County

County	City	ZIP Code	Rank
Blackford	Montpelier	47359	3.6
	Hartford City	47348	3.2

Source: Community Need Index, 2013.

Figure 4: CNI scores



5.5 Medically Underserved Areas and Populations

The Health Resources and Service Administration (HRSA) has calculated an Index of Medical Underservice (IMU) score for communities across the US. The IMU score calculation includes the ratio of primary medical care physicians per 1000 persons, the infant mortality rate, the percentage of the population with incomes below the poverty level and the percentage of the population older than 64. IMU scores range from zero to 100, where 100 represents the least underserved and zero represents the most underserved.

Any area or population receiving an IMU score of 62.0 or below qualifies for Medically Underserved Area (MUA) or Medically Underserved Population (MUP) designation. Federally Qualified Health Centers (FQHCs) may be established to serve MUAs and MUPs. Populations receiving an MUP designation include groups within a geographic area with economic barriers or cultural and/or linguistic access barriers to receiving primary care. When a population group does not qualify for MUP status based on the IMU score, Public Law 99-280 allows MUP designation if “unusual local conditions which are a barrier to access to or the availability of personal health services exist and are documented and if such a designation is recommended by the chief executive officer and local officials of the State where the requested population resides.”³ Table 8 illustrates the areas that have been designated as MUAs or MUPs in the IU Health Blackford community.

3. Guidelines for Medically Underserved Area and Population Designation. US Department of Health and Human Services, Health Resources and Services Administration. <http://bhpr.hrsa.gov/shortage/>.

Table 8: MUAs and MUPs in the IU Health Blackford Hospital Community

Service Area	County	Medically Underserved Areas		Medically Underserved Populations	
		IMU Score	Detail	IMU Score	Detail
Primary	Blackford			60.0	Low-income population, entire county
Secondary	Grant			59.4	Low-income population, entire county
	Delaware			57.8	Low-income population, entire county
	Jay			61.9	Low-income population, entire county
	Wells				

Source: Health Resources and Services Administration, US Department of Health and Human Services, 2015.
Cells that are grey indicate that the county does not have an MUA or MUP.

All of the counties in the community service area except for Wells County had low-income populations for the entire county designated as an MUP. No counties in the IU Health Blackford service area community included designated MUAs.

Health Professional Shortage Areas

An area can receive a federal Health Professional Shortage Area (HPSA) designation if a shortage of primary care, dental care, or mental healthcare professionals is found to be present. HPSAs can be: “(1) An urban or rural area (which need not conform to the geographic boundaries of a political subdivision and which is a rational area for the delivery of health services); (2) a population group; or (3) a public or nonprofit private medical facility.” Table 9 below lists the HPSAs in the IU Health Blackford Hospital community.

Table 9: HPSAs in the IU Health Blackford Hospital Community

Service Area	County	Primary Care HPSA	Dental Care HPSA	Mental Health HPSA
Primary	Blackford	Entire County		Grant/Blackford County Mental Health Catchment Area
Secondary	Grant	Low-income population, entire county		Grant/Blackford County Mental Health Catchment Area 6
	Delaware	Entire County	Low-income population, entire county	Low-income population, Mental Health Catchment Area 6
		2 Health Centers: Open Door Health Services, Inc. and Meridian MD-North Tillotson	2 Health Centers: Open Door Health Services, Inc. and Meridian MD-North Tillotson	2 Health Centers: Open Door Health Services, Inc. and Meridian MD-North Tillotson (FQHC Look-a-Like)
	Jay	Entire county		Entire County
Wells			Entire County	

Source: Health Resources & Services Administration, US Department of Health and Human Services, 2015. Grey cells = No HSPA.

5.6 Description of Other Facilities and Resources within the Community

The IU Health Blackford Hospital community contains a variety of resources that are available to meet the health needs identified through this CHNA. These resources include facilities designated as FQHCs, public health departments and other organizations. Table 10 below lists the other facilities and resources in the IU Health Blackford community.

