

Park Center 2021 Community Health Needs Assessment



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Executive Summary

As an affiliate of Parkview Health, Park Center conducted a 2021 Community Health Needs Assessment (CHNA) with the purpose of building relationships, gaining insights into community health resources, developing consensus about problems and priorities related to mental health, and gaining the commitment of community organizations to work together in improving the health of the communities served by Park Center. The majority of Park Center patients are served in Allen, Adams, and Wells Counties according to Park Center's active cases. This CHNA provides an overview and community input from these three service areas. Additionally, more in-depth Allen County data is available in the 2019 Parkview Hospital, Allen County (of which Park Center is an affiliate) CHNA report and can be accessed through the following link:

https://www.parkview.com/media/file/Final%201a%20Allen%20County%20Parkview%20%20Ran dallia%20Hospital%202019%20CHNA%20Report%20Final%20updated%20cover%2012-9-19.pdf

In 2010, the Patient Protection and Affordable Care Act introduced new reporting requirements for private, not-for-profit hospitals to maintain their 501(c) (3) tax-exempt status. The policy requires that a CHNA be conducted at least once every three years to identify unmet community health needs and to develop a plan to address prioritized health needs. This 2021 Community Health Needs Assessment was created to meet these requirements.

This assessment includes data gathered from secondary data resources, which was used to better understand service area demographics and local health outcomes. The identified community health needs were augmented with local input collected via an online community survey. Northeast Indiana healthcare and social service agency provider survey results are highlighted as well.

INTRODUCTION

This report provides an overview of the CHNA processes and methods used to identify and prioritize significant health needs of the community located in the counties where Park Center healthcare facilities reside.

DESCRIPTION OF SERVICE AREA

The Park Center service area includes Adams, Allen and Wells Counties in northeast Indiana (*Figure 1*).

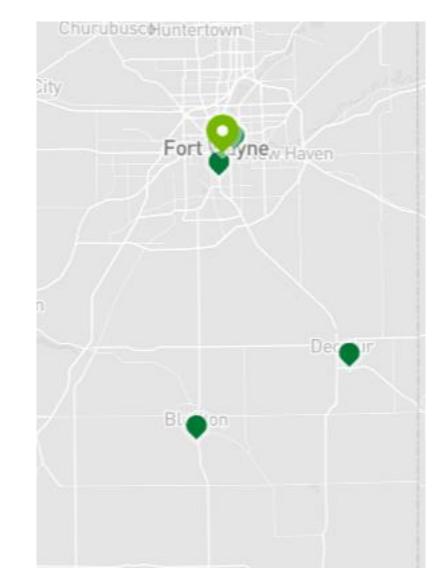


Figure 1: Primary Service Area of Park Center Facilities

THE COMMUNITY **DEMOGRAPHICS**

Population Size

Adams County, Indiana is the 71st largest county in Indiana by area, covering 338.9 square miles.ⁱ Adams County, Indiana is bordered by Van Wert County, Ohio, Allen County, Indiana, Wells County, Indiana, Jay County, Indiana, and Mercer County, Ohio.

Allen County, Indiana has the highest population in the service area (382,187) followed by Adams (35,839), then Wells (28,142) (*Table 1*). Allen County is an urban area making up most of Park Centers patients (10,695). Following Allen County is Adams County (1186) and Wells County (1071), of which are rural.

Wells County, Indiana is the 66th largest county in Indiana by total area.ⁱⁱ Wells County also recorded the lowest population (28,180) (*Table 1*) when compared to Adams and Allen County. Unlike Allen County, Wells County is a small rural farm community like Adams County.

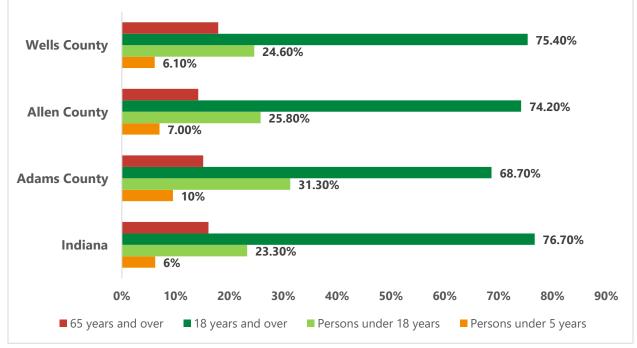
Year	Allen	Adams	Wells	Indiana
2020	385,410	35,809	28,180	6,785,528

Table 1: Population Source: Stats Indianaⁱⁱⁱ

Population Age

Population age by county does not vary significantly, and Adams, Allen and Wells are all similar in age distribution when compared to the state of Indiana (*Figure 1*).





