

Adena Fayette Medical Center Community Health Needs Implementation Strategies

2024

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Introduction

Since 1895, Adena Health System has focused on its commitment to provide patients with the best health care and personal service. Today, Adena Health includes four hospitals — Adena Regional Medical Center (ARMC), Adena Fayette Medical Center (AFMC), Adena Greenfield Medical Center (AGMC), and Adena Pike Medical Center (APMC) — and five regional clinics, with a total of 311 beds. Adena provides quality health care for nearly 400,000 residents in its nine-county, southern Ohio service region, which includes Fayette, Highland, Hocking, Jackson, Pickaway, Pike, Ross, Scioto, and Vinton counties.

Adena offers its patients leading-edge services in the areas of heart health, cancer diagnosis and treatment, women's health, children's health, and orthopedics. The skilled physicians and medical staff at Adena provide specialty services that are often found in larger, urban medical centers, including open heart surgery, da Vinci robotic surgery, cardiac intervention, cancer care, advanced orthopedic procedures, high-level MRI testing, and a Level II pediatric nursery.

Adena Regional Medical Center's exceptional care attracts more than 113,000 patients to its campus each year for approximately 600,000 visits. Adena Fayette Medical Center cares for more than 20,000 patients annually for approximately 78,200 visits.

Adena Fayette Medical Center Community – *Fayette County, Ohio*

Fayette County is located in rural, central Ohio. The county covers 407 square miles and is Ohio's 72nd largest county in terms of geographic area and 74th largest by population. More than 45% of land in Fayette is used for residential purposes, with approximately 25% used for agricultural purposes, another 25% undeveloped, and less than 5% used for other purposes (Ohio Development Services Agency, 2020).

The population of Fayette County is 28,579 (2022 County Health Ranking Study), which has steadily declined since 2010. Approximately 14,091 live in the county seat, Washington Court House. The county is a part of the 10th Congressional District and contains the population patterns and distinct economic conditions inherent of the rural, Midwest region of the U.S. These include challenges such as low educational attainment and limited economic diversification and growth.

Process Overview

As part of the Affordable Care Act, all nonprofit hospitals are required to conduct a community health needs assessment every three years to maintain compliance with IRS standards. In addition to the assessment, organizations are also required to complete and adopt implementation strategies that address the priority health needs that are revealed in the corresponding assessment.

Each of the Adena's hospitals — Adena Regional Medical Center, Adena Pike Medical Center, Adena Greenfield Medical Center, and Adena Fayette Medical Center — partners with local organizations as part of its community health efforts. These partnerships are conducted through county health coalitions located in the counties where Adena has hospitals. These coalitions include Fayette County Health Coalition, Highland Healthcare Collaborative, Pike County Health Coalition, and Partners for a Healthier Ross County.

More than 50 agencies across the four counties participate as part of these coalitions' steering committees as well as through subcommittees focused on specific issues like substance use disorder, obesity and diabetes prevention, mental health, and lung and respiratory issues. Community volunteers and consulting firms often lend additional support with data collection and analysis for community health needs assessments.

Adena Health collaborated with Fayette County Health Coalition in 2024 to complete the community health assessment. In 2025, Pike County Health Coalition, Highland County Healthcare Collaborative, and Partners for a Healthier Ross County each updated the shared community health needs assessment with the leadership and support of Adena Health. Each coalition completes a community health improvement plan the following year of the assessment. Adena Health is a partner in the development and dissemination of these improvement plans in addition to our own plan.

Given that Fayette, Highland, Pike, and Ross counties border each other, it is not surprising that the leading health issues and the top health needs prioritized by the community coalitions were the same, although they were not necessarily ranked in the same order. These included obesity and diabetes, smoking/vaping prevention and cessation, substance use disorder, mental health, child safety and wellness, and access to healthcare and services (Figure 1).

Top Adena Community Health Priorities

- **Access to care and workforce capacity**
- **Chronic disease and risk factors**
- **Behavioral health and substance abuse**
- **Cancer burden and screening**
- **Maternal, child and youth health**
- **Social and economic conditions**

Figure 1: Adena Health System 2025 Community Health Priorities

Community Health Improvement Plan

Adena Community Health & Development utilized all of the 2024 and 2025 community health assessments to create one community health strategic plan for Adena Health System. Since the health priorities from each community were the same, creating one plan provided the opportunity to leverage resources at a system level to enable programming continuity and efficiency.

The plan consisted of five primary strategies: community development, advocacy, programs and initiatives, financial support, and clinical alignment. Specific efforts and initiatives within these strategies were then developed to address the priority issues. Over the course of the three-year strategic plan, programs will be developed, refined, and/or expanded for implementation into the community (Figure 2).