Table 10: Resources in Blackford and Surrounding Counties

Service Area	County	Public Health Department
Primary	Blackford	Blackford County Health Department (Hartford City, Indiana)
Secondary	Delaware	Delaware County Health Department (Muncie, Indiana)
	Wells	Wells County Health Department (Bluffton, IN)
	Jay	Jay County Health Department (Portland, Indiana)
	Grant	Grant County Health Department (Marion, Indiana)

Service Area	County	Hospital	
Primary	Blackford	IU Health Blackford Hospital, (Hartford City, IN)	
Secondary	Delaware	IU Health Ball Memorial Hospital, (Muncie, IN)	
	Wells	Bluffton Regional Medical Center, (Bluffton, IN)	
	Jay	Jay County Hospital, (Portland, IN)	
	Grant		Marion General Hospital, (Marion, IN)
			Grant-Blackford Mental Health, (Marion, IN)

Service Area	County	FQHC
Primary	Blackford	None
Secondary	Delaware	Meridian MD, North Tillotson (Muncie, Indiana)
		Open Door Family Planning Clinic (Walnut Street, Muncie, Indiana)
		Open Door Health Services (Madison Street, Muncie, Indiana)
		Open Door Health Services (Walnut Street, Muncie, Indiana)
		Southway Urgent Care (Muncie, Indiana)
		Suzanne Gresham Center Division of Meridian Services (Muncie, Indiana)
	Grant	Indiana Health Center at Marion
	Jay	None
Wells	None	

Sources: Health Resources and Services Administration, US Department of Health and Human Services, 2015; Indiana State Department of Health, Health Care Regulatory Services, 2015

6 PRIMARY DATA ASSESSMENT

IU Health Blackford’s approach to gathering qualitative data for its CHNA consisted of multiple components to identify and verify community health needs for the IU Health Blackford service area. This included the following:

- 1. Hosting a community conversation focus group with public health officials and community leaders in attendance to discuss the healthcare needs of the service area and what role IU Health Blackford could play in addressing the identified needs.
- 2. Surveying the community at large through the hospital’s website, with special effort to gather input from low income, uninsured, or minority groups.

6.1 Focus Group Findings

6.1.1 Identification of Persons Providing Input

Local leaders with a stake in the community’s health were invited to attend a focus group session held at IU Health Blackford Hospital. Attendees who participated in the focus group are listed in Table 11 below.

Table 11: Focus Group Participants

Name	Title, Affiliation
Robyn Clamme	Nurse, Blackford County Health Department
Scot Croner	Superintendent, Blackford County Schools
Ben Hodgins	Mayor, City of Blackford
Ted Leas	Regional President, Citizens State Bank
Carol Robles	Administrator/Co-owner, Hearts with Integrity
Lori Skidmore	Family Practice Physician, Health Officer, Blackford County Health Department
Megan Velasquez	Aging and Disability Resource Center Manager, LifeStream Services
Steve West	CEO, IU Health Blackford Hospital

6.1.2 Prioritization Process and Criteria

To obtain a more complete picture of the factors that play into the Blackford County community’s health, input from local health leaders was gathered through a focus group session lasting three hours. IU Health Blackford representatives mailed letters and made follow-up telephone calls inviting public health officials and community leaders to attend the focus group discussion, paying special attention to including organizations that represent the interest of low-income, minority and uninsured individuals. The goal of soliciting these leaders’ feedback was to gather insights into the quantitative data that may not be easily identified from the secondary statistical data alone. Leaders provided insights into the quantitative data and looked for needs not easily identified from the data, such as health literacy that may not be obvious when looking at population health statistics.

IU Health Blackford facilitators presented the goals and requirements of the CHNA, reviewed secondary health data including demographics, insurance information, poverty rates, county health rankings, causes of death, physical activity, chronic conditions and past needs identified during the

previous CHNA cycle. Each participant was asked to select the top five health needs. After the results were tallied, a discussion to gain consensus of the top five health needs of the community was conducted, along with current resources and gaps for each need was discussed. This was intended to inspire candid discussions and giving leaders another chance to vote for their top five needs from the list.

The focus group concluded by sharing a timeline of next steps and accomplishments since the last CHNA.

6.1.3 Description of Prioritized Needs

The focus group identified the following five needs as priorities for IU Health Blackford:

1. Obesity.
2. Smoking/Tobacco Use.
3. Behavioral Health/ Mental Health.
4. Chronic Disease.
5. Senior health.

These prioritized needs are discussed in more detail below.



1. Obesity was the top identified need within the Blackford County. Obesity throughout the county was said to be present in both adults and children by the leaders present. The available resources for fitness and nutrition are underutilized. These include the YWCA, the parks and nutrition programs through congregations and Healthy Living classes at LifeStream. f



2. Smoking and tobacco use was the second identified need in Blackford County. Members agreed that this is a significant problem in Blackford County. IU Health Blackford has programs for patients and promotes the state QuitLine but focus group participants noted that changing long-term behaviors is difficult.



