



Deaconess Health System

FY2016-2017 Community Health Needs Assessment Update
to the 2016 CHNA: Vanderburgh County

FY 2016 COMMUNITY HEALTH NEEDS ASSESSMENT
VANDERBURGH COUNTY, INDIANA

A Collaborative Assessment by: Deaconess Health System, ECHO Community Health Care, St. Mary's Health, United Way of Southwestern Indiana, Vanderburgh County Health Department, and Welborn Baptist Foundation



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FY2016-2017 CHNA Update — Introduction

Evansville, Indiana's two health systems, Deaconess and St. Mary's (now St. Vincent Evansville), began laying the foundation for a new community needs assessment in 2010. Tim Flesch, CEO of St. Mary's Health System, and Linda White, CEO of Deaconess Health System, agreed that it made sense for the local hospitals to share a common needs assessment for future planning purposes. St. Mary's and Deaconess extended an invitation to ECHO Health, a Federally Qualified Health Center, the United Way, and the Welborn Baptist Foundation to become co-sponsors of the assessment.

For the 2016 CHNA, the Vanderburgh County Health Department joined our collaborative and together we planned and executed the second community health needs assessment. This document provides a summary of the work accomplished in year one of the new plan.

CHNA 2016 Vendor

Healthy Communities Institute – now part of Midas+, a Xerox Company – was retained by St. Mary's and Deaconess to conduct the 2016 Community Health Needs Assessment (CHNA) for their two service areas of Vanderburgh and Warrick Counties in Indiana and to author the subsequent CHNA reports for each service area.

Based in Berkeley, California, HCI provides customizable, web-based information systems that offer a full range of tools and content to improve community health, and developed the Community Health Needs Assessment Platform. The organization is composed of public health professionals and health IT experts committed to meeting clients' health improvement goals.

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An electronic version of the Community Health Needs Assessment is publically available at www.deaconess.com/CHNA.

Paper copies of the CHNA are available at zero cost. Email CHNA@deaconess.com to request a copy.

2016 prioritized health needs and implementation plans: Vanderburgh County

St. Mary's and Deaconess called together hospital decision makers, community leaders, and members of the collaborative to prioritize the significant community health needs of Vanderburgh County as identified in the 2016 survey. The group considered several criteria: circle of influence/ability to impact change; opportunity to intervene at a prevention level; magnitude/severity of health issue; and addresses underserved and vulnerable populations. **The following three health topics were selected as the top priorities:**

Behavioral Health; Maternal, Infant, Fetal, and Children's Health; and Exercise, Nutrition and Weight

Implementation plans for each identified need follow:

CHNA Behavioral Health 2016-2019 Plan: Vanderburgh County

Behavioral Health Services Mapping and Local Survey

- Year one (July 1, 2016 to June 30, 2017) - Conduct service mapping summer/fall 2016; identify duplications, gaps, etc.
- Pending grant funding, prepare and administer local behavioral health survey in spring 2017 with help from USI School of Public Health.

Youth Mental Health First Aid

- Training trainers as well as people in the community will continue throughout the three-year CHNA action period.
- Activities will continue to follow grant guidelines.
- Reach Healthy People 2020 goal of 10.2 age-adjusted death rate per 100,000 population due to suicide.

Substance Abuse

A sub-group needs to meet and decide what specific actions/tasks we want to pursue for the next three years.

CHNA Maternal, Fetal, Infant Health 2016-2019 Plan: Vanderburgh County

Reduce Infant Mortality

Use three existing community collaborations to reduce infant mortality rates in Vanderburgh County:

Baby and Me Tobacco Free Program, Healthy Baby Steps Grant Initiative, Fetal Infant Mortality Review Committee

- Goal of 5% reduction in Fetal Infant Mortality in three years with a stretch goal of 10% over the same three years.
- Track and improve infant mortality rate (ISDH is the source for data).
- Track and improve data for babies with low birth weight and preterm births.

Address Child Abuse Rates

- Support and continue the work of the Child Abuse Task Force, called the CARE Team. CARE Team goals include identifying and addressing the major causes of trauma and injury for children age 17 and under.
- Track child abuse rates using the Annie E. Casey Foundation's data, regional hospital trauma and injury data.
- Our goal is not to reduce the number of reported and substantiated cases of child abuse/neglect. Increased education and awareness may actually increase the number of cases.