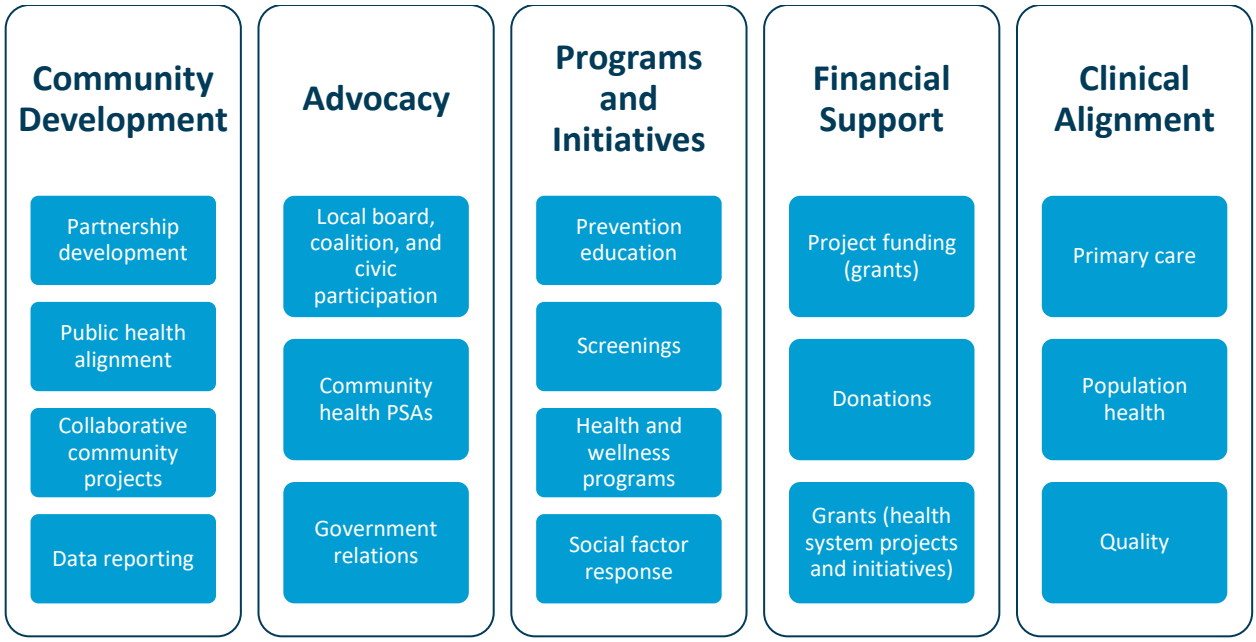
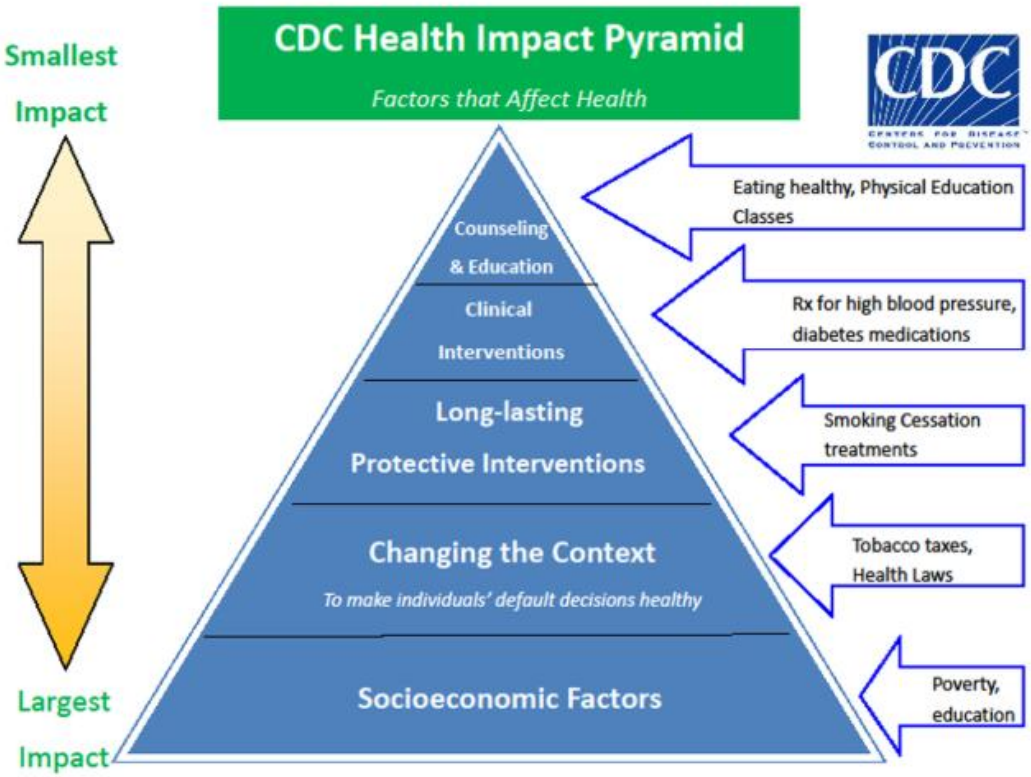


Figure 2: 2024/25 Community Health Improvement Plan (CHIP) priorities

Adena Health works with local partners, programs, and initiatives focused on creating awareness about the priority health areas as well as engaging the community and local partners with initiatives designed to address many of the underlying issues that result in poor health outcomes. This plan expanded efforts from the previous plans that focused on infrastructure and capacity building often completed in silos between Adena and our community partners. By working more collectively with our health coalitions, Adena and its partners worked to address the community health issues at the county CHIP level and with our own implementation plans. This shifted emphasis from being only clinical care, but also community development. In addition, alignment with clinical operations was maintained to ensure health equity was assessed and resources were provided to patients. The following provides an update on the impact that has been made on these health priorities since the last CHNA and corresponding plan.

