



Introductory Page

Witham Health Services gathered information and assistance with its Community Health Needs Assessment during 2018 and posted the report in May 2019. The 2018 Community Health Needs Assessment (2018 CHNA) can be located on the Hospital website's "Home Page" under "About Us – Learn More".

A Community Health Needs Assessment (CHNA) is a systematic, data driven approach to determining the health status, behaviors and needs of residents of a community.

Witham Health Services, in cooperation with other community organizations, conducted a report for the Boone County area in the fall of 2018. The purpose of this assessment is to identify major health problems, gaps in services and other factors which may contribute to less than optimal health status for residents of our community. The CHNA includes an appraisal of the community's issues, but it is much more than a health assessment alone. The CHNA emphasizes the community's health assets, that is, the people and the resources already available in the community. With this method, members of the community and decision-makers can see where the community is now (health status) and what the primary concerns of the community are (the issues).

Providing the safest, highest quality, cost-effective care possible to our patients is our primary mission at Witham Health Services. But we also believe our responsibility reaches beyond the patients who pass through our doors and understand that the healthier communities are empowered communities. That is why Witham initiated conversations with a non-biased third party, Professional Research Consultants, Inc. (PRC) to conduct this assessment. PRC is a nationally-recognized healthcare consulting firm with extensive experience conducting Community Health Needs Assessments.

From the time we first opened our doors, we've always allocated a significant amount of our income to meeting the needs of the community. With the goal of a healthier community in mind, this report identifies opportunities to continue our commitment to the health of our community.

Executive Summary

Witham Health Services conducts a Community Health Needs Assessment to evaluate the health of the community, identify high priority health needs and develop strategies to address the needs of the community. While the 2018 Community Health Needs Assessment was coordinated by Witham, the data collected was from a collaborative result of several community residents,



Witham Health Services

2018 Community Health Needs Assessment and Implementation Strategy

representatives and organizations, including physicians, The Boone County Health Department, The Boone County Community Clinic, mental health organizations, non-profit leaders, educational institutions, the pastoral community and other community leaders.

Definition of Community Served

The Boone County study area is defined as each residential ZIP code comprising the county, including 46052, 46071, 46075, 46077 and 46147.

This community definition was determined because a majority of Witham's patients originate from this area.

Demographics of the Community

Boone County has a population of 65,875 (2017). It is predominantly non-Hispanic white at 93.4%. As throughout the state and nation, our population is aging, with 13.0% age 65 and older. This is projected to increase in the coming years, as is the need for services to meet the health needs of this older population.

Median household income is well above the state average at \$82,670; however 5.7% of our population remains below the poverty level.





2018 – Community Health Needs Assessment Information for the "2018 Community Health Needs Assessment" (referred herein as "2018 CHNA").

1.501(r)-3(b)(1)(ii)	Assess the health needs of that community:
	Identify significant health needs of the community, prioritize those health needs, and identify resources potentially available to address those health needs.
Health Needs	The 2018 CHNA report includes a "Summary of Findings" on page 17-18 list eleven (11) significant health needs in the community, but does not prioritize the needs.
	A written plan has been adopted by the governing body prioritizing the needs and identify which ones will be addressed and which will not be addressed by the
	Hospital. Page 219-220 of the 2018 CHNA report does provide resources available to help address the significant needs identified.
1.501(r)-3(b)(1)(iii)	In assessing the health needs of the community, solicit and take input received from persons who represent the broad interest of the community, including those
	with special knowledge of or expertise in public health:
	All of the following sources were solicited for input: public health department; medically underserved, low-income, and minority populations or those that
	represent the members of this group. There were no written comments on most recently conducted 2015 CHNA and implementation strategy.
Time Period	The 2018 CHNA data time period were as follows:
	 Key informants were surveyed online from October 22 – November 27, 2018.
	 Telephone surveys were solicited in October 22 – November 27, 2018.
Written Comments	No comments were received from the public regarding the 2015 Community Health Needs Assessment.
1.501(r)-3(b)(1)(iv)	Document the CHNA in a written report that is adopted for the hospital facility by an authorized body of the hospital facility:
() () () (The report must be written and adopted (approved) by an authorized body of the hospital facility.
	The report must include: a definition of community served; description of process and methods used to conduct the CHNA; describe solicitation of input; description
	of prioritized significant health needs and process and criteria to identify the needs as significant; resources potentially available to address the needs; and
	evaluation of impact of any actions taken since the immediately preceding CHNA.
CHNA Adoption	The 2018 CHNA reports were presented to the governing body in April 2019. The governing body approved the 2018 CHNA and Implementation Strategy at the
	April 24, 2019 Board of Trustees meeting.





Prioritization Process

There are 20 health issues included in the community health needs assessment.