2016 prioritized health needs and implementation plans: Vanderburgh County

CHNA Exercise, Nutrition, and Weight 2016-2019 Plan: Vanderburgh County

Pre-Diabetes

Year One: Diabetes Coalition

- Assemble diabetes educators and other related professionals. Arrange regularly scheduled meetings of this group.
- Identify trusted sources of information on diabetes that is appropriate and helpful for the general public.
- Work together to coordinate diabetes classes, grant projects, and other activities throughout the community. This avoids multiple events/classes happening at the same time and increases the opportunity for participation.

Year Two: Community-Wide Diabetes Screening

- Use the Diabetes Coalition to organize and implement a community-wide diabetes screening in both Vanderburgh and Warrick Counties.

Year Three: Assessment

- Track and improve Age-Adjusted ER Rate due to Diabetes.
- Track and improve Age-Adjusted Hospitalization Rate due to Diabetes.

Built Environment

- Build community awareness of the definition and importance of “Complete Streets” - specifically the project on North Main Street in Evansville.
- Advocate for built environment features as they come before local and area governments for consideration. This includes sidewalks, bike lanes, etc.
- Build community awareness of the City of Evansville’s Bike and Pedestrian Plan.

Better Nutrition for Toddlers and Pre-School Age Children

- Work with early childhood providers like 4C to educate parents on nutritious food for their toddlers and pre-school age children.
- Coordinate messaging for use throughout the community regarding nutrition/nutritious choices for toddlers and pre-school age children.
- Track SNAP usage over 3 years to see what people are buying.
- Track and improve USDA data for Low-Income Preschool Obesity.

2016 CHNA — Other Significant Community Health Needs

As part of the community health needs assessment prioritization process, the following topics rose to the top of either primary or secondary data analysis.

- **Access to Health Services**
- **Diabetes**
- **Immunizations & Infectious Diseases**
- **Prevention & Safety**
- **Social Environment**

These needs were not selected as one of our priorities for the CHNA plan for the following reasons:

Access to Health Services – Each hospital has its own plan for increasing access to services. This includes physician recruitment strategies, adding new services or facilities, and enhancing technology. We all belong to the Indiana Hospital Association and the American Hospital Association and follow their guidelines and protocols for successful transition into the new value-based health care delivery model. Because a lot of the access work involves proprietary business information, we did not choose it as a focus for our collaborative.

Diabetes – The community has several successful diabetes programs in the inpatient and outpatient environment. As a group, we decided to focus our efforts on the large number of people with “pre-diabetes” instead of those already diagnosed with primarily Type 2 Diabetes. Prevention will yield greater results and better health in the future.

Immunizations and Infectious Disease – The Vanderburgh County Health Department received state grant funds to increase immunization compliance in pediatric and adult populations. The hospitals and clinics in our collaborative also participate in the health department’s immunization initiatives. Making this a priority for the group would be a duplication of effort and prevent us from addressing another community health need.

Prevention and Safety – Both participating hospitals and the health department actively promote safety. During this fiscal year, we focused on ATV safety. Our programs and accomplishments were recognized by the Governor of Indiana in addition to wide spread media coverage. Selecting this as a CHNA priority topic would again be a duplication of effort and keep us from tackling another issue.

Social Environment – Single parent households and child abuse rates fall into the social environment category. We chose to take those two elements and place them in our Maternal, Fetal, Infant and Children’s Health topic area.

FY16-17 Activities and Outcomes (Year 1 of the plan)

Vanderburgh County

Behavioral Health

Maternal, Fetal, Infant, Children's Health

Exercise, Nutrition, and Weight



FY16-17 Activities and Outcomes (Year 1 of the plan)

Behavioral Health: Vanderburgh County








- Asset Mapping
- Youth Mental Health First Aid (Southwest Indiana Project AWARE)
- Substance Abuse
- Additional Deaconess Activities



Behavioral Health—Asset Mapping Report: Vanderburgh County

The data below came from the 2016 CHNA survey and focus groups we conducted in 2015 and released in 2016. Behavioral health asset mapping was identified by our behavioral health committee as the first step in addressing our poor mental health data and less than favorable community input.