3. Behavioral health/mental health/substance abuse concerns came in as the third greatest need identified in the community. Employers have trouble finding employees in Blackford because they all failed drug testing. There is no detox facility although there is an Alcoholics Anonymous group. There is a shortage of providers in the area for mental health/behavioral health services. Most psychiatrist/psychologists are only in Blackford part-time and the wait times for appointments can be lengthy. It becomes very difficult to treat outpatient issues of substance abuse, alcohol abuse and other mental disorders.



4. Chronic disease rates in the community were agreed upon by the focus group participants as something that needed to be addressed. IU Health Blackford offers free screening for some diseases and support groups and education for others (diabetes, for example). Cancer treatments such as chemotherapy and an oncologist are not available in the county. A cardiologist is available weekly for consultations for heart disease. Local health fairs, where healthy lifestyles are emphasized and mammograms and low cost PSA testing are available, are underutilized by the public.



5. Senior health was identified as the fifth priority. Focus group participants believed the specific concerns to be addressed should include assisted living, long-term care needs and nutritional assistance for shut-ins. The cost of assisted living is regard to be high. There are home care services

through LifeStream, which has some funding available to subsidize care. Federal programs for nutrition can provide frozen meals, up to 7 a week.

6.2 Community Survey Findings

IU Health also solicited responses from the general public regarding the health of the IU Health Blackford community through an online survey as well as paper versions of the survey. The survey consisted of approximately 20 multiple choice and open-ended questions that assessed the community members' feedback regarding healthcare issues and barriers to access.

A link was made available on the hospital's website via an electronic survey tool from December 2014 through June 2015. A paper version was distributed at the Hartford City Senior center, the public libraries in Montpelier and Hartford and at the Blackford YMCA. The web link was promoted at the front desk of IU Health Blackford Hospital. The survey was also sent via e-mail to participants in the needs assessment focus groups to provide an opportunity for these community leaders to pass on to their local community members.

Respondent Demographics

118 people from Blackford County participated in the survey. The majority of respondents represented by the survey were White/Caucasian (98%), which is comparable to the census data for Blackford County. The older adult population (defined as ages 45 to 64) represented over half (51%) of the total respondents. The young adult age group (defined as ages 25 to 44) was also significantly represented as well within Blackford County (20%).

111 of the 118 Blackford County respondents reported their average household income. Of the 111 people, 22% had an average household income within \$25,000 - \$49,999. About 16% earned \$50,000 - \$74,999, whereas 17% earned \$75,000 - \$99,999. Roughly 35% of the respondents reported an average household income of below \$24,999.

Survey respondents were also asked to report how they pay for health needs. Half of the respondents reported utilizing employer provided insurance. Private insurance was the second most reported payment for health needs (23%). A portion of the respondents (16%) used Medicare to cover health needs.

Given the reported demographics above, care should be taken with interpreting the survey results. The reported age demographics of the survey sample versus Blackford County's census data were disproportionate. The young adult age group was underrepresented in the survey sample, while the older adult age group was overrepresented.

Greatest Health Needs and Social Issues

This section shows responses from surveys received from Blackford County.

Survey participants were asked to select the top five health needs in their community from a list of 12 options. By frequency of selected answer choices, Blackford County respondents considered the top five health needs to be:

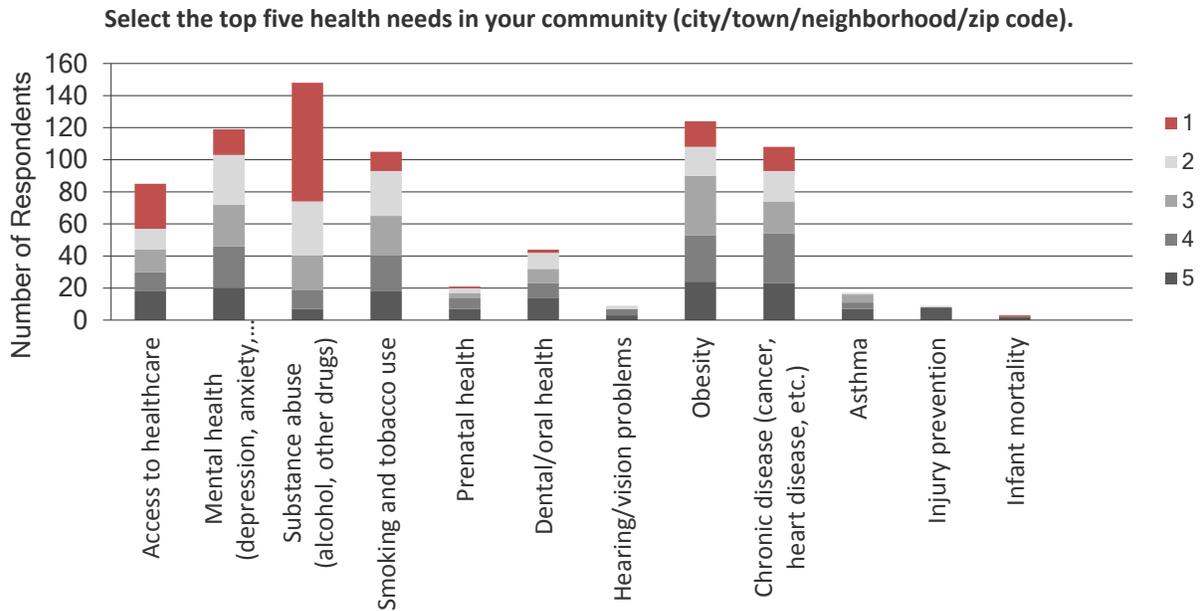
1. Substance abuse (18.3%)
2. Mental health (15.4%)
3. Obesity (14.4%)
4. Chronic disease (13.70%)
5. Access to healthcare (10.9%)

Respondents were also asked to select the top three social needs in their community. By frequency of selected answer choices, Blackford County considered the top three social needs to be:

1. Health (20.1%)
2. Poverty (17.3%)
3. Education (12.2%)

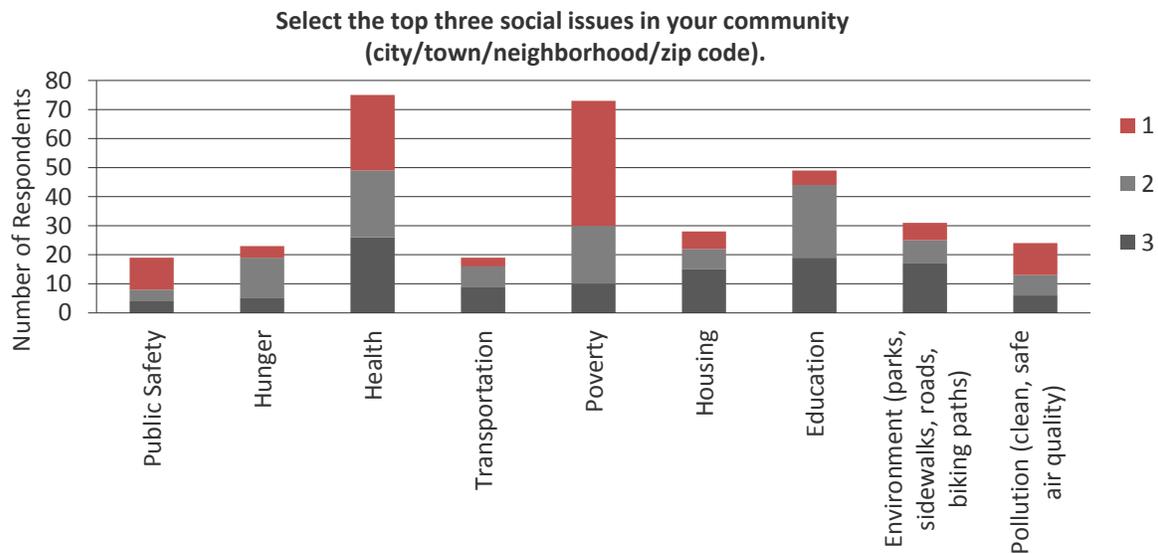
The top five health needs (Question 3) and top three social needs (Question 2) results are summarized in **Figure 5** and **Figure 6** below.