Community stakeholders were asked to rate the degree to which these health issues impact their community. (pg. 37)

The areas of opportunity included in the implementation strategy were determined by input and benchmark data provided by:

- 2018 Community Health Needs Assessment provided by Professional Research Consultants (PRC)
- Key Informant Rankings of the 20 health issues (Page 37, 2018 CHNA Report)
- 2018-2020 CHIP report from the Boone County Health Department
- Hospital Administration and Board of Trustees

2018 Health Issues (listed alphabetically)	2018 Key informant Ranking	CHIP Priority Areas	Addressing	Not Addressing
Access to Health Care Services	19		See Implementation Strategy	
			Not a significant need but Witham	
			views this as a priority as the	
			community healthcare provider.	
Cancer	9	*	See Implementation Strategy	
Dementia, Including Alzheimer's Disease	7	*	See Implementation Strategy	
Diabetes	3		See Implementation Strategy	
Family Planning	11			Not addressing in the 2018-2021 Implementation
				Strategy plan, #11 out of 20.
Heart Disease and Stroke	6		See Implementation Strategy	
Hearing & Vision	18			Not addressing in the 2018-2021 Implementation
				Strategy plan, #18 out of 20.





Prioritization Process (Continued)

HIV	15			Not addressing in the 2018-2021 Implementation
	13			Strategy plan, #15 out of 20.
Immunization & Infectious Disease	17			Not addressing in the 2018-2021 Implementation
	_,			Strategy plan, #17 out of 20.
Infant Health	13			Not addressing in the 2018-2021 Implementation
				Strategy plan, #13 out of 20.
Injury & Violence	8			Not addressing in the 2018-2021 Implementation
				Strategy plan, #8 out of 20.
				Other Boone County agencies address this.
Kidney Disease	20			After completing the 2015 CHNA Witham hired a
				Nephrologist. Since the community did not rank this
				as a major problem and it is #20 out of 20 we are not
				addressing in the 2018-2021 Implementation Strategy
				plan.
Mental Health	2	*	See Implementation Strategy	
Nutrition, Physical Activity & Weight	4	*	See Implementation Strategy	
Oral Health	10			Not addressing in the 2018-2021 Implementation
				Strategy plan, #10 out of 20. Dentist in the
				community are more equipped to address this need.
Potentially Disabling Conditions (Arthritis,	16		See Implantation Strategy	
Osteoporosis & Chronic Back Condition)				
Respiratory Diseases	14			Not addressing in the 2018-2021 Implementation
				Strategy plan, #14 out of 20.
Sexually Transmitted Diseases	12			Not addressing in the 2018-2021 Implementation
				Strategy plan, #12 out of 20.
Substance Abuse	1	*	See Implementation Strategy Plan	
Tobacco Use	5	*	See Implementation Strategy Plan	





2015 - 2018 Actions

Actions taken from the 2015 CHNA include the following:

Access to Health Services: Appointment Availability, Ongoing Source of Medical Care, Routine Medical Care (Children)

- . Witham physician practices offer an appointment on patient's first call
- ii. Acute patients same day
- iii. Non-acute patients within 3 days
- iv. Refer to Witham Convenient Care when needed appointment type not available
- v. Expanded appointment availability by increasing the number of adult primary care providers
- vi. Expanded appointment availability by increasing the number of pediatric primary care providers
- vii. Provided resources for patients to obtain health insurance

Cancer Deaths: Lung Cancer, Prostate Cancer, Female Breast Cancer

- . Renovated Cancer Institute to better serve the needs of our community
- ii. Acquired state of the art equipment TrueBeam Linear Accelerator
- iii. Acquired new PET/CT for cancer treatment mapping
- iv. Acquired new 3DMammography machine
- v. Provided cancer support education, classes and support groups to the community
- vi. Provided prostate cancer screenings
- vii. Provided skin cancer screenings
- viii. Support Boone County Cancer Society and American Cancer Society
- ix. Increased awareness that screening mammograms are covered at no additional charge to insured patients
- x. Promoted the Indiana QUIT line

Female Breast Cancer Incidence: Early Detection

- i. Provided \$49 screening mammograms
- ii. Sent mailers and publications to Witham's market area
- iii. Sent reminders (electronic or regular mail) for routine mammograms
- iv. Partnered with Boone County Cancer Society for community cancer programs





2015 - 2018 Actions (Continued)

Dementia Including Alzheimer's Disease

- . Provided/promoted education to the community and caregivers re Alzheimer's management and available resources
- ii. Provided Alzheimer Support Group classes to the community
- iii. Hired two Neurologists

Diabetes: Prevalence if Borderline/ Pre-Diabetes

- i. Offered community diabetic education classes
- ii. Educated community on the diabetic services offered at Witham Health Services
- iii. Provided Blood Pressure screenings at community outreach programs
- iv. MD's referred pre-diabetic pts for education regarding prediabetes management and prevention
- v. Installed Rapid A1-C Screenings in office
- vi. Hired additional Endocrinologist and support staff

Heart Disease Deaths and Stroke Deaths

- i. Provided state of the art medical intervention to save lives of acute cardiac distress
- ii. Provided \$49 Heart Scans
- iii. Increased Cath lab services
- iv. Hired a Witham Cardiologist
- v. Hired 2 Witham Neurologists
- vi. Continued to receive Cardiology Services through St. Vincent Medical Group
- vii. Provided Educational materials





2015 - 2018 Actions (Continued)