Table 6. Significant Health and Quality of Life Topics for Prioritization

Secondary Data			Primary Data	
Topic Score	Health Topic	Disparities in Data	Community Input (Total KI=9  ; FGD=10 )	Key Themes from Community
Top 5 Health Needs/Concerns from Secondary Data				
2.36	Mental Health & Mental Disorders	Male suicide rate is more than 2x as high as female rate		Issues with stigma; correlation to substance abuse and criminal system; perceived lack of adolescent psychiatry services and shortage of providers in general; suicide rate is rising.
Top 4 Needs/Concerns from Community Input				
1.80	Substance Abuse	Men have higher ER & hospitalization rate due to alcohol abuse		Abuse of alcohol, marijuana, prescription drugs, heroin, meth and synthetic drugs; smoking rates are high; increase in e-cig use; smoking ban overturned.
1.60	Children's Health	African American boys have higher ER & hospitalization rate due to pediatric asthma		Poor nutrition, increase in childhood obesity & diabetes; many kids on free/reduced lunch program; lack of mental health services for adolescents.
1.49	Exercise, Nutrition, & Weight			Lack of exercise/active lifestyle; need to increase availability of safe places to be active and education around nutrition; high prevalence of obesity.
1.01	Access to Health Services			Barriers to accessing care such as lack of providers, affordability of care, and transportation; coverage gap for "working poor"

Behavioral Health—Asset Mapping Report: Vanderburgh County

1. Do we have enough mental health providers?

Ratio from this assessment is 819:1 or 819 people for every one mental health provider. The 2017 County Rankings report lists Vanderburgh County's provider rate as 560:1—significantly lower than our assessment.

2017 County Rankings report:

Mental health providers - ratio of population to mental health providers

Vanderburgh County - 560:1

Top US Performers - 360:1

Indiana Average - 730:1

2. What kind of providers do we have (license type and service offered)?

For Vanderburgh County, we identified 221 total providers.

- MD/DO (psychiatrist) - 19 providers
- NP/APRN/PhD/PsyD - 33 providers
- MS/MSW/Masters level - 26 providers
- LCAC/LCSW/"L" level - 141 providers
- Bachelor's Degree - 2 providers

3. Who takes Medicaid? There doesn't appear to be enough Medicaid spots to meet demand.

- Behavioral Disorders - 9 organizations accept Medicaid
- Depression/Anxiety -10 organizations accept Medicaid
- Addictions - 10 organizations accept Medicaid
- Psychiatric/Mental Illness - 5 organizations accept Medicaid
- Trauma/Abuse - 7 organizations accept Medicaid

4. What do we do about kids on the Autism spectrum? We are told providers won't treat them.

Autism is not classified as a mental illness. It is a developmental disorder. Autism cannot be cured with therapy. The needs of these patients are different from the needs of mentally ill patients.

5. Does anyone provide testing for IQ and Autism?

Yes, 25 providers representing 5 organizations from our master list provide testing.

- Christopher Vaught, LMHC
- ECHO Community Healthcare John St. Woodson Clinic
- ECHO Community Healthcare Main Campus
- Luzio and Associates
- Midwest Behavioral Health



Behavioral Health—Asset Mapping Report: Vanderburgh County Continued

6. What programs exist for adolescents with an addiction?

There is not a local, residential (inpatient) facility for adolescents with a substance abuse problem. There are multiple outpatient resources and programs for this age group.

39 total providers, 9 total facilities

- 7 outpatient facilities with a total of 26 providers
- 1 inpatient/outpatient facility with 8 providers
- 1 pediatric inpatient hospital (Evansville Psychiatric Children's Center) with 5 providers

Opportunity for improvement = allowing other groups besides law enforcement and Department of Child Services to refer teens to Hillcrest Youth Home. The kids can live there and get treatment for addiction/s.

7. What services do we have for children under age 10 with any mental health diagnosis?

There is 1 inpatient facility for kids under age 10 in Vanderburgh County,
Evansville Psychiatric Children's Center

They offer:

- Relationships, marriage/family, divorce/family conflict – 1 inpatient organization
- Parent-child issues – 0 inpatient organizations
- behavioral disorders - 1 inpatient organization
- depression/anxiety – 1 inpatient organization
- other addictions – 0 inpatient organizations
- career and other changes – 0 inpatient organizations
- chronic conditions/eating disorders – 0 inpatient organizations
- psychiatric/mental illness – 1 inpatient organization
- stress/anger management and social skills – 1 inpatient organization
- trauma and abuse – 1 inpatient organization

There are 2 additional inpatient facilities for kids under age 10 in Indiana,
Larue D. Carter Memorial Hospital in Indianapolis
HARSHA Behavioral Center in Terre Haute



Behavioral Health—Asset Mapping Report: Vanderburgh County Continued

7. What services do we have for children under age 10 with any mental health diagnosis?

There are 26 organizations that provide counseling services for kids under age 10 in Vanderburgh County.