Source: U.S. Census Bureau^{iv}

Age	Adams County	Allen County	Wells County	Indiana
0 to 19 years	11,983	105,076	7,508	1,762,365
20 to 39 years	8,133	103,940	6,433	1,767,691
40 to 54 years	5,720	67,471	5,014	1,239,655
55 to 64 years	4,188	46,050	4,032	878,036
65 years and over	5,352	56,762	5,024	1,084,472
Total Population	35,376	379,299	28,011	6,732,219

Table 2: Population by age (2020)

Source: U.S. Census Bureau^{ν}

Race and Ethnicity

Many racial and ethnic groups experience disparities in health and healthcare. These groups may face unique challenges in accessing healthcare due to linguistic, social, or cultural differences. Therefore, it is important to be cognizant of the racial and ethnic makeup of the hospital service area and to design and implement culturally competent healthcare services.

As illustrated by *Figure 2*, the racial composition of Adams, Allen and Wells County's is predominantly non-Hispanic White, which is similar to the Park Center region as a whole as well as the rest of Indiana. Allen County is the service area's only Urban area, making it the most diverse population within Park Center's service area.

Race/Ethnicity	Adams County	Allen County	Wells County	Indiana
White non-Hispanic	33,670	277,055	26,322	5,241,795
Black or African American	183	44,481	225	648,513
American Indian and Alaska Native	105	1,671	71	26,086
Asian	137	18,304	130	167,959
Native Hawaiian and Other Pacific Islander	4	154	5	3,137
Other race/ethnicity	533	16,532	314	261,312

Figure 2: Percent of Population by Race and Ethnicity

Figure 2: Percent of Population by Race and Ethnicity

Source: U.S. Census Bureauvi

Language can be a significant barrier to accessing healthcare services among immigrants. Adams and Wells County are predominantly non-Hispanic White with most of their populations only speaking English *Figure 3*. Allen County has a larger array of spoken languages that need to be considered in care delivery.

Language	Adams County	Allen County	Wells County	Indiana
English	27,282	306,931	25,563	5,760,849
Spanish	593	20,446	340	274,333
Other Indo-European languages	4036	7,627	353	154,250
Asian and Pacific Island languages	96	15,169	40	99,095
Other languages	593	2,665	340	274,333

Figure 3: Language Spoken at Home

Source: U.S. Census Bureauvii

SOCIOECONOMIC STATUS

Socioeconomic status (SES) is a powerful determinant of health outcomes. SES refers to one's access to financial, educational, and social resources. SES underlies three major determinants of health, including environmental exposure, health behavior, and health care. In addition, chronic stress associated with lower SES may increase morbidity and mortality. When using socioeconomic factors to understand potential health risks, income, poverty, employment status and educational status are typically considered.

Median Household Income

The median household income in Adams and Allen Counties are lower than the Indiana average (\$57,617), while Wells County is higher than the state average with a median household income of \$61,636 (*Table 3*).

Year	Indiana	Adams	Allen	Wells
2020	\$57,617	\$53,532	\$56,838	\$61,636

Table 3: Median Household Income

Source: USDA Economic Research Serviceviii

Year	Indiana	Adams	Allen	Wells	
2020	\$141,700	\$129,300	\$129,300	\$127,600	

Table 4: Median Housing Value

Source: United States Census Bureauix

Year	United States	Adams	Allen	Wells
2020	64%	77.1%	68.4%	78.9%

Table 5: Percentage of Home Ownership

Source: USDA Economic Research Service^x

Poverty

The percentage of the population living below poverty in Adams County (12.6%) is significantly higher than the state percentage (11.9%), while Wells County is significantly lower (7.4%) (*Figure 4*). Allen County reported to be relatively similar to the state with a rate of 10.2%.

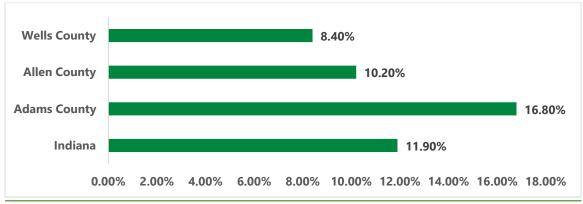


Figure 4: Persons in Poverty, percent

Child poverty occurs when a child lives in a household where the combined annual earnings of all adults fall below a federally set income threshold. Poverty elevates a child's risk of experiencing behavioral, social, and emotional and health challenges. Child poverty also reduces skill-building opportunities and academic outcomes, undercutting a young student's capacity to learn, graduate high school and more.^{xii}

Adams County has a significantly higher percentage of youth living in poverty (24.5%) than Allen (12%), Wells County (10.6%) and the state of Indiana (15.2%) as shown in *Figure 5* below.

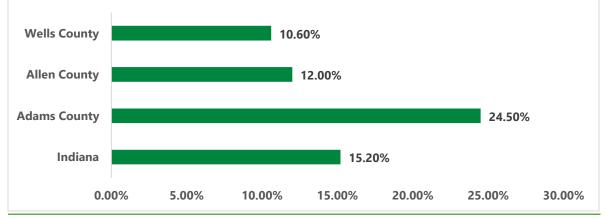


Figure 5: Children ages 0-17 in Poverty, percent (2019)

Source: USDA Economic Research Servicexiii

Source: U.S. Census Bureau: 2019 American Community Surveyxi

Unemployment

Unemployment is another important indicator for assessing social and economic status of a geographic area or population. Unemployment in the Park Center Service Area is also similar to the state overall (*Table 6*), despite each county's rate doubling from 2019 to 2020. The increased rates are likely a result of the national shut down during the COVID-19 Pandemic.