Mental Health – Symptoms of Chronic Depression and Suicide Deaths

- . Provided Depression Screenings at Senior Expo
- ii. Provided follow-up to those reporting depression symptoms on Health Risk Assessment
- iii. Hired Witham Psychiatrist
- iv. Developed a partnership with Integrative Wellness
- v. Partnered with community mental health organizations to improve identification and treatment of mental health issues that lead to suicide
- vi. Provided the required depression screening PHQ9 for any patient on pain medication (Do No Harm Law)
- vii. Provided depression management & education to community residents
- viii. Developed Education materials for use in community

Nutrition, Physical Activity and Weight

Obesity Adults

- i. Provided education regarding obesity
- ii. Hired additional Endocrinologist
- iii. Hired additional Diabetic Educator
- iv. Promoted Active lifestyles by offering Silver Sneakers, Rock Steady Boxing and Tai Chi for Health to community
- v. Provided community health and wellness programs such as Cooking for Wellness

Childhood Obesity: Meeting Physical Activity Guidelines, Year-Round Recreational Opportunities for Youth, and Children's Screen Time

- i. Physicians have parents and child complete physical activity questionnaire
- ii. Provided Fitness Grams to area schools with results and recommendations to families, composite results to schools, education provided regularly to schools about good nutrition and fitness
- iii. Educated the community at events throughout the year about childhood obesity, Play 60, and limiting screen time
- iv. Promoted physical activities with sponsorships and promotional items given: Jump ropes, chalk, playing cards, balls, Frisbees
- v. Promoted 5K and relays in the community to encourage physical activity
- vi. Partnered with YMCA to promote activities





2015 - 2018 Actions (Continued)

Difficulty Accessing Fresh Produce

- i. Partnered with Boone County's Nutrition and Education Program Purdue Extension to promote the Farmer's Markets and gives access to buying fresh produce
- ii. Promoted Farmer's Markets located in Whitestown and Lebanon
- iii. Promoted "This Old Farm" for purchasing fresh produce, vegetables and meats

Substance Abuse: Drug Induced Deaths, Seeking Help for Alcohol/Drug issues, Illicit Drug Use in Past Month

- i. Inventoried available resources to address local substance use
- ii. Shared availability of local resources to the public at community events and at monthly at Boone County Healthy Coalition Meetings
- iii. Expanded counseling services to improve access to needed services Hired Witham Psychiatrist
- iv. Developed a partnership with Integrative Wellness
- v. Cooperated with law enforcement in provision of NARCAN for overdose persons.
- vi. Continued to educate physicians, staff and community on the "Do no harm" law
- vii. Provided Pain Clinics- Addiction Therapy, Interventional Pain management
- viii. Provided Suboxone clinic
- ix. Partnered with Boone County Substance Abuse Task Force to create and implement plan to improve scope of local services.
- x. Assisted in securing needed medical management for substance abuse to include physician champion and other providers.
- xi. Continued to explore collaborative approach with local agencies in development of opioid rehab clinic.

Tobacco Use; Current Smoker, Awareness of Indiana Quit Line

- i. Educated the community on dangers of smoking
- ii. Educated the community on Quit Line
- iii. At MD visits:
 - Patient smoking status noted in medical chart
 - Pt is educated about harm of smoking
 - Referral made to Indiana Quit Line with patient consent
- iv. Physicians questioned parents about smokers in the house and initiated referrals
- v. Educated physicians on vaping and in turn they educated patients



Implementation Strategy

Below is the action plan to provide specific actions, planned resources, anticipated impact and planned collaboration to address the needs identified in the 2018 Community Health Needs Assessment (CHNA).

The plan was reviewed and adopted by the governing body at the April 24, 2019 Witham Health Services Board of Trustees Meeting.

Helpful definitions: Age adjusted death rate = deaths per 100,000 population. The common convention is to adjust the data to common baseline age distribution.

Substance A	buse Key Informant Rai	nkings of Identified Ar	eas of Opportunity	/ 2018 #1 of 20 Are	eas 20	015 #1 of 14 Areas		
А	rea of Opportunity	Impact/Goal	Short Term (1-3 years)	Long Term (4-7 years)	Healthy People 2020	Implementation Strategy	Hospital Resources/ Community Partners	Evaluation Method
Unintentional Drug-Related Deaths	Boone County age adjusted rate is 19.1 for unintentional drug related deaths which is higher than Indiana rate of 17.4 and higher than Healthy Populations 2020 target of 11.3.	Statistically significant increase over time Increased from age adjusted rate of 14.4 in 2015 to 19.1 in 2018, a \rightarrow of 4.7 age adjusted rate. Overall goal: Fewer drug related deaths.	Next CHNA to report age adjusted death rate as ≤ 17.4 deaths to compare to Indiana rates.	Death rate ≤ US death rate of 14.3.	11.3	 Continue to share the availability of local resources to the public Expand counseling services to improve access to needed services Peers in ED Cooperate with law enforcement in provision of NARCAN for overdose persons (CONTINUED) 	 Physicians/Providers Schools and School Resource Officers Law Enforcement Mental Health Agencies serving Boone County Boone County EMS Witham Toxicology Indiana State Medical Association (CONTINUED)	CHNA 2021