Figure 5: Top Health Needs from Survey



Source: Indiana Health Needs Assessment

Figure 6: Top Three Social Issues from Survey

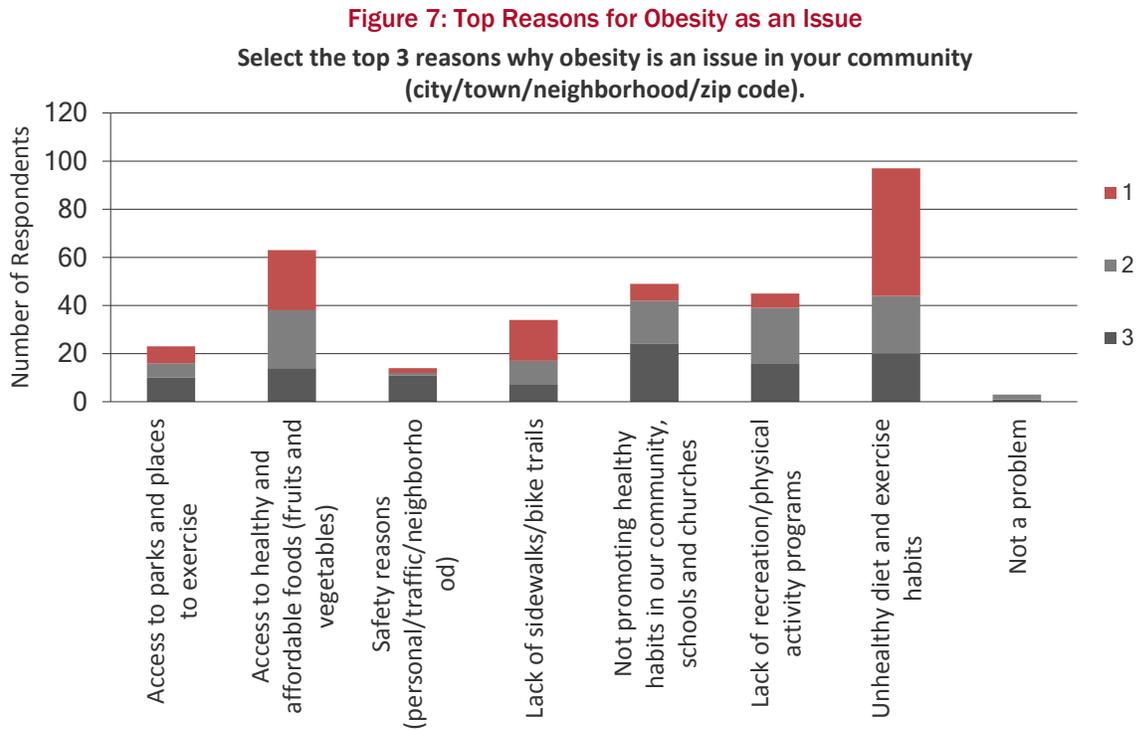


Source: Indiana Health Needs Assessment

Perceptions of Health Issues

The survey included several questions about obesity and mental health issues within respondents' communities. When asked to select the top three reasons why obesity is an issue in their community (Question 4), the three answer choices selected most often by respondents were (Figure 7 below):

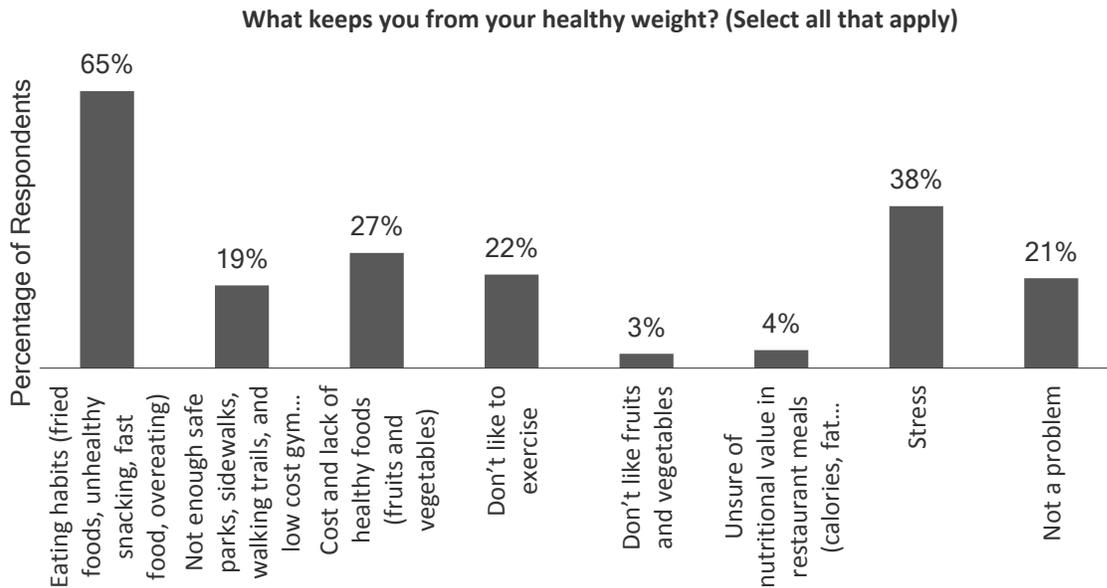
1. Unhealthy diet and exercise habits (32.1%)
2. Access to healthy and affordable foods (19.2%)
3. Not promoting healthy habits in community, schools and churches (11.4%)