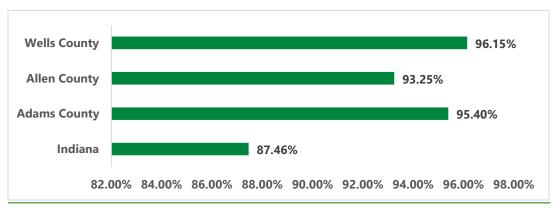
Year	Indiana	Adams	Allen	Wells
2020	7.1%	5.6%	7.7%	5.7%
2019	3.2%	2.6%	3.1%	2.7%

Table 6: Percent of Population Unemployed Source: USDA Economic Research Service^{xiv}

Education

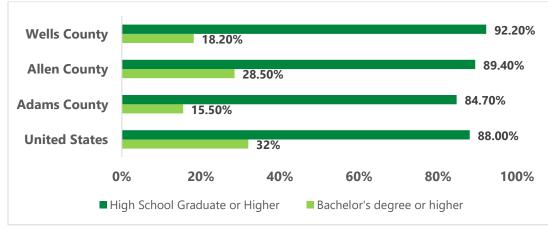
Education is a powerful predictor of other social measures. Education leads to higher incomes and lower poverty and unemployment, which in turn lead to greater economic stability. Identifying populations with limited education may help to identify areas of special health service needs.

Figure 6 and Figure 7 show the graduation rates and distribution of educational attainment for Adams, Allen and Wells County. As shown in *Figure 6*, both Adams, Allen and Wells County have significantly higher graduation rates than the average for the state of Indiana for 2020. While the high school graduation rates for Adams and Wells was high for 2020, the percentage of people living in Adams and Wells County with a bachelor's degree or higher is almost half of the average rate for the United States (*Figure 7*).











Source: U.S. Census Bureauxvi

ACCESS TO HEALTHCARE

Access to healthcare is another important social determinant of health. It is commonly measured by lack of access to primary care services and by lack of health insurance.

Health Professional Shortage Areas and Populations

According to the U.S. Department of Health & Human Services, A Health Professional Shortage Area (HPSA) is a geographic area, population group, or health care facility that has been designated by the Health Resources and Services Administration (HRSA) as having a shortage of health professionals.^{xvii} The Health Resources and Services Administration identified Adams County as a Health Professional Shortage Area (HPSA) for both Primary care *Figure 8 – green areas* and Mental Health *Figure 9 – blue areas*. While Adams, Allen and Wells County are recognized as a Mental Health HPSA, so is most of the state of Indiana, making access to mental health services more difficult. This would be true especially for those lacking transportation.

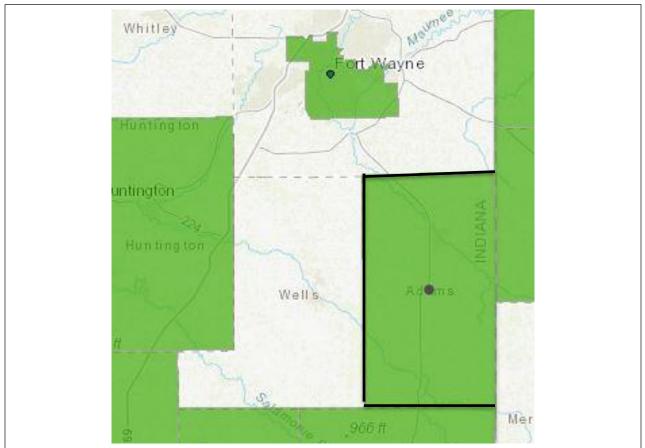


Figure 8: Primary Care Health Professional Shortage Areas

Source: Department of Health & Human Services USA (HRSA Data Warehouse)xviii

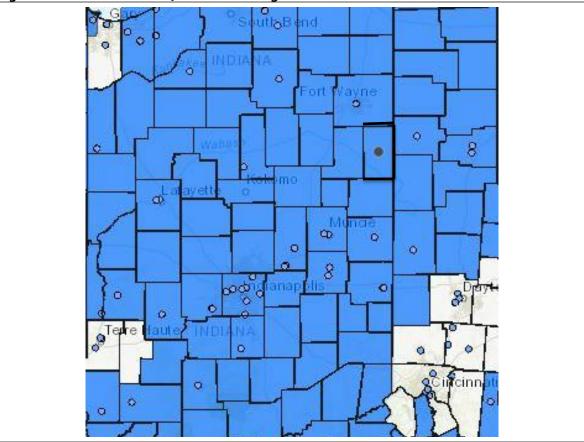


Figure 9: Mental Health Professional Shortage Areas

Source: Department of Health & Human Services USA (HRSA Data Warehouse)xix

Health Insurance

The percentage of the population without health insurance in Adams County is 14.3% which is significantly higher than Wells County (8.8%) and the state of Indiana (10.3%). Allen County is almost aligned with the state average by reporting 10.6%. *Table 9* presents the total number of people without health insurance. In addition to having a high proportion of uninsured, approximately half of Adams County's uninsured population is children.