Excessive Drinker	Boone County's reported rate for excessive drinking is 20.3% as compared to the 2015 rate of 16.3% which is a 4% increase.	Boone county has a 4% increase in reported excessive drinking from the 2015 rate of 16.3%. We are better than the US rate of 22.5 % and the HP2020 rate of 25.4%. However the US is showing a downward movement from 2015 of 23.2% and we are not. Overall goal: Respondents to report decreased rate	Next CHNA to report rate of ≤ 16.3%.	Boone County's Reported rate of excessive drinking will continue to be less than the US and the HP2020 rates.	25.4 %	•	Continue to educate physicians, staff and community on the "Do no harm" law Continue to provide Pain Clinics-Addiction Therapy, Interventional Pain management Continue to provide SubOxone clinic Partner with Boone County Substance Abuse Task Force to create and implement plan to improve scape of	•	Boone County Substance Abuse Task Force Boone County Health Department Boone County Mentoring Witham Physicians Dr. Gatzimos Dr. Jones Dr. Mayrose Kevin Boone, NP Quick Response Team	CHNA 2021
Illicit Drug Use in Past Month	Boone County's reported rate for use of illicit drugs in past month is 3.4%. Despite rankings below HP2020, Key Informants ranked it #1 area of opportunity in 2018 and 2015 and #2 area in 2012.	Respondents to report decreased rate of excessive drinking. Rate increase over time, increased from 1.6% in 2015 to 3.4%, a ↑ of 1.8% in 2018. Overall goal: Decrease illicit drug use.	Boone County's reported rate of illicit drug use in past month will be ≤ 2.4%.	Boone County's reported rate of illicit drug use in past month will be ≤ 1.6% which was CHNA 2015 reported rate.	7.1% use of illicit drugs	•	implement plan to improve scope of local services Support needed medical management for substance abuse Support transitional programs (CONTINUED)			





Ever sought Help for Alcohol/ Drug Issues	Boone County rate for seeking help for alcohol/drug issues is 3.6.% and US rate is 3.4%.	Increase % of persons seeking help for alcohol/ drug problem to a rate of ≥3.6%. Overall goal: Increase the number of users that seek help.	Next CHNA to report > 4%.	Boone Co rate for seeking help for alcohol/ drug problems ≥ 5%.	none	 Explore collaborative approach with local agencies in development of opioid rehab clinic Partner with law enforcement and community agencies to educate public on impact of drinking. 	(Same as Above)	CHNA 2021
Tried to obtain Professional Help for Substance Abuse in past year but was unable to obtain it	Boone County rate for seeking help for alcohol/drug issues but unable to obtain is 0.8 % in 2018 as compared to 0.2% in both 2012 and 2015.	In 2018 0.6% more people report seeking help and are not able to obtain help over the 2015 rate. Overall goal: Increase the number of people able to obtain professional help for substance abuse.	Boone County's reported rate of seeking but unsuccessful in obtaining professional help for substance abuse will be ≤ 0.5 %.	Boone County's reported rate of seeking but unsuccessful in obtaining professional help for Substance Abuse will be ≤ 0.2% as reported in the 2015 CHNA.	none	 Educate public on addictive behaviors Support DARE, Teen Challenge and other substance abuse education programs available to school age children 		





Mental Heal	th Key Informant Ra	nkings of Identified A	Areas of Opportun	ity 2018 #	2 of 20 ar	eas 2015 #4 of 14 a	reas	
А	rea of Opportunity	Impact/Goal	Short Term (1-3 years)	Long Term (4-7 years)	Healthy People 2020	Implementation Strategy	Hospital Resources/ Community Partners	Evaluation Method
Symptoms of Chronic Depression	Boone County reports 29.9% display symptoms of Chronic Depression (2+ Years) as compared to US rate of 31.4%. There is no IN or HP2020 benchmark.	3.7 % Increase of persons reporting symptoms of chronic depression from 2015 rate of 26.2%. Overall Goal: Respondents will report decreased depression symptoms.	Boone Co will report ≤ 26.2% as displaying symptoms of Chronic Depression (2+ Years).	Maintain report of chronic depression to < 26.2%.	none	 Depression Screenings at Senior Expo HRA follow-up to those reporting depression symptoms Require depression screening PHQ9 for any patient on pain medication (Do No Harm Law) 	 Witham Providers Witham Wellness InWell Aspire Boone County Mental Health Boone County Health Department Riggs Health Boone County Boone County 	CHNA 2021
Suicide Deaths	Boone County has an age adjusted death rate of 15.8 which is greater than both the IN rate of 14.7 and the US rate of 13.0. The HP2020 rate is 10.2.	Boone County has a 0.2 decrease in age adjusted suicide deaths from 2015 rate of 16.0. Indiana (个0.4) and US (个0.3) have reported (CONTINUED)	Report age adjusted death rate for suicide to ≤ 14.7 which is the current IN rate.	Boone Co will report age adjusted death rate of 13.0 which is the current US rate.	10.2	Provide depression management & education to Boone County residents (CONTINUED)	 Mentoring Sylvia's Child Advocacy & Lifeline Program Cummins Behavioral Health The Cabin (CONTINUED) 	