Adena Regional Medical Center and the Ross County community serve as a hub for many of the Adena Community Health & Development programs and initiatives. Once programs are piloted and optimized, they are expanded into Fayette, Highland, and Pike counties to increase impact across the region. This approach has resulted in a more efficient and effective community health impact strategy. Programs are also initiated in other counties as a pilot if more appropriate.

When possible, implementation strategies are developed using the CDC Health Impact Pyramid or other evidence-based strategies.



Source: Frieden, T. A Framework for Public Heath Action: The Health Impact Pyramid. Am J Public Health. 2010; April; 100(4): 590–595.

Figure 3: CDC Health Impact Pyramid

Community Health Needs Assessment Review

The 2024 and 2025 community health needs assessments for Fayette, Highland, Pike, and Ross counties were completed through a comprehensive process of data collection and evaluation utilizing the MAPP process. Data collection was focused in counties where Adena Health System has hospitals and included primary data that was collected in each county via surveys, focus groups, and stakeholder interviews. Both qualitative and quantitative data were collected from primary and secondary sources. Data was collected in four categories: community themes and strengths, local public health system, community health status, and forces of community change. This information was compiled and evaluated by hospital and public health work teams in order to finalize

specific health-related priorities. The published assessment is intended to inform decision-makers and funders about the challenges each county faces in improving community health and the priority areas where support is most needed. The information is also useful as a planning tool for community organizations.

Methods

Quantitative and qualitative methods were used to collect information for this assessment. Quantitative data collected includes demographic data for each of the counties' populations and vital statistics such as birth and death rates and disease prevalence for the county as a whole. In addition, the CDC's social vulnerability mapping was utilized.

Qualitative data for this report was collected to provide greater insight into the issues experienced by the population. Data includes opinions expressed from a widely distributed community health survey that received more than 1,000 responses as well as community stakeholder interviews.

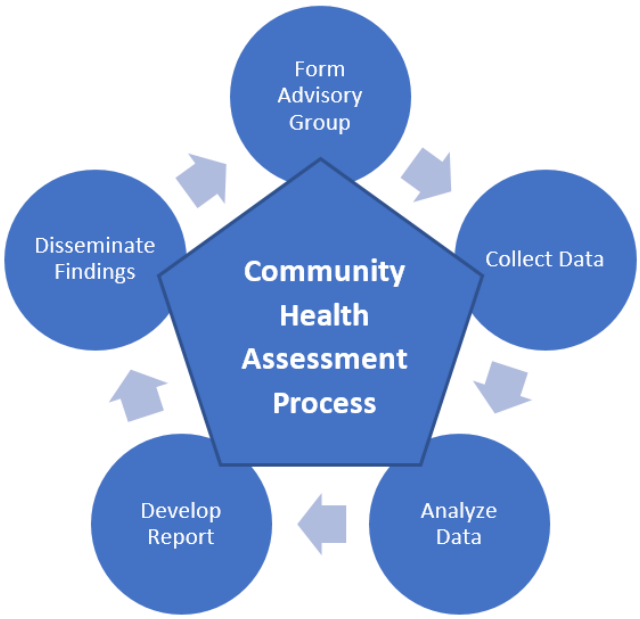


Figure 4: Mobilizing action through planning and partnerships (MAPP)

Sources

Primary and secondary data sources were used as part of the needs assessment and came from both internal and external sources. Internal data came from within the health system/hospital (patient population data) and externally from outside the health system/hospital (county and state). The primary data includes new information that may be used to investigate and help solve a problem. An example of this would be the percentage of survey participants who ranked obesity as a top 10 health problem. Secondary data are the statistics and other data already published or reported to government agencies. An example of this would be rates of childhood obesity.

Secondary data: publicly available statistics

Existing data were collected from all applicable local, state, and federal agency sources, including public health agencies (e.g., Ohio Department of Health, Ohio Department of Job

and Family Services, U.S. Department of Labor, and U.S. Census Bureau). These data included demographics, economic and health status indicators, and service capacity/availability. Local data on health infrastructure, including an inventory of all health care providers and nutrition, fitness, and social support was also reviewed as part of the CDC's social vulnerability mapping provided in each assessment. This was compared with local health system population health data to identify disparities in resource availability.

While data at the national and state level are generally available for community health-related indicators, local data from counties and cities are less accessible and sometimes less reliable. Some data from publicly available sources also lags by at least two years because it takes time for reported data to be received, reviewed, approved, analyzed, and prepared for presentation.

Primary data: community input

Primary methods used in the assessment process for collecting input from the community were a community survey and key stakeholder interviews. The same scripts were utilized across Fayette, Highland, Pike, and Ross counties with the permission of the county health departments.

Community questionnaire

A questionnaire was developed for the general public, querying respondents about the most important health needs, common barriers, and habits they use to maintain their own personal health.