Table 1: Health Insurance

Demographic	Adams	Allen	Wells	Indiana
Population without health insurance	6,713	31,081	1,716	578,436
Adults without health insurance	3,383	26,653	1,375	459,653
Children without health insurance	3,330	4,428	341	118,783

Source: US Census Bureau: 2019 American Community Survey^{xx}

DATA COLLECTION

The identification of health needs for the Park Center region was carried out using three sources of data: 1) an online survey of local healthcare and social services providers; 2) an online survey of community residents from Adams and Wells Counties; and 3) secondary county level data obtained from credible online sources. While we did distribute surveys in Wells County, we were not able to obtain enough feedback to report data. We were also not able to obtain enough provider responses to report specifically for Adams and Wells County, so the report instead references provider data representative of Parkview's service area in Northeast Indiana in addition to Allen County-specific data.

PROVIDER SURVEY RESULTS

The following results are from a provider survey conducted for the 2019 CHNA for Parkview Hospital, Inc. This was an online survey of health and social service providers in the seven-county area in northeast Indiana during January 2019 designed to collect provider perceptions about community health needs and concerns. The survey was designed by the Center and the Fairbanks School of Public Health both of IUPUI in partnership with Parkview Health and implemented using Qualtrics, an online survey service. The Parkview community benefit team collaborating with the leadership team distributed the survey to health and social service providers in their respective county. A total of 83 providers from Allen County responded to the survey. The survey covered aspects of the provider's work including the setting in which they practiced, the duration of time practicing in the region/county, and their perception of the chief public health concerns, barriers to care, and available resources in their communities. The majority of respondents practiced in Allen County, however 182 other providers responded from Huntington, Kosciusko, LaGrange, Noble, Wabash and Whitley County.

The original report can be found via the following link:

https://www.parkview.com/community/community-health-improvement/local-health-needs

Top Community Health Concerns (Provider Perceptions)

Providers in Allen County perceive that the top three greatest community health needs are **substance abuse services** (77.3%), **obesity** (66.7%), and **mental health** (62.7%) (*Figure 18*).

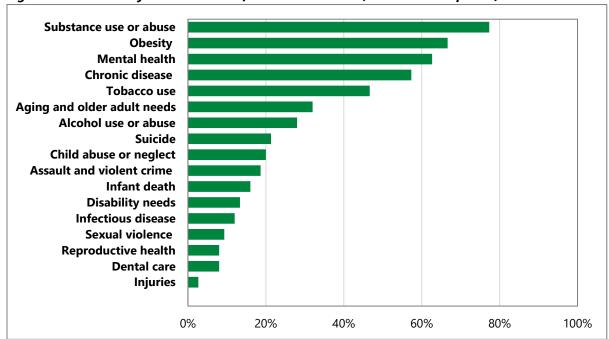
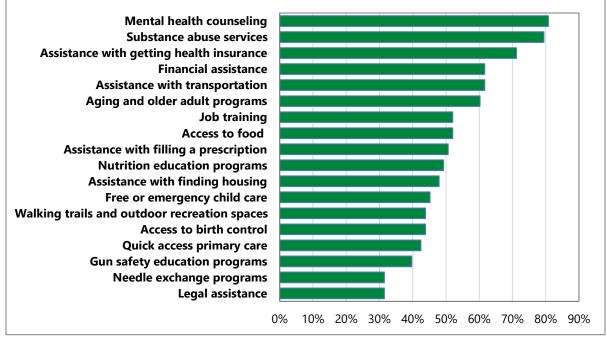


Figure 10: Community Health Issues of Greatest Concern (Provider Perceptions)

Most Important Service Needs (Provider Perceptions)

The three most important service needs identified by providers in Allen County include **mental health counseling** (80.8%), **substance abuse services** (79.5%), and **assistance with getting health insurance** (71.2%) (*Figure 19*).





Top Barriers to Care/Service Access (Provider Perceptions)

Providers in Allen County identified **cost** as the biggest barrier faced by community members when accessing care/services (81.3%). Providers also identified **education/health literacy** (49.3%), **lack of insurance** (48.0%), and **transportation** (42.7%) as major concerns (*Figure 1*).