There are 24 outpatient facilities for kids under age 10 in Vanderburgh County

- Relationships, marriage/family, divorce/family conflict – 11 outpatient organizations
- parent-child issues – 10 outpatient organizations
- behavioral disorders – 11 outpatient organizations
- depression/anxiety – 12 outpatient organizations
- chemical/substance abuse/recovery – 7 outpatient organizations
- other addictions – 1 outpatient organization
- career and other changes – 4 outpatient organizations
- chronic conditions/eating disorders – 7 outpatient organizations
- psychiatric/mental illness – 3 outpatient organizations
- stress/anger management and social skills – 9 outpatient organizations
- trauma and abuse – 12 outpatient organizations

There are an additional 8 outpatient facilities for kids under age 10 in other Indiana counties

- Relationships, marriage/family, divorce/family conflict – 1 outpatient organization
- parent-child issues – 2 outpatient organizations
- behavioral disorders – 5 outpatient organizations
- depression/anxiety – 1 outpatient organization
- chemical/substance abuse/recovery – 3 outpatient organizations
- other addictions – 0 outpatient organizations
- career and other changes – 0 outpatient organizations
- chronic conditions/eating disorders – 1 outpatient organization
- psychiatric/mental illness – 3 outpatient organizations
- stress/anger management and social skill – 1 outpatient organization
- trauma and abuse – 0 outpatient organizations



Behavioral Health—Asset Mapping Report: Vanderburgh County Continued

Important information we learned:

Employee shortage/competition – The need for behavioral health providers is increasing. Private groups can pay higher wages.

The greatest need is for private residential treatment for teens (age 13-16). These are kids that need 24/7 care in a secure facility for several weeks or months. This time period is longer than going to a hospital for treatment of an acute situation but not so serious it requires admission to a state hospital. The waiting list for the state-run facility is 11 months for a local teen girl.

Medicaid is an advantage for the seriously mentally ill - Medicaid pays for more mental health services in general than commercial/private insurance. Medicaid will cover 3-6 months in a private residential treatment facility (PRTF) following 2 acute hospital stays. They also pay for wrap around services. Commercial insurance pays for 6 weeks of PRTF.

The DMHA (Division of Mental Health and Addiction) has an admissions committee in Indianapolis. That committee reviews all referrals for adults needing admission to a state run facility.

The local physician at the Evansville Psychiatric Children's Center reviews cases for the Evansville facility. Those cases do not go through a committee in Indianapolis. That's good for local organizations.



Southwest Indiana Project AWARE

Evansville, Indiana

Reporting Period: October 1, 2016-September 30, 2017

Lead Project Partners: Deaconess Health/Deaconess Cross Pointe
and St. Vincent Health

Project Evaluator: Diehl Consulting Group

Summary of Initiative

Southwest Indiana Project AWARE will strengthen community capacity to address adolescent mental health needs by bolstering community partnerships and increasing the number of youth-interacting adults in Vanderburgh County and Warrick County, Indiana who are trained in Youth Mental Health First Aid (YMHFA). The population of focus is adolescents aged 12-18 in Vanderburgh and Warrick Counties.

The project has the following goals:

1. Increase capacity of adults to respond to behavioral health issues of adolescents
2. Increase the mental health literacy of youth-interacting adults
3. Link adolescents with behavioral health issues to mental, emotional, and behavioral health assistance and services
4. Increase the number of collaborative partnerships with youth-serving community agencies/programs
5. Conduct outreach and engagement strategies with adolescents and their families/caregivers to increase awareness of and promote positive behavioral health

To achieve these goals, our partnership is delivering YMHFA Instructor and First Aider training, developing a YMHFA sustainability plan, developing/strengthening partnerships with relevant youth-serving community agencies and programs, and developing a social marketing and awareness campaign.