The survey was distributed in electronic and hard copy by member agencies and community partners to a variety of locations in Fayette, Highland, Pike, and Ross counties where the groups of interest would best be reached. These included local food banks, social service providers, community health clinics, the public health department, Adena Health System, and physician offices. In addition, an electronic survey was made broadly available. Notices about the online version with its link were posted on member agency's websites and social media pages and emailed to members of local business groups, government, civic groups, schools, and universities.

All of the hard-copy survey data was entered into the electronic survey by Adena Health System volunteers and Ross, Pike, Fayette, and Highland county health district staff and/or interns.

Stakeholder interviews

An interview script was developed for the community leaders in the public-private sector, which asked participants their opinions about the community's strengths, major challenges, and what is needed to improve the health of the community. Twenty-four stakeholders from Ross, Highland, Pike, and Fayette counties were interviewed by representatives from the local health coalitions. Responses were then reviewed for themes and consensus results.

Key findings

As part of the community health needs assessment (CHNA) process, Adena Community Health & Development, Fayette County Health Coalition, Highland County Healthcare Collaborative, Pike County Health Coalition, and Partners for a Healthier Ross County utilized the primary and secondary data to identify priority health areas for the counties.

Unlike with previous CHNAs, community health rankings from the Robert Wood Johnson Foundation and University of Wisconsin health outcomes and factors were not available. Instead counties were profiled and demonstrated that Pike, Ross, Fayette and Highland counties continue to be among the worst ranked in health outcomes/factors in Ohio and the country.

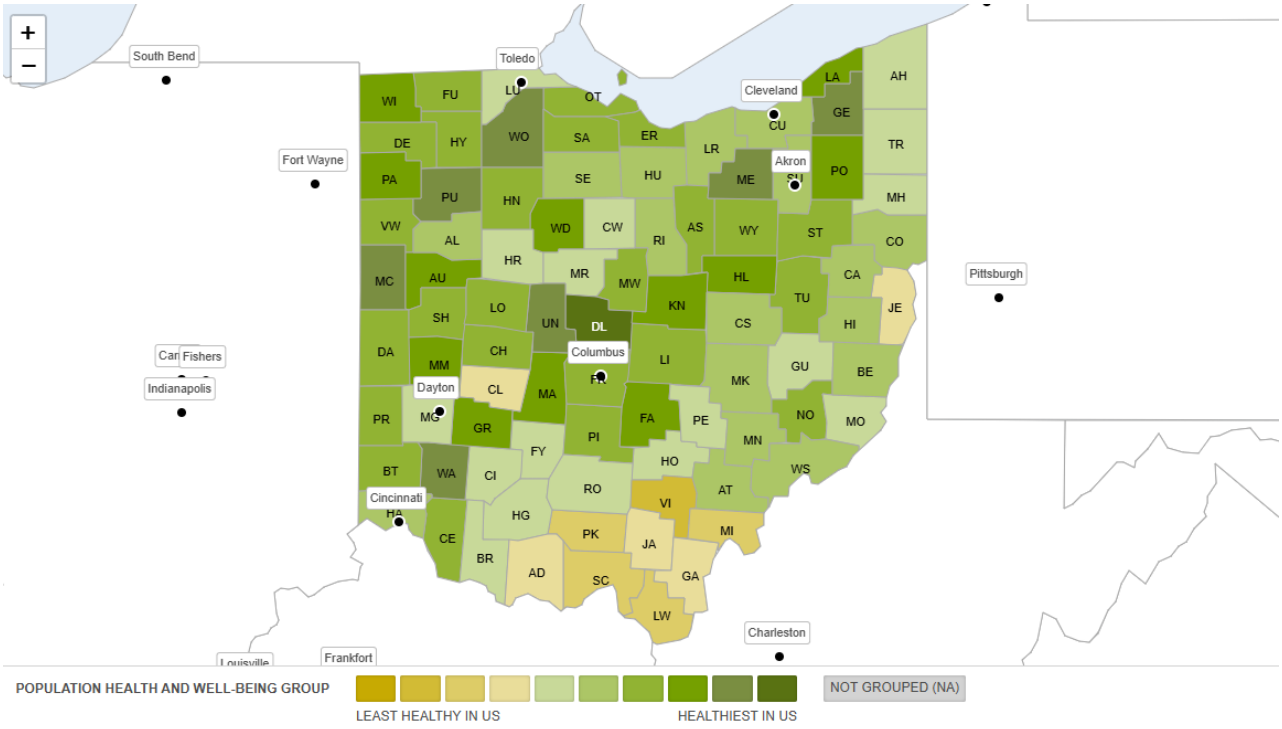


Figure 5: Ohio County Health Ranking Map (Source: County Health Rankings)

Health Outcomes Leading Causes of Death

- Cancer (all forms)
- Heart disease
- Unintentional injury
- Pulmonary-respiratory disease
- Stroke

Health Outcomes Leading Health Issues

- Substance use disorder
- Obesity and diabetes
- Depression and anxiety
- Lung cancer and COPD
- Child wellness and safety

Health Factors Leading Health Behaviors

- Substance use/abuse
- Behavioral health
- Tobacco use and vaping
- Poor nutrition
- Limited primary care utilization

Health Factors Leading Environmental Factors

- Economics and poverty
- Access to basic needs (housing, food, and transportation)
- Safety (crime and interpersonal violence)
- Health care access (preventive services)
- Green space/recreational trails

Figure 6: Top health needs and factors in Fayette, Highland, Pike and Ross counties

Implementation Strategies

Adena Health worked with the existing community health coalitions and internal partners to develop the following implementation strategies.