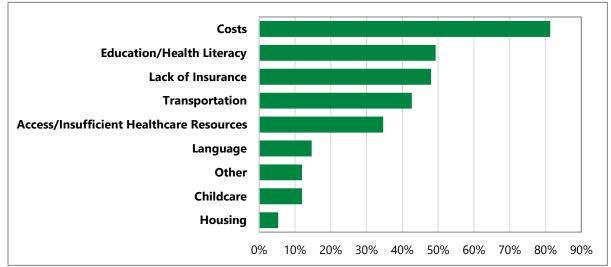
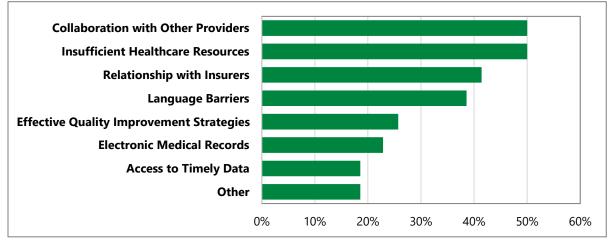


Figure 12: Top Barriers to Patients Accessing Care/Services (Provider Perceptions)

Top Barriers to Care/Service Delivery (Provider Perceptions)

Providers in Allen County identify the top barriers in care/service delivery as the **lack of collaboration or communication in community member care** (50%), **insufficient healthcare resources** (50%), and the **relationship with the insurers** (41.4%) (*Figure*)

Figure 13: Top Barriers to Providing Care/Services (Provider Perceptions)



Community Survey Results

The following results are from a community health survey conducted for this report. This was an online survey of residents from Adams County conducted in August of 2021. The survey was designed by Parkview community benefit team and the survey information was distributed through the Adams County Cares group during the August 27, 2021, meeting, which is a group comprised of local leaders collaborating to address the needs of Adams County's vulnerable populations. There was a total of 38 responses stemming from this group.

This survey was imperative based upon a comparison of the demographic, socioeconomic, and access to care data. Adams County specifically when compared to Allen and Wells County has the lowest median household income *Table 3* (\$53,532); the highest poverty percentage *Figure 4* (16.8% of population); highest child poverty rate *figure 5* (24.5% of children 0-17 years); lowest educational attainment *figure 7*; and has the highest uninsured rate among children *Table 9*. In addition to these data points, the Health Resources and Services Administration identified Adams County as a Health Professional Shortage Area (HPSA) for both Primary care *Figure 8* and Mental Health *Figure 9*.

Top Community Health Concerns

Public survey respondents in Adams County ranked **substance use** as their top (73.68%) health concern, followed by **mental health** (71.05%) (*Figure*).

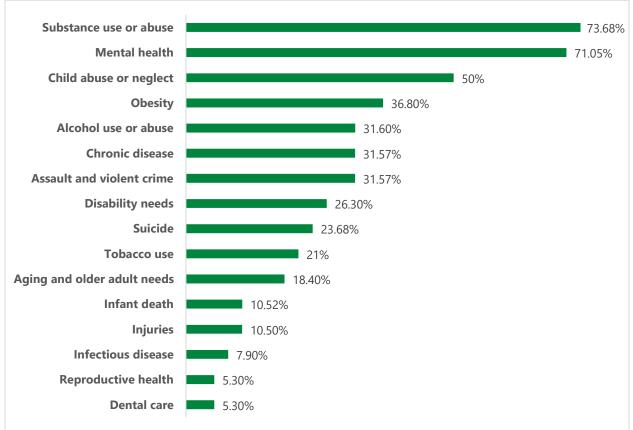


Figure 14: Top Community Health Concerns (Adams County)

Source: Park Center Survey Data

Barriers to Accessing Care

Public survey respondents in Adams County ranked **costs** as their top (87%) barrier to accessing care, followed by **inability to pay copay/deductible** (61%) (*Figure*).

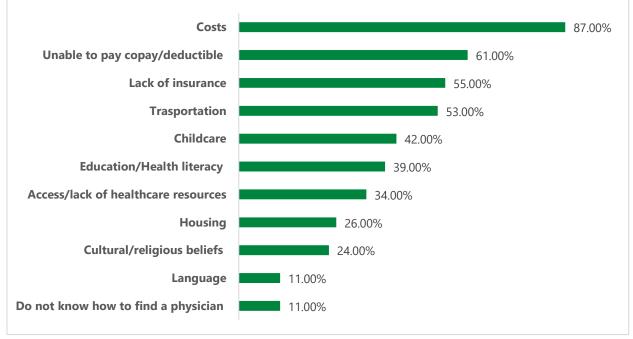


Figure 15: Perceived Barriers to Accessing Healthcare Services (Adams County)

Source: Park Center Survey Data

Social Issues Important to the Community

Public survey respondents in Adams County ranked **mental health counseling and support** as their top (76%) social need, followed by **substance use disorder services** (70.8%) (*Figure*).