Source: Indiana Health Needs Assessment

Respondents were also asked to select what reasons kept them from their healthy weight (Question 9) from a list of 8 options. Nearly two-thirds (65%) of respondents thought eating habits (fried foods, unhealthy snacking, fast food, overeating) kept them from a healthy weight. 38% of respondents felt stress impacted weight, followed by 27% attributing obesity to the cost and lack of healthy foods. Results are summarized in Figure 8.

Figure 8: Obstacles to Healthy Weight



Source: Indiana Health Needs Assessment

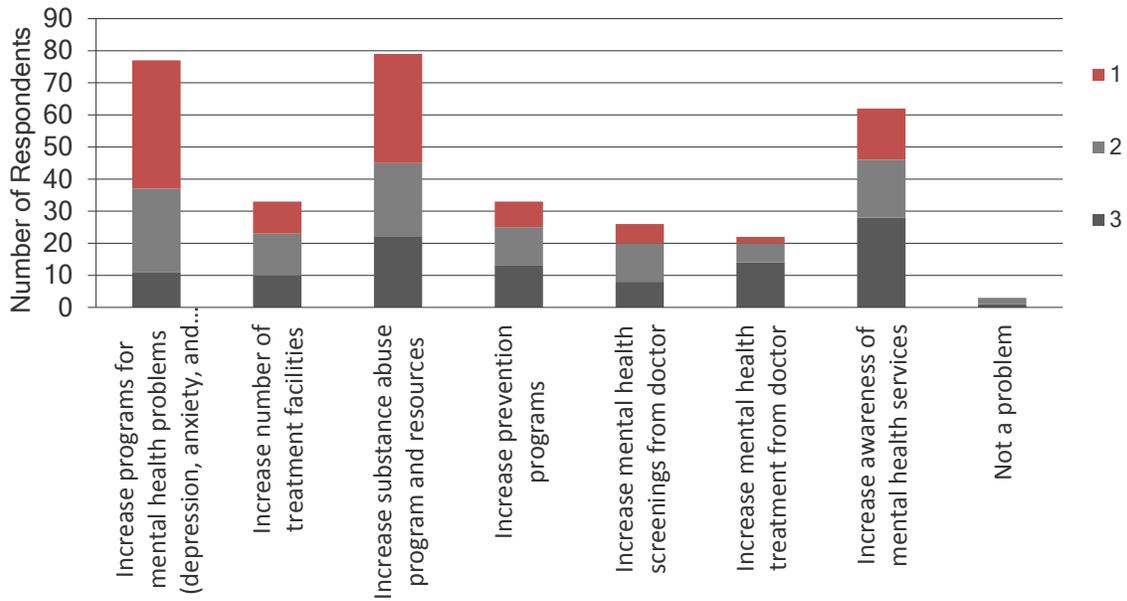
When asked to select the top three ways to improve mental health in their community (Question 5), the three answer choices selected most often by respondents were (

Figure 9 on page 25):

1. Increase programs for mental health problems (depression, anxiety and suicide) (25.8%)
2. Increase substance abuse programs and resources (24.0%)
3. Increase awareness of mental health services (15.8%)

Figure 9: Top Ways to Improve Mental Health

Select the top 3 ways to improve mental health in your community.