Combined community health assessment data from Fayette (where Adena Fayette Medical center is located), Highland (where Adena Greenfield Medical Center is located), Pike (where Adena Pike Medical Center is located) and Ross (where Adena Regional Medical Center is located) counties was reviewed at the individual, county-level data. The similarities in health outcomes and factors enabled the development of a broader, system-level approach to the implementation strategies, while still targeting efforts for each specific community.

After the initial review of the primary and secondary data, the strengths, weaknesses, opportunities, and threats experienced by each of the communities in which Adena Health has hospitals (Figure 7).

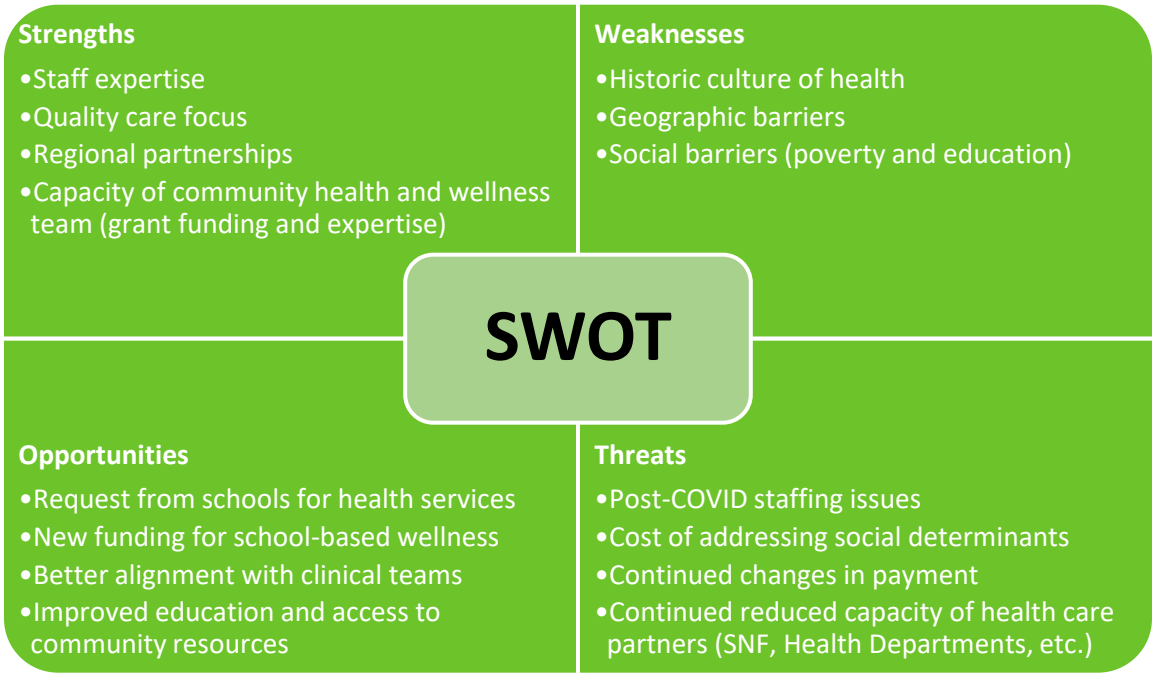


Figure 7: Adena Community Health & Development Strategic Planning SWOT

Considerations of health outcomes and factors in Fayette, Highland, Pike, and Ross counties were noted. New opportunities with schools to lead in prevention, as well as grants to improve social mitigations, were considered. In addition, the current strengths with and opportunities to optimize relationships and connections with community partners that could assist in mitigating social determinants were prioritized, as well as areas to contribute to community development efforts.

Implementation strategies

The overarching goal of Adena's implementation strategies is to see continuous improvement in the health outcomes and health factors in Fayette, Highland, Pike, and Ross counties. Progressive development of strategies, initiatives, projects, and programs that align with the CDC Health Impact Pyramid and community priorities is to accomplish changes across the region. In addition, strategies must consider health culture, education, and access to resources.