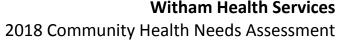


Suicide Deaths (Continued)		increased rates in the same time period. Overall goal: Decrease suicide deaths in Boone County.				 Partner with mental health organizations to improve identification and treatment of mental health issues such as depression & anxiety. Partner with mental 	 School Resource Officers Purdue Extension Krames 	CHNA
Fair/Poor Mental Health	Percent of Boone County that describe their mental health as "Fair/Poor" is 17.5% which is higher than the US rate of 13.0%.	Boone County has a 9.3% increase in "fair/poor" mental health as compared to the 2015 rate of 8.2%. The US rate declined 1.1% from 11.9% in 2015. Overall goal: Fewer respondents to report "Fair/Poor" mental health.	Boone County will report ≤ 13% that will describe their mental health as "fair/poor".	Boone County will report ≤ 8.2% that will describe their mental health as "fair/poor".	none	health organizations to improve identification and treatment of mental health issues that may lead to suicide Support QPR Training (Question, Persuade, and Refer)		2021





Diabetes	Key Informant Rankings of	Identified Areas of O	pportunity 2018	3 #3 of 20 Areas	2015	#5 of 14 Areas		
Ar	rea of Opportunity	Impact/Goal	Short Term (1-3 years)	Long Term (4-7 years)	Healthy People 2020	Implementation Strategy	Hospital Resources/ Community Partners	Evaluation Method
Prevalence of borderline/pre-diabetes	Boone County has an 8.6% rate of pre-diabetes as compared to US rate of 9.5%. There is no IN or HP2020 benchmark. Age Adjusted death rate for diabetes has increased from 20.4 in 2015 to 29.1 in 2018. (Age adjusted rate per 100,000 persons) Most impact will be to address prevalence of borderline/pre-diabetes.	Boone County reports a ↑ 1.1% of prediabetes from the 2015 data. Current trend in US and Boone County shows increase in prevalence of borderline/prediabetes. Overall Goal: Decrease prevalence of borderline prediabetes.	Report a rate of ≤ 7.5% for pre-diabetes.	Maintain a rate of adults reporting pre-diabetes to ≤ rate for US.	none	 Refer pre-diabetic patients for education/programs regarding prediabetes management and prevention Continue Rapid A1-C Screenings in office Provide education on pre-diabetes, signs and symptoms 	 Witham Wellness InWell Physicians/Providers Dieticians and Nurse Educators Witham Family YMCA Community Events 	CHNA 2021

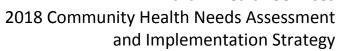


and Implementation Strategy



Nutrition, Ph	ysical Activity, & Weight	Key Informant Ran	kings of Identified	Areas of Opportu	nity 2	018 #4 of 20 areas 2015	#3 of 14 Areas	
A	rea of Opportunity	Impact/Goal	Short Term (1-3 years)	Long Term (4-7 years)	Healthy People 2020	Implementation Strategy	Hospital Resources/ Community Partners	Evaluation Method
Obesity (Adults) BMI ≥ 30.0	Boone County's reported obesity rate is 33.7% which is higher than the IN rate of 32.5%, and the US rate of 32.8% and the HP2020 target rate of 30.5%.	Boone County has a 1.3% increase in adult obesity from 2015 rate of 32.4 %. Indiana rate has ↑0.7% and US has ↑3.8% in the same time period. Overall goal: Decrease % of obese adults in Boone County.	Decrease % of obese adults to IN rate of 32.5%.	Boone County to achieve goal of HP2020 rate of 30.5%.	30.5%	 Education regarding harm of obesity Promote healthy lifestyles through outreach opportunities Promote Active lifestyles by offering Silver Sneakers to community Promote active lifestyle by offering Rock Steady Boxing Promote active lifestyles by offering Tai Chi for Health Offer healthy cooking classes to the community 	 Physicians/Providers /Educators Witham Wellness Center Local Parks Local Libraries Purdue Extension Healthy Coalition Witham Family YMCA Local Health and Fitness Events Area based fitness centers Caring Center Meals on Wheels Krames 	CHNA 2021