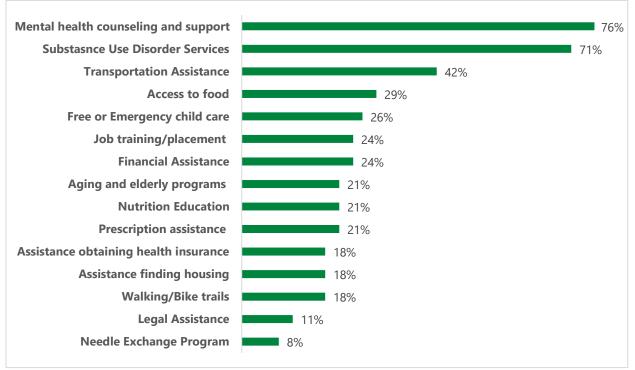


Figure 16: Greatest Social Needs (Adams County)

Source: Park Center Survey Data

2019 Allen County CHNA Community Survey

In effort to improve the community survey data available for this report, the results of the 2019 Allen County CHNA community survey were included. This data is also important to consider in addition to the Adams County community survey data because Allen County has the largest population in the service area. The original survey results can be found in the 2019 Allen County CHNA at the following link:

https://www.parkview.com/community/community-health-improvement/local-health-needs

This survey was a community phone survey conducted from April through June 2019 by the Survey Research Lab at the School of Public Health at the University of Alabama School, a partner of the Richard M. Fairbanks School of Public Health. The survey was designed to collect community perspectives on the top community health issues in the Parkview Health service area. A random, population sample of 700 individuals was selected from the seven-county Parkview Health service area.

Top Community Health Concerns

Public survey respondents in the Parkview region ranked **child abuse or neglect** as their top (80.6%) health concern, followed by **chronic disease** (70.8%) and **mental health** (67.7%) (*Figure*).

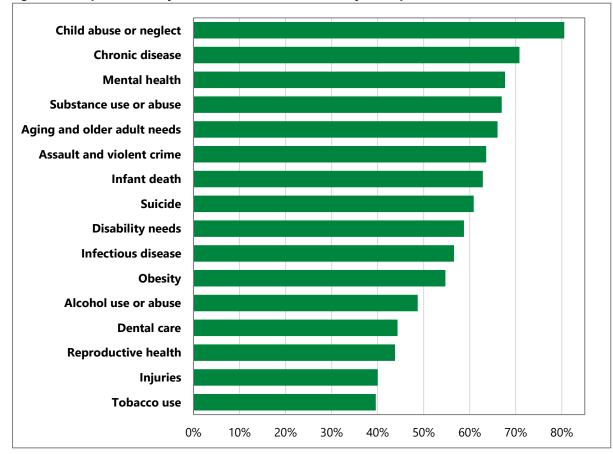
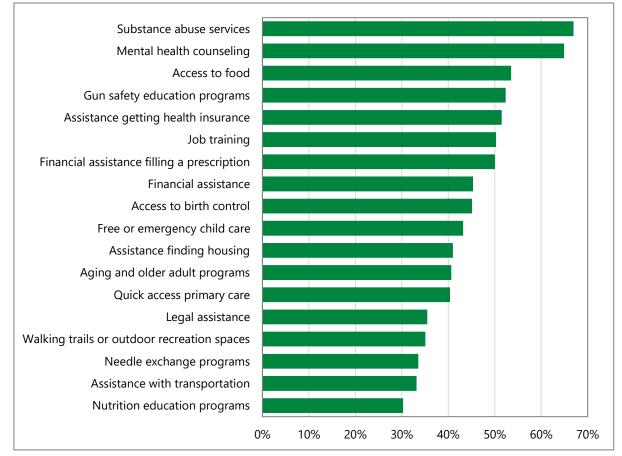


Figure 17: Top Community Health Concerns (Community Perceptions)

Social Issues Important to the Community

Substance abuse services is most frequently indicated by community respondents as a top social service issue for their community (67.0%), followed by **mental health counseling** (64.9%) and **access to food** (53.5%) (*Figure 18*).