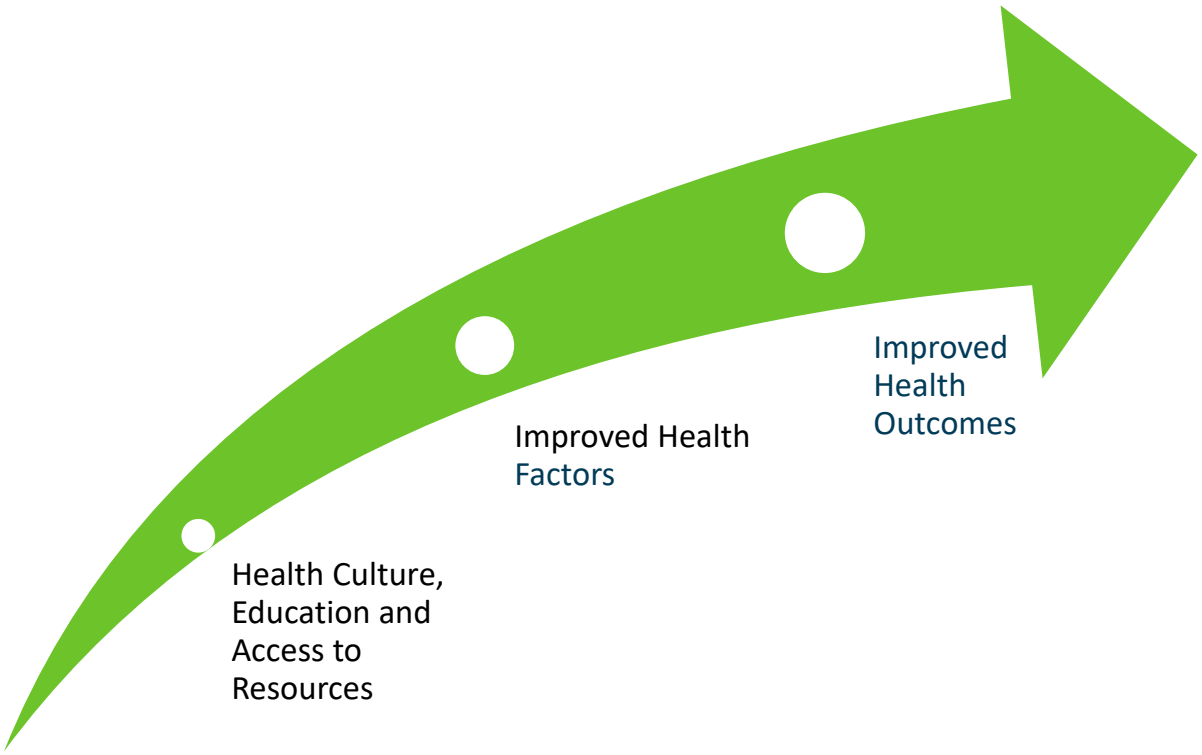


Figure 8: Health Factors and Outcomes logic model

The input provided from community, internal, multidisciplinary, and health system regional representatives was utilized to align, develop, and prioritize initiatives and programs to meet the needs of Adena Health System's region.

After considering the results from the community health needs assessment, completing the SWOT analysis, input on overlap in system-wide efforts, as well as opportunity to improve and expand, the team identified top strategic areas of opportunity for Adena to focus on in 2025-2028. Figure 10 provides a visual summary of this strategic analysis.

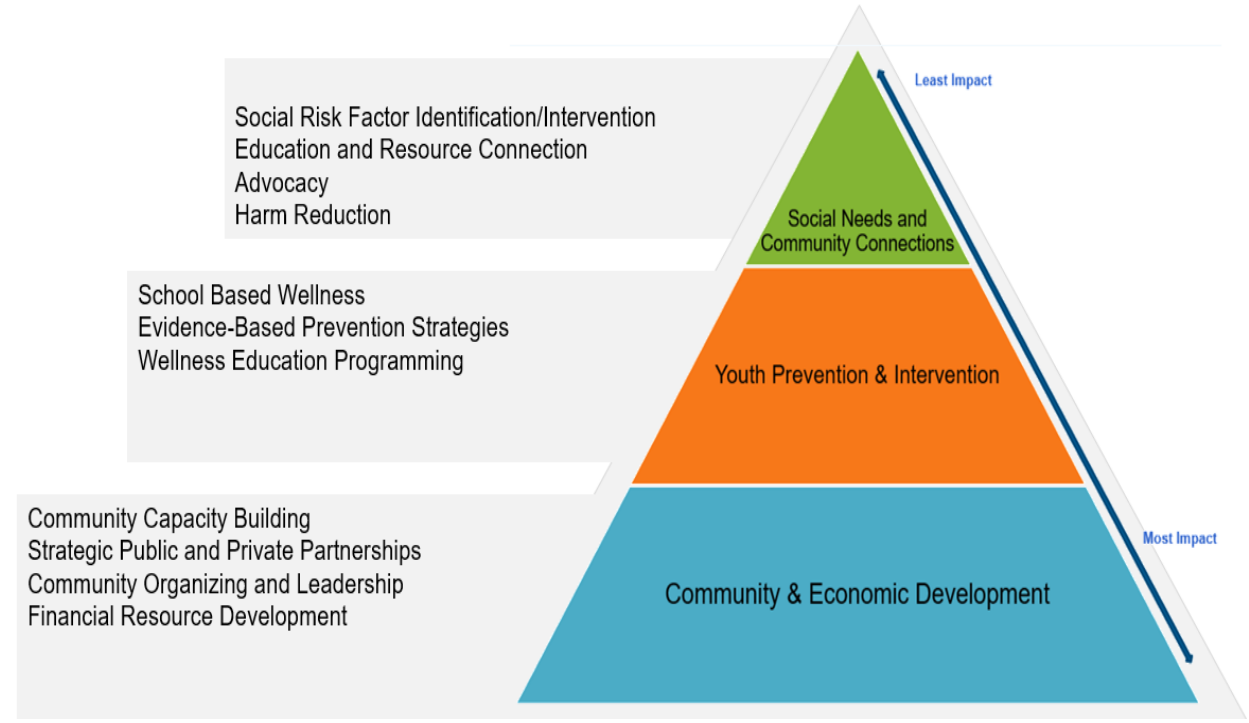


Figure 9: Adena Community Health & Development strategy 2025-2028.