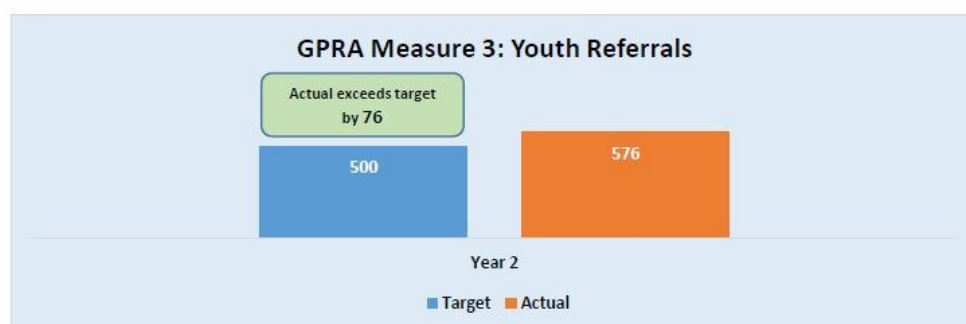
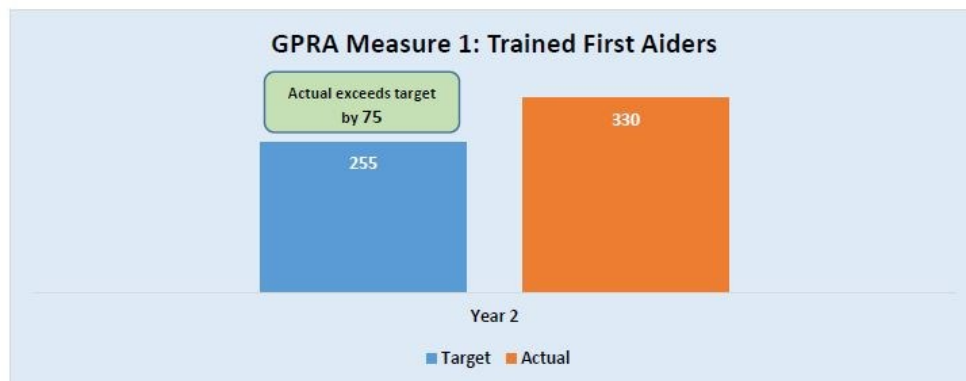
These are highlights from the 2016-17 report. The complete report can be found at www.deaconess.com/chna.

Southwest Indiana Project AWARE

Evansville, Indiana

Reporting Period: October 1, 2016-September 30, 2017

- In Year 2, the Southwestern Indiana Project AWARE conducted nineteen **(19)** First Aider courses, representing **152** hours of instruction.
- A total of **three (3)** Instructors and **330** First Aiders were trained during the period.
- Overall, **41** organizations were represented by trained individuals, demonstrating the community reach and collaboration that the project has experienced.
- Trained Instructors and First Aiders made a total of **576** youth referrals to mental health resources in the community.



Substance Abuse Initiatives—Behavioral Health—Vanderburgh County

Yellow Jug Old Drugs

The substance abuse subcommittee researched the Yellow Jug Old Drugs program, organized by Great Lakes Clean Water. The program provided a free, safe and easy method for consumers to dispose of unused, unwanted drugs. Our group discussed how the program could decrease prescription drug abuse by reducing the amount of drugs in the community. The program would also provide an additional resource for community drug “take backs” on a larger scale.



The Mayor’s Task Force on Substance Abuse voiced concern that although Yellow Jugs may get drugs out of the hands of potential users, it would not help support treatment or those who are actively abusing drugs. A second concern is tracking usage of the jugs.

The Yellow Jug program ceased operation before our subcommittee made a decision to participate.



“After nearly a decade of working to keep our water clean GLCW and the Yellow Jug Old Drugs Program cease operations.

Great Lakes Clean Water Organization was founded in 2008. GLCW was formed to educate people about the importance of proper disposal of unused/unwanted drugs to help keep our water clean.

GLCW started the first drug collection program operated by a non profit organization in the US. The Yellow Jug Old Drugs Program began in early 2009. The program provided a free, safe and easy method for consumers to dispose of unused unwanted drugs in a safe and responsible manner.

The program grew in scope and popularity to serve over 550 pharmacies in eight states. It was the largest drug disposal program operated by a non profit organization. GLCW was the first and only non profit organization licensed by the DEA to be able to collect controlled substances at pharmacies for disposal.

GLCW played a significant role in getting state and federal regulations changed to help facilitate the process of safe and proper drug disposal.

In May 2017 GLCW had to cease operation of the Yellow Jug Old Drugs Program due to inadequate financial support. Costs were increasing dramatically due to the overwhelming response to the program from consumers using the service. Subsequently all operations of GLCW ceased as well.

The founders and board members are proud of the accomplishments this small non profit achieved over the years. Hopefully the ground breaking and pioneering accomplishments will have some long lasting effect to help make drug disposal options more readily available in the future.