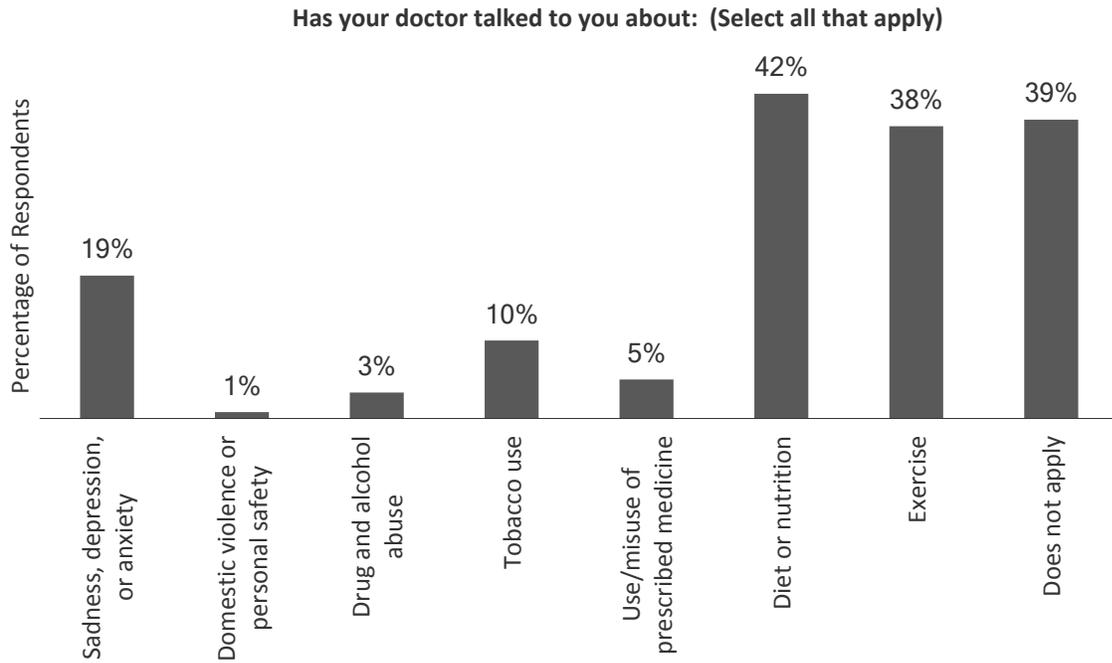


Source: Indiana Health Needs Assessment

Health Education and Access

A number of questions about health education and access to healthcare were asked in the survey. Question 10 asked to select all health topic doctors have discussed with them. About 42% of the respondents talked to doctors about diet or nutrition, while 38% discussed exercising. However, 39% of the respondents felt the question did not apply. Question 10 is summarized in Figure 10.

Figure 10: Conversations with Physicians

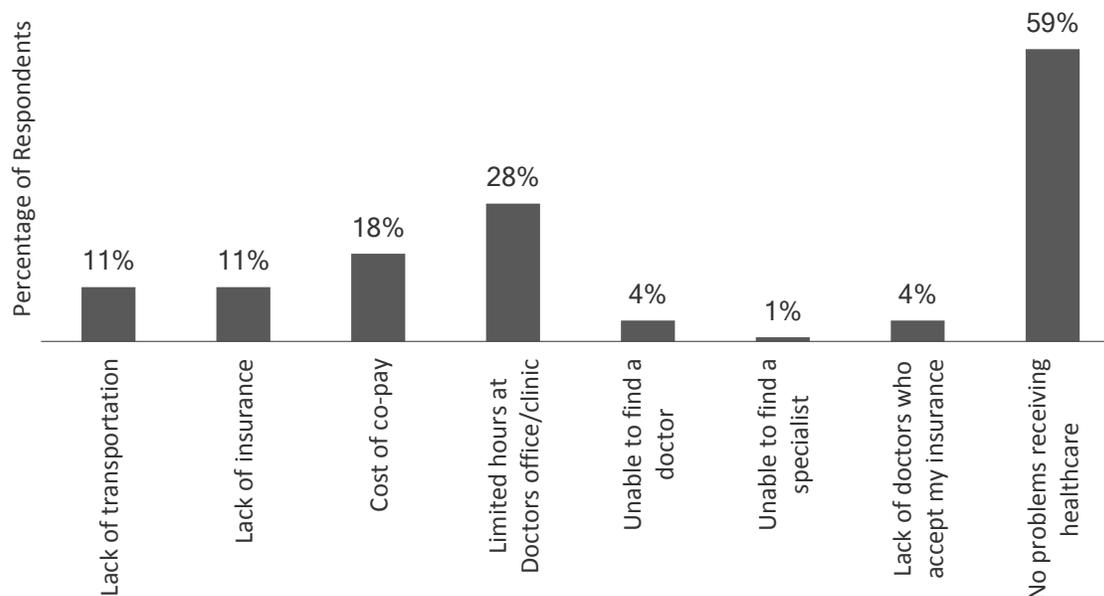


Source: Indiana Health Needs Assessment

When asked the top three challenges when receiving healthcare (Question 12), almost 6 in 10 of the respondents (59%) reported not having problems receiving healthcare. However, 18% of respondents felt the cost of the co-pay was a challenge and 28% thought limited hours at the doctor's office. Question 12 is summarized in Figure 11 below.