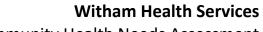








Meeting Physical Activity Guidelines	Boone County respondents reported a rate of 23.8% meeting physical activity guidelines which is above Indiana rate of 15.6%, above US rate of 22.8% and above the HP2020 rate of 20.1%.	Boone County has a reported 21.2% decrease in individuals meeting the physical activity guidelines from 2015 rate of 45.0%. Despite this significant decrease, Boone Co met/exceeded IN rate by 8.2%, exceeded US rate by 1%, and exceeded HP 2020 target by 3.7%. Overall Goal: Increase number of respondents that report meeting physical activity guidelines.	Report % meeting physical activity guidelines to meet or exceed HP 2020 target of 20.1%.	Report % meeting physical activity guidelines to meet or exceed HP 2020 target of 20.1%.	20.1%	•	Promote physical activities with sponsorships and promotional items given: Jump ropes, chalk, playing cards, balls, frisbees Promote 5K and relays in the community to encourage physical activity Partner with YMCA to promote activities Support Healthy Coalition programs	•	Heart of Lebanon Caring Center	CHNA 2021
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	Year Round Recreational Opportunities for Youth	64.6% of Boone County respondents report the community provides enough recreation for youth year round. There is no IN, US or HP 2020 benchmark.	Boone County has a reported \$\sqrt{4.4\%}\$ in respondents reporting community provides needed year round recreation for youth. Overall Goal: Increase the number of respondents that report the community provides enough recreation for youth year round.	Report ≥ 69% of respondents (same as 2015) reporting that community provides enough year round recreation for youth.	Report ≥ 70% of respondents to perceive that the community provides enough year round recreation for youth.	none	(Same as Above)	(Same as Above)	CHNA 2021	
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Difficulty Accessing Fresh produce (finding fresh products at affordable price)	Boone County's reported rate for "Very/somewhat" difficult to buy fresh produce is 14.9% which is lower that the US rate of 22.1%. There is no IN or HP2020 benchmark.	Boone County has a reported 个 0.8% in rate for "Very/somewhat" difficult to buy fresh produce. Overall goal: Decrease the number of respondents that report difficulty in buying fresh produce.	Report ≤ the current US Rate having "Very/somewhat" difficulty accessing fresh produce.	Report ≤ the current US Rate having "Very/somewhat" difficulty accessing fresh produce.	none	•	Partner with Boone County's Nutrition and Education Program – Purdue Extension to promote the local Farmer's Markets and gives access to buying fresh produce Promote "Wisewood Farm" and "Farm to Table" opportunities for purchasing fresh	•	Purdue Extension Local Farmers Markets — Community Gardens Community Witham Wellness Boone County Health Department Lebanon Community Schools Western Boone Community Schools Zionsville	CHNA 2021
Eat 5+ Servings of Fruit & Vegetables per Day	Boone County has a reported rate of 29.7% that eat 5+ fruits and vegetable servings per day. This is ↓ 11.1% from 2015 rate of 40.8% and lower than the US rate of 33.5%.	Boone County has reported a significant decrease in those reporting eating 5+ fruit & vegetable servings per day. Overall goal: Increase number of fruit and vegetable servings consumed daily.	Report a rate ≥ 33.5% which is the US benchmark for those that eat 5+ servings of fruit and vegetables per day.	Report a rate of ≥ 40.8% which is the 2015 Boone County reported rate.	none	•	fruit & vegetables Educate families on choosing fresh fruit and vegetables instead of processed foods (allocation of food dollars) Food resources available	 Zionsville Community Schools Traders Point Schools Shalom House WIC Caring Center Love Inc. Boone County Food Pantry Coalition Boone County Resource Guide 	CHNA 2021	





Tobacco Use	Key Informant Ranking	s of Identified Areas	of Opportunity 20	18 #5 of 20 Areas	2015	#2 of 14 Areas		
Aı	rea of Opportunity	Impact/Goal	Short Term (1-3 years)	Long Term (4-7 years)	Healthy People 2020	Implementation Strategy	Hospital Resources/ Community Partners	Evaluation Method
Current Smoker	Boone County rate of tobacco smokers is 11.9% which is lower than the IN rate of 21.1% and the US rate of 16.3% and lower than HP2020 target of 12.0%.	Boone County has a ↓ 0.9% in current smokers from 2015 rate of 12.8 %. Indiana rate has ↓ 0.8% and US has ↑ 1.4% in the same time period. Overall goal: Decrease smokers in Boone County.	# of tobacco smokers ≤ HP 2020 rate of 12.0%.	Maintain # of tobacco smokers ≤ HP 2020 rate of 12.0.	12.0 %	 Promote "Indiana Quit Line" At Witham MD visits, patient asked if they are a smoker and noted in medical chart. Pt is educated about harm of smoking and asked if they would like to be referred to Indiana Quit Line. If they agree, the referral is automatically made at time of visit. (CONTINUED) 	 Physicians/Providers Indiana Quit Line Tobacco Free Boone County Boone County Health Department InWell Boone County Community Schools Boone County Cancer Society "Truth Initiative" 	CHNA 2021