Adena Health utilized the internal and external community stakeholder input to review and revise initiatives, programs, and activities. This included consideration of grant programs, partnerships, and/or sponsorships of local community programs, as well as current staffing capacity considering changes in employer workforce since the COVID-19 pandemic. Table 1 outlines the overarching strategies, target metrics, and initiatives Adena Health will invest in 2025-2028. These include, but not limited to social needs and community connections, youth prevention and intervention, and community and economic development.

Social needs and community connections

Adena Health's primary service region experiences the social and economic barriers consistent with the Appalachian region. Social determinants of health are a common barrier for many patients in the region to access care, as well as benefit from it.

Adena Health System will invest in internal resources, as well as external partnerships to ensure patients and community members interacting with the health system are provided access to and benefit from education, socioeconomic, advocacy, and care resources that increase access to health care education and services.

Adena Health will invest in the community health priority needs in all counties — Fayette, Highland, Pike, and Ross — as it provides assistance to the primary barriers that patients in the Appalachian region experience. These will include community resource information education, development of education advocates, and resources. It will also include health care provider education, referral, and follow-up resources.

Youth prevention and intervention

Adena Health's primary service region experiences low educational attainment as well as a skilled workforce shortage. Adena will partner with local and state mental health and social service agencies to implement Whole Child resources in Fayette, Highland, Pike, and Ross county school districts, as well as beyond (those requesting). The initiative will address wellness assessment, strategy, health care, mental health, and social needs of students and staff in the region.

Adena Health will invest in the school-based community health priority needs in all counties particularly Fayette, Highland, Pike, and Ross. These include prevention education; access to care; support of caregivers, including educators and community resource information education; development of education advocates; and resources. It will also include health care provider youth education, referral, and follow-up resources.

Community and economic development

Adena Health 's primary Appalachian service region experiences significant socioeconomic challenges including poverty, low educational attainment, and poor health outcomes.

Adena Health will invest in external resources, including partnerships, to ensure the community is provided access to and benefits from education, socioeconomic, advocacy, and care resources that increase access to health care education and services.

Adena Health will participate in the community economic health priority. These activities will include community resource information education, development of education advocates, and resources. It will also include health care provider education, referral, and follow-up resources.

Table 1: Adena Health Implementation Priorities – 2025-2028

Strategies	Metrics	Targets	Priority Initiatives
Social Needs & Community Connections	• Length of Stay Reduction • Readmission Reduction • Non-Emergent ED Utilization • HEDIS Measure Improvement	• Increased Social Risk/ Determinant Assessment • Increased intervention, community and CHW referrals	• School-Based Wellness and Prevention • Rural Communities Opioid Response • Social Determinants Intervention and Support Pathways • Patient and Caregiver Community Resource Connection and Education • Active Mobility Plan Collaboration • Civic Engagement, Leadership and Capacity Building • Community Health &
Youth Prevention & Intervention	• Disconnected Youth Reduction • Increased Educational Attainment	• Increased school attendance • Reduced behavior infractions • Improved performance scores	
Community & Economic Development	• Workforce development partnerships • Increased Healthcare Access • Increased Business Development • Improved Health Factors	• Regional education, economic and workforce development planning • Increased public health collaboration	

			Wellness Education

Adena Health will coordinate initiatives to drive these overarching strategies that will involve specific programs and activities aligned with the primary health issues of cancer, heart disease, mental and behavioral health, lung and respiratory issues, child safety and lifelong wellness, and access to health care and social services. Tables 2-6 provide additional detail.

Table 2: Adena Health System Cancer-Related Programming and Activities

HEALTH PRIORITY: Cancer			
	Initiatives	Programs	Strategic Partners
Social Needs & Community Connections	Community Health & Wellness Education	Free lung screenings	Fayette, Highland, Pike, and Ross County Health Departments
		LiveStrong	Fayette, Pike and Ross YMCAs
		Health education – Just Walk and community speaker events	Fayette, Ross County YMCAs, Other community partners Cancer Walk Run held annually by Adena Health
Youth Prevention & Intervention		School-based vaping and tobacco use	Fayette, Highland, Pike, and Ross

		prevention education	County Health Departments
Community & Economic Development			

Table 3: Adena Health System Heart Disease-Related Programming and Activities

HEALTH PRIORITY: Heart Disease			
	Initiatives	Programs	Strategic Partners
Social Needs & Community Connections	Community Health & Wellness Education	Cooking Matters classes	County OSU Extension Offices
		Dining With Diabetes	County OSU Extension Offices
		Community education on heart screening education and exercise. Includes Just Walk and other events.	Fayette and Ross County YMCAs, Libraries Community health fairs
		Diabetes Prevention	Fayette, Pike and Ross County YMCAs
	Social Determinants Intervention and Support Pathways	Food Rx fresh produce vouchers	Fayette, Pike, and Ross County Farmers Markets
Youth Prevention & Intervention	School-Based Wellness and Prevention	Nutrition education	County OSU Extension Offices, Health department collaborations