SECONDARY DATA

Drug and Alcohol Abuse and Addiction

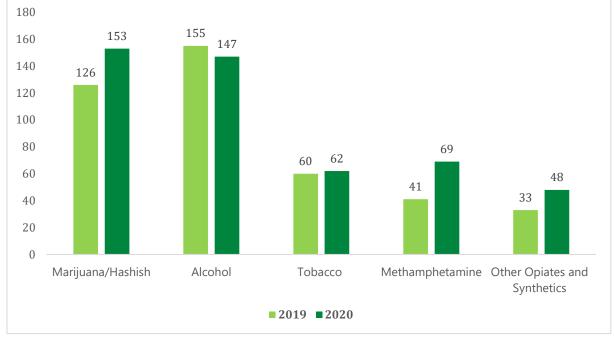


Figure 19: Top Five Substances Used in Adams County

Source: Park Center Service Population Data

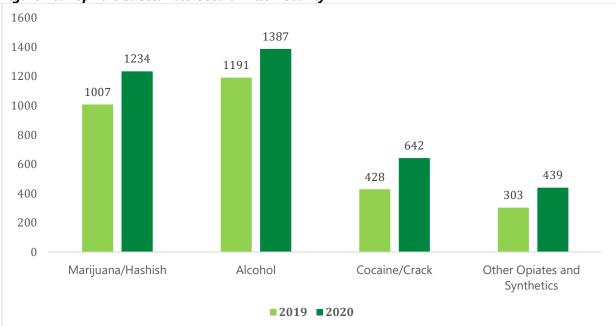


Figure 20: Top Five Substances Used in Allen County

Source: Park Center Service Population Data

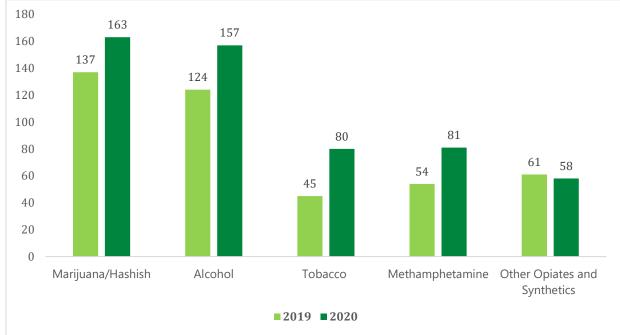
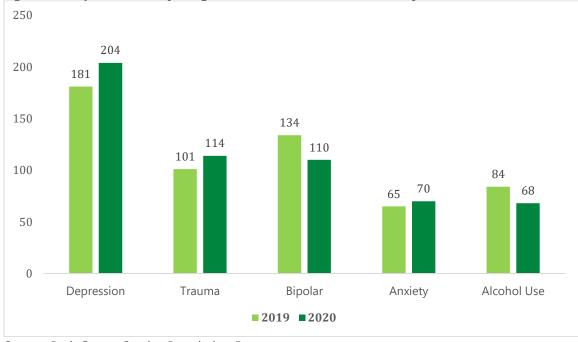