Figure 11: Top Three Challenges in Access to Care

What are the top three challenges for you and your household when receiving healthcare?



Source: Indiana Health Needs Assessment

7 IU HEALTH ACTIVITIES TO ADDRESS PRIORITIES

IU Health maintains several online tools and applications (apps) to assist community residents in improving their health knowledge and care. In addition, IU Health partners with numerous community organizations in healthcare, wellness, outreach and other services to address our communities' health needs. Among the community programs at IU Blackford, we list here a few examples that relate to priority needs identified in this study, specifically:

Obesity Prevention

- IU Health Blackford sponsors a health fair, with an emphasis on obesity and diabetes prevention. The October 2014 event reached more than 150 residents of Blackford County in one day at 34 different health-related displays including Purdue University Extension Family Nutrition Program; the Blackford YMCA; and IU Health Ball Cardiovascular Services, which provided stroke risk assessments.
- IU Health Blackford Hospital promotes healthy eating and increased physical activity in part through engagement with community partners such as the YMCA to offer several ongoing initiatives, including Active Afterschool, Families at the Farmers Market and a community walking club. The hospital also offers Weight Watchers classes to interested community

members, as well as providing free diabetes education classes to help people with learn how to avoid or manage the disease through food choices, exercise and weight reduction.

Infant Health Factors/Prenatal Care

- IU Health Blackford addresses this state priority in partnership with IU Health Ball Memorial Hospital in neighboring Delaware County. Working together, the two sites are part of a regional approach to reduce infant mortality, in part through the We Care Initiative. With no OB clinic currently in Blackford County, pregnant women receive care in Delaware County.

Mental Health/Substance Abuse

- Online self-assessment tools help community members with common healthcare concerns, including mental health, alcoholism, stress and other conditions. If an assessment indicates a possible concern, the individual can link to an IU Health provider. http://iuhealth.staywellsolutionsonline.com/InteractiveTools/SymptomChecker/#sc_tab1
- IU Health Blackford Hospital hosts support groups for disorders or diseases that could be associated with negative mental health, including cardiac conditions and diabetes.
- Within the region served by IU Health Blackford Hospital, a mental health counselor affiliated with IU Ball Memorial Hospital offered public sessions to present concepts of mindfulness and meditation as one approach that has been demonstrated to help patients regain self-control, restore spirituality and take a more active role in their healthcare and their lives. The program was marketed to stakeholders in Blackford and Delaware Counties.

Smoking/Tobacco Use

- The Hospital has a process in place to connect patients who use tobacco to cessation resources that can help them kick the habit. The process includes one on one counseling as well as referrals to the Indiana Tobacco Quit Line (ITQL), a free and comprehensive smoking cessation resource.
- IU Health Blackford partners with other health providers, the Blackford County Public Health department, WIC and area employers to promote awareness of the dangers of tobacco use and to encourage more county residents to stop smoking.

Access to Healthcare

- IU Health Blackford Hospital offers screening services for many life-threatening conditions and diseases. Among these are free blood pressure, pulmonary function, stroke and heart failure and skin cancer screenings. A different program in nearby Delaware County offers low cost lung cancer screenings, with a \$49 out-of-pocket cost for patients who qualify based on their health history and age.

8 CONCLUSION

IU Health Blackford used quantitative data from numerous sources and survey responses from Blackford County, plus qualitative information derived from a focus group to gather information about community needs. To assure that medically underserved were included in this CHNA, the focus group included representatives from Blackford County Public Health Department in addition to representatives from local businesses, city government and county schools, as well as members of community health organizations such as Hearts with Integrity and LifeStream Services.

To set priorities after receiving and compiling qualitative and quantitative data, IU Health Blackford used the Hanlon method. The top five identified needs after this process are:

- Obesity.
- Infant Health Factors / Prenatal Care.
- Mental Health and Substance Abuse.
- Smoking/Tobacco.
- Access to Care.

IU Health Blackford Hospital already has many services that address some of these needs, including the programs listed above. In conjunction with community partners, additional initiatives will be developed as appropriate in response to this assessment.