Community & Economic Development	Active Mobility Plan Collaboration	Regional mobility plan	OVRDC and associated partners

Table 4: Adena Health System Mental & Behavioral Health-Related Programming and Activities

HEALTH PRIORITY: Mental and Behavioral Health			
	Initiatives	Programs	Strategic Partners
Social Needs & Community Connections	Community Health & Wellness Education	Community education on 988 and resources	ADAMH, Health coalitions
		Mental Health Screening	Adena Medical Group
	Rural Communities Opioid Response Program (RCORP)	SUD navigation services	HRSA
		Peer Recovery Expansion Efforts	Community Action of Ross County, Fayette County Community Action
Youth Prevention & Intervention	School-Based Wellness and Prevention	Body Safety Dating Violence Prevention and Education	Nationwide Children's Hospital; Garden Family Advocacy Center
		Signs of Suicide Training	Nationwide Children's Hospital
		Drug and Alcohol Prevention Education	Paint Valley ADAMH Board MADE Program

		Youth Mental Health First Aid Training (for educators)	Paint Valley ADAMH Board
Community & Economic Development	Civic Engagement, Leadership and Capacity Building	Awareness of mental and behavioral needs in community to address recovery friendly programming	Health coalitions in each community; HRSA

Table 5: Adena Health System Child Safety and Lifelong Wellness-Related Programming and Activities

HEALTH PRIORITY: Child Safety and Lifelong Wellness			
	Initiatives	Programs	Strategic Partners
Social Needs & Community Connections	Community Health & Wellness Education	School District Health & Wellness Assessment and Strategic Planning	Nationwide Children's Hospital, Integrated Services, Paint Valley ADAMH Board
Youth Prevention & Intervention	School-Based Wellness and Prevention	Adena School Based Mobile Health Clinic	Adena Medical Group
		Telehealth Care	Adena Medical Group
		Sports Medicine Program	Adena Orthopedic and Spine Institute
Community & Economic Development	Civic Engagement, Leadership and Capacity-Building	Adena Career Pathways Program/AIM	OSU Extension, Workforce partners

Table 6: Adena Health System Access to Healthcare and Social Supports Related Programming and Activities

HEALTH PRIORITY: Access to Care and Social Supports			
	Initiatives	Programs	Strategic Partners
Social Needs & Community Connections	Social Determinants Intervention and Support Pathways	Community Health Worker and Peer Recovery Supporter ED Integration	Adena Medical Group, Adena Regional Medical Center, Adena Fayette Medical Center, Adena Greenfield Medical Center, and Adena Pike Medical Center
	Patient and Caregiver Community Resource Connection and Education	Community Resource Guide; Weekly Resource Update	
Youth Prevention & Intervention			
Community & Economic Development	Civic Engagement, Leadership, and Capacity Building	Advocacy of health and social factors affecting our region	Adena Health External Affairs team with support from other interested parties such as OHVN

Additional Initiatives and Resources

While Adena Health has targeted programs toward many of the significant priority health needs identified in the CHNA, there are also other initiatives and resources that address these – and other – health concerns in the community.

Adena family medicine residency clinic

The Adena family medicine residency clinic is a hospital clinic providing affordable, quality health care. The clinic pairs accessible primary care medical services provided by physician interns and residents of Adena Graduate Medical Education program, family and internal medicine preceptors, and a certified nurse practitioner also providing services to patients in the clinic. For more information, go to: http://www.adena.org/locations/department.dT/residency-clinic

Hope Clinic of Ross County

The Adena Health System provides both financial and volunteer resources to the Hope Clinic of Ross County. Hope Clinic provides free medical, dental, and vision care to uninsured individuals one evening per week at its location in Chillicothe. It also has a charitable pharmacy program. More than a dozen Adena nurses and physicians volunteer their time at the clinic. The clinic will support patients from across the region.

Community health programs

Adena Health offers community health programs and events in various locations throughout the year to help our community lead healthier lives through wellness education and the prevention of illness and injury. Topics include but are not limited to the following: cancer, diabetes, heart disease, bone and joint care, childbirth, multiple sclerosis, stroke, and wellness. Following these health seminars, an evaluation form is distributed to request feedback about both the content of the program as well as the speaker. It also asks for other topics of interest and general feedback.

Community events

Adena Health participates in general health fairs/community events, employer health fairs, and senior health fairs, often organized by other community organizations. At the general health fairs/community events, Adena provides bone density screenings, “Ask the Doctor,” diabetes information, pediatricians — general information, and geriatricians — general information. There is no invasive testing, e.g., blood sugar, cholesterol, HIV testing, at any of these events.

Approval of CHNA and Implementation Strategies

The board of trustees of the Adena Health System and the Adena Fayette Medical Center, approved the adoption of these implementation strategies and of the Community Health Needs Assessment completed in collaboration local health partners. The document is available upon request and on Adena Health's website.