Figure 21: Top Five Substances Used in Wells County

Top Mental Health Diagnoses





Source: Park Center Service Population Data

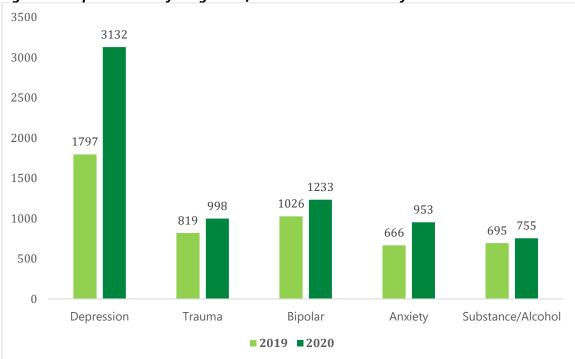


Figure 23: Top Five Primary Diagnoses for Adults in Allen County

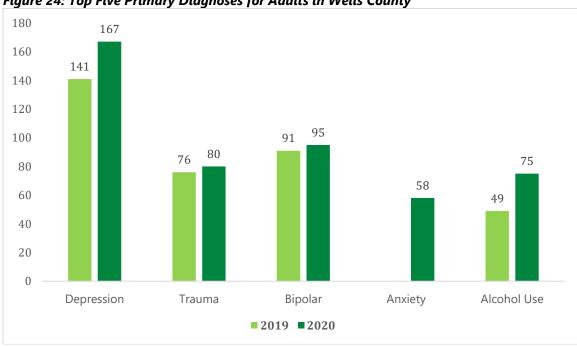


Figure 24: Top Five Primary Diagnoses for Adults in Wells County

Source: Park Center Service Population Data

Source: Park Center Service Population Data

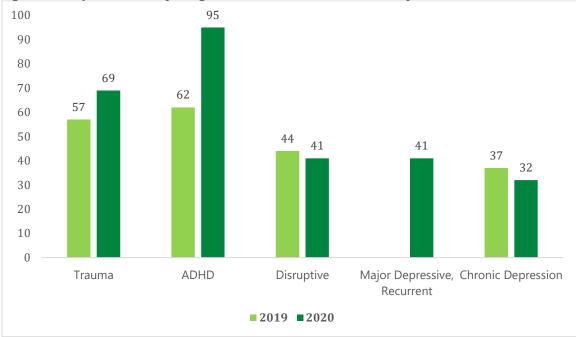


Figure 25: Top Five Primary Diagnoses for Youth in Adams County

Source: Park Center Service Population Data

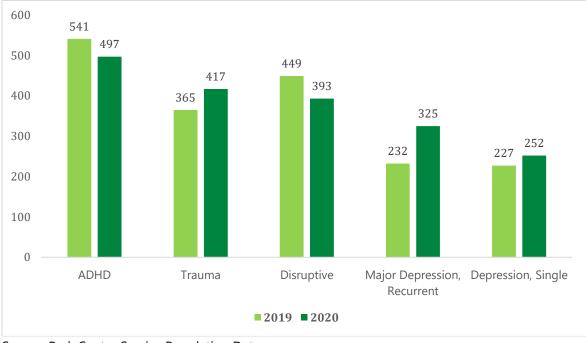


Figure 26: Top Five Primary Diagnoses for Youth in Allen County

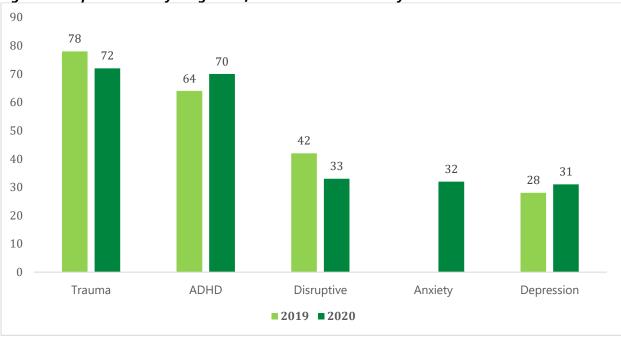


Figure 27: Top Five Primary Diagnoses for Youth in Wells County

Table 10: Counts of Patients Served that Resided in Adams County

Measure	2019	2020
Count of Adults Provided Addiction Treatment	232	226
Count of Youth Provided Addiction Treatment	13	6
Count of Pregnant Women Provided Addiction Treatment	12	6
Count of Women with Dependent Children Who Were Provided	63	51
Addiction Treatment		
Count of Patients Receiving Medication-Assisted Treatment	0	11
Source: Park Center Service Population Data		

Source: Park Center Service Population Data

Table 11: Counts of Patients Served that Resided in Allen County

Measure	2019	2020
Count of Adults Provided Addiction Treatment	2,014	2,229
Count of Youth Provided Addiction Treatment	1	0
Count of Pregnant Women Provided Addiction Treatment	39	38
Count of Women with Dependent Children Who Were Provided Addiction Treatment	685	433
Count of Patients Receiving Medication-Assisted Treatment	318	532

Source: Park Center Service Population Data

Measure	2019	2020
Count of Adults Provided Addiction Treatment	218	227
Count of Youth Provided Addiction Treatment	24	15
Count of Pregnant Women Provided Addiction Treatment	5	2
Count of Women with Dependent Children Who Were Provided Addiction Treatment		59
Count of Patients Receiving Medication-Assisted Treatment	0	19

Table 13: Percentage of Adults Reporting 14 or More Days of Mental Health Per Month

	2017	2018
Adams County	14%	17%
Allen County	14%	15%
Wells County	13%	15%
Indiana	15%	15%

Source: County Health Rankingsxi

Table 14: Ratio of Population to Mental Health Providers

	2017	2018
Adams County	2,550:1	2,100:1
Allen County	550:1	520:1
Wells County	2,010:1	1,890:1
Indiana	620:1	590:1

Source: County Health Rankings^{xxii}

RANKING COMMUNITY HEALTH NEEDS

PROCESS AND CRITERIA

Park Center provides inpatient and outpatient services exclusively treating mental, behavioral and substance use ailments. Under this condition, Park Center is best equipped to focus on mental health and substance use disorders. As such Park Center's community health priorities are mental health and substance use disorders.

SELECTED PRIORITIES

The selected priorities for Park Center are:

- 1. Substance use disorder
- 2. Mental health

For More Information

For additional information about Park Center 2021 CHNA, please contact us.

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Dylan Moore Community Benefit Coordinator Dylan.Moore@Parkview.com 260-266-0519

Board Approval

Approved by Park Center Board of Directors Executive Committee on December 20, 2021

REFERENCES

ⁱ https://data.census.gov/cedsci/profile?g=0500000US18001

" https://data.census.gov/cedsci/profile?g=0500000US18179

iii https://data.census.gov/cedsci/profile?g=0500000US18003

^{iv} http://1.https//data.census.gov/cedsci/profile?g=050000US18179

v https://data.census.gov/cedsci/table?g=0500000US18003&tid=ACSST1Y2019.S0101&hidePreview=true

vi http://1.https//data.census.gov/cedsci/profile?g=0500000US18179

vii http://1.https//data.census.gov/cedsci/profile?g=0500000US18179

viii https://data.ers.usda.gov/reports.aspx?ID=17828

^{ix}https://data.census.gov/cedsci/table?q=median%20housing%20value&g=0400000US18_0500000US18001,18003,18179

* https://data.ers.usda.gov/reports.aspx?ID=17828

xi https://www.census.gov/quickfacts/fact/chart/adamscountyindiana,wellscountyindiana,US/IPE120220

xii https://www.aecf.org/topics/child-poverty

xiii https://data.ers.usda.gov/reports.aspx?ID=17826

^{xiv} https://data.ers.usda.gov/reports.aspx?ID=17828

** https://www.in.gov/doe/it/data-center-and-reports/

xvihttps://www.census.gov/quickfacts/fact/table/wellscountyindiana,adamscountyindiana,US/PST04521979

xvii https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/workforce-shortage-areas/nhsc-hpsas-practice-sites.pdf

^{xviii} https://data.hrsa.gov/maps/quick-maps?config=mapconfig/HPSAPC.json

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** https://www.census.gov/quickfacts/fact/table/wellscountyindiana,adamscountyindiana,US/PST04521979

xii https://www.countyhealthrankings.org/app/indiana/2021/measure/outcomes/145/data

xii https://www.countyhealthrankings.org/app/indiana/2021/measure/outcomes/145/data