Currently use vaping products	6.6% of Boone County reports using vaping products.	Boone County's reported rate is higher than the IN rate of 4.7% and the US reported rate is 3.8%. Overall goal: Decrease use of vaping products.	# of people using vaping products ≤ the IN rate of 4.7%.	# of people using vaping products ≤ the US rate of 3.8%.	none	 Witham Physicians to question parents about smokers in the house and initiate referrals Educate physicians on vaping so they can educate patients Educate the community of harm of vaping Explore/evaluate "Baby and Me" 	(Same as Above)	CHNA 2021
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Heart Diseas	e and Stroke Key Inform	mant Rankings of Ider	tified Areas of Op	portunity 2018 #6	of 20 Are	as 2015 #7 of 14 Areas		
Area of Opportunity		Impact/Goal	Short Term (1-3 years)	Long Term (4-7 years)	Healthy People 2020	Implementation Strategy	Hospital Resources/ Community Partners	Evaluation Method
Heart Disease Deaths	Boone County has an age adjusted death rate of 182.8 which is greater than IN rate of 181.9 and higher than the US rate of 167.0 and HP2020 rate of 156.9.	Boone County reported a ↓ 3.4 in age adjusted death rate since 2015 rate of 186.2. Boone County age adjusted death rate is ↑ 0.9 than IN rate and 15.8 than US rate. Overall goal: Decrease death rate for heart disease in Boone County.	Boone County to report an age adjusted death rate of ≤ 181.9 which is current IN rate.	Decrease Boone County age adjusted death rate to ≤ the current US reported rate of 167.0.	156.9	 Provide medical intervention to save lives of acute cardiac distress Cath lab Provide education to community on heart disease and stroke Heart Scans Improve medical management by increasing medical staff Cardiac Rehab 	 Physicians/Providers Riggs Health Boone County St Vincent Medical Group Cardiology American Heart Association Purdue Extension (Heart Smart) Community Fitness Centers/ Organizations 	CHNA 2021
Taking Action to control High Blood Pressure	Boone County reports 32.7% having been told they have high blood pressure (HPB). (CONTINUED)	Boone County has a ↓1.7% from 2015 rate of 34.4% being (CONTINUED)	Boone County to improve percent of HBP patients (CONTINUED)	Boone County to improve percent of HBP patients (CONTUNIED)	none			





Taking Action to control High Blood Pressure (Continued)	Of the 32.7%, 90.3% have taken action to control HBP. This is lower than the US benchmark of 93.8%. There are no IN or HP2020 benchmarks.	told they have HBP. However Boone County has a ↓of 5.8% of those taking measures to control HBP. Overall Goal: Increase percentage of people that have taken action to control HBP.	taking action to control HBP ≥ 93.8% which is the US benchmark.	taking action to control HBP ≥ 96.1% which is the 2015 Boone County benchmark.		(Same as Above)	(Same as Above)	CHNA 2021
Stroke Deaths	Boone County has an age adjusted death rate of 48.1 which is greater than IN rate of 40.1 and higher than US rate of 37.1 and HP2020 rate of 34.8.	Boone County reports a ↓ of 5.2 in adjusted death rate from 53.3 in 2015. IN reports a ↓ of 1.6 from 41.7 in 2015. US reports a ↑ of 0.6 from 36.5 in 2015 reported rates. Overall goal: Decrease stroke death rate in Boone County	Boone County to report an adjusted death rate of ≤ 44. This would represent a decrease of 4.1.	Boone County to report an adjusted death rate that is ≤ 40.1 current IN death rate.	34.8			



Dementia, in	cluding Alzheimer's Disease	Key Informant	Rankings of Identif	ied Areas of Oppo	rtunity	2018 # 7 of 20 Areas 2	015 #6 of 14 Areas	
Aı	rea of Opportunity	Impact/Goal	Short Term (1-3 years)	Long Term (4-7 years)	Healthy People 2020	Implementation Strategy	Hospital Resources/ Community Partners	Evaluation Method
Alzheimer's Disease Deaths	Boone County has an age adjusted death rate of 39.2 which is greater than IN rate of 32.5 and higher than the US rate of 28.4. There is no HP2020 benchmark.	Boone County reports an age adjusted rate of 39.2 which is a \$\sqrt{4.4}\$ from 2015 rate of 43.6. Boone County rate remains greater than both IN and US rates. Overall goal: Decrease Alzheimer death rate for Alzheimer's disease in Boone County.	Boone County to report an age adjusted rate of ≤ 36.0 which is a ↓3.2 from 2018, but remains higher than IN and US rates.	Decrease Boone County adjusted Alzheimer disease death rate death to ≤ the current IN reported rate of 32.5.	none	 Provide Alzheimer Support Group classes to the community Continue support to community based organizations and facilities that serve the Alzheimer population 	 Physicians/Providers Alzheimer's Association Boone County Senior Services Riggs Health Boone County Boone County	CHNA 2021





Cancer	Key Informant Rankings of Id	dentified Areas of Opp	oortunity	2018 #9 of 2	20 areas	2015 #9 of 14 Areas		
	Area of Opportunity	Impact/Goal	Short Term (1-3 years)	Long Term (4-7 years)	Healthy People 2020	Implementation Strategy	Hospital Resources/ Community Partners	Evaluation Method
Cancer Deaths	• Lung Cancer Boone County has an age adjusted death rate of 43.0 which is lower than IN rate of 50.8, higher than US rate of 40.3, and lower than HP2020 rate of 45.5.	Boone County reports a ↓ of 7.8 age adjusted death rate from 50.8 in 2015. Since 2015 IN reports ↓ of 3.8 from 54.1 and US reports a ↓ of 3.1 from 43.4. Since the US benchmark is now better than the HP2020 benchmark This implementation strategy will use the US rate as our benchmark. Overall goal: Decrease death rate for lung cancer in Boone County.	Boone County to report a rate ≤ 40.3 which is the 2018 US rate.	Boone County to report a rate ≤ current US rate.	45.5	 Provide cancer support education, classes and support groups to the community Provide prostate cancer screenings Provide skin cancer screenings Support local cancer programs Increase awareness that screening mammograms are covered at no additional charge to insured patients (CONTINUED) 	 Physicians/Providers Boone County Cancer Society Riggs Health Boone County Boone County Health Department American Cancer Society Indiana Cancer Consortium Tobacco Free Boone County 	CHNA 2021





	Cancer Deaths (Continued)	• Prostate Cancer Boone County has an age adjusted death rate of 18.5 which is lower than IN rate of 19.3, the US rate of 19.0 and the HP2020 rate of 21.8.	Boone County reported a ↓ of 10.6 age adjusted deaths from 29.1 in 2015. Since 2015 IN reported a ↓ of 0.9 from 20.4 and US reported a ↓ of 0.2 from 19.2. Continue to monitor due to dramatic decrease from 2015. Overall goal: Decrease death rate for prostate cancer in Boone County.	Boone County to report < 18.5 age adjusted death rate which is below current IN, US, and HP2020 rates.	Boone County to report age adjusted death rate < current IN, US, and HP2020 rates.	21.8	 Focus on early detection Acquire new treatment options for cancer patients 	(Same as Above)	CHNA 2021
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Cancer			1	1	1	(Same as Above)	(Same as Above)	CHNA
Deaths (Continued)	• Female Breast Cancer Boone County has an age adjusted death rate of 20.2 which is lower than IN rate of 20.7, the US rate of 20.3 and the HP2020 rate of 20.7.	Boone County reported a ↓ of 2.2 age adjusted deaths from 22.4 in 2015. Since 2015 IN reported a ↓ of 0.8 from 21.5 and US reported a ↓ of 0.6 from 20.9. Overall goal: Decrease death rate for breast cancer in Boone County.	Boone County to report < 20.2 age adjusted death rate which is below current IN, US, and HP2020 rates.	Boone County to report age adjusted death rate < current IN, US, and HP2020 rates.	20.7			2021





Access to He	alth Care Key Informan	t Rankings of Identific	ed Areas of Opport	unity 2019 #	19 of 20 a	reas 2015 #12 of 14 A	reas	
Area of Opportunity		Impact/Goal	Short Term (1-3 years)	Long Term (4-7 years)	Healthy People 2020	Implementation Strategy	Hospital Resources/ Community Partners	Evaluation Method
Appointment Availability	In Boone County 19.7% report difficulty getting an appointment in past year. This is higher than US rate of 17.5%. There is no IN rate and no HP2020 rate for this benchmark.	Boone County has a ↑ of 5.5% in persons reporting difficulty getting an appointment in the past year as compared to the 2015 rate of 14.2%. US rates ↑ by 0.5% since 2015 rate of 17.0%. Overall goal: Improve access to getting medical appointment.	Boone County rate to ↓ from the 2018 rate of 19.7%, to ≤ 14.2% which was the 2015 reported rate.	Boone County to report a rate of ≤ current US reported rate.	none	 Witham physician practices to offer an appointment on their first call, Acute cases – same day Non-acute – within 3 days Monitor Press Ganey satisfaction scores Increase options for obtaining appointments Evaluate hours of operation Continue to expand availability for primary care (CONTINUED) 	 Physicians/Providers Convenient Care Witham Medical Transport Boone County Senior Services 	CHNA 2021





						Continue to make community aware of transportation options		
Ongoing Source of Medical Care	Boone County has 76.8% that report a specific source of ongoing medical care compared to US rate of 74.1% and the HP2020 benchmark of 95%.	Boone County reports ↓of 12.0% from 2015 rate of 88.8%. US reports a ↓of 2.2% from the 2015 rate of 76.3%. There are no IN benchmarks. Overall goal: Educate community on available resources for on-going medical care.	Boone County to report ≥ 82.8% of Community to identify a specific source of on-going medical care. This is a midpoint from 2015 rate.	Boone County to report ≥ 88.8% of Community to identify a specific source of on-going medical care. Which is a return to 2015 reported rate.	95.0%	Continue to expand availability of primary care providers – both adult and pediatric	 Riggs Health Boone County Boone County Health Department Non Witham primary Care providers in Boone County 	CHNA 2021





Routine Medical Care (children)	Boone Co reports 87.4% of children have had a check-up in the past year which is better than the US rate of 87.1%. There is no IN or HP2020 benchmark.	Boone Co reports for 0.3% from 2015 rate of 87.1 of children having a check-up in past year. US reported an for 3.0% from 84.1 rate in 2015. Overall goal: All Boone County children to receive a yearly check-up.	Boone County to report ≥ 90.0% of Boone County children will have had a check-up in the past year.	Boone County to report ≥ 95.0% of Boone County children will have had a check-up in the past year. Which is a return to the 2012 reported rate.	none	(Same as Above)	(Same as Above)	CHNA 2021
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Adoption of Implementation Strategy

On April 24, 2019, the Board of Trustees of Witham Health Services met to discuss this plan for addressing the community health priorities identified through our Community Health Needs Assessment. Upon review, the Board of Trustees approved this implementation Strategy and the related budget items to undertake the measures to meet the health needs of the community.

Board of Trustees Signatures

John W. R	C. achibal & Lewbers
John Brand	C. Archibald Hawkins
Jack Jones	Margaret McFrye
Many Morton	Devely Hewhart
Nancy Morton	Beverly Newhart