As of November 15, 2017 Great Lakes Clean Water Organization, a Michigan Corporation is officially dissolved.”

SBIRT training

SBIRT stands for Screening, Brief Intervention, and Referral to Treatment. It is a public health approach to the delivery of early intervention and treatment for people who have or are at risk of developing substance use disorders.

Educating local physicians, nurses, and staff members in emergency departments and public health clinics about the SBIRT approach increases the likelihood that a person needing substance use intervention will receive help earlier in the addiction process. SAMHSA (Substance Abuse and Mental Health Services Administration) supports and encourages this training so our subcommittee arranged for a community training.

In July 2016, Kaitlyn Reho, MPH, SBIRT training and outreach specialist with the Indiana Prevention Resource Center and Mallorie DeSalle, Indiana SBIRT outreach coordinator for the School of Public Health at Indiana University—Bloomington, provided SBIRT training to the greater Evansville medical community.

SBIRT Step by Step

4 Phases of SBIRT

Phase 1 ESTABLISH RAPPORT
ASSURE CONFIDENTIALITY AND
ADMINISTER ASSESSMENTS

**Phase 2 ELICIT THOUGHTS - PROVIDE
FEEDBACK**
EXPLORE PROS AND CONS OF CHANGING,
PROVIDE EDUCATION

Phase 3 ENHANCE MOTIVATION
ASSESS READINESS TO CHANGE AND
ENHANCE MOTIVATION

Phase 4 NEGOTIATE A PLAN
SUMMARIZE SESSION, INVITE THEM BACK



Sign-in Roster
SBIRT for Healthcare Professionals
Friday July 22, 2016
Trainers: Mallorie DeSalle & Kaitlyn Reho

TYPED FULL NAME	SIGNATURE	Credential	ORGANIZATION
Megan Cade	<i>Megan Cade</i>	LSW + CMPTA	Family & Children's Place
Elizabeth Christmas	<i>Elizabeth Christmas</i>	LCSW, LCAC	Youth First, Inc.
Margaret Compton	<i>Margaret Compton</i>		
Theresa Dennie	<i>Theresa Dennie</i>	LCSW	Inner Connections Counseling
Noble Dennie	<i>Noble Dennie</i>		" " "
Teresa Faulkner	<i>Teresa Faulkner</i>	LCSW	Southern Hills Counseling Center
Joseph Franklin	<i>Joseph Franklin</i>		
Emily Gabelman	<i>Emily Gabelman</i>	LSW	Family & Child Place
Cindy Graham	<i>Cindy Graham</i>	LCSW	Southwestern/ECHO
Dan Haviza	<i>Dan Haviza</i>	BA	Southwestern Behavioral
Dennis Hefton	<i>Dennis Hefton</i>		Family Time
Ashley Hilkey	<i>on vacation</i>		
Lisa Jacobs	<i>Lisa Jacobs</i>	LSW	Family Time
John Nieters	<i>John Nieters</i>		
Haley Owens	<i>Haley Owens</i>	BA	Southwestern Behavioral Healthcare
Carmen Rickman	<i>Carmen Rickman</i>	LSW	Family & Children's Place
Theodora Saddoris	<i>Theodora Saddoris</i>	MD	
Amy Southerland	<i>Amy Southerland</i>	LCSW	Family & Child Place
Davi Stein-Kiley	<i>Sick -</i>		
Brittany Stout	<i>Brittany Stout</i>	WP-C	SICHC
Justin Summay	<i>Justin Summay</i>	BS	FCP
Brandi Watson	<i>Brandi Watson</i>	MSW Student	ECHO

SBIRT Grand Rounds at Deaconess

Pain management specialists Dr. Joseph Waling and Dr. Sridhar Bhaskara presented a ground rounds lecture at Deaconess Midtown Hospital entitled, "Comprehensive Pain Management" on August 29, 2017. The pair explained why the SBIRT tool was an essential part of a pain management program and how it can be incorporated into a clinic practice. (All healthcare professionals are invited to attend grand rounds. Records show 27 people in attendance.)

Deaconess Activities and Initiatives—Behavioral Health—Vanderburgh County



Pictured from L to R: Rep. Ron Bacon, Lt. Gov. Suzanne Crouch, Sen. Jim Merritt, Dr. Gina Huhnke, Rep. Holli Sullivan, and Rep. Ryan Hatfield at the July 2017 press conference celebrating INSPECT integration.

Pilot Program for Statewide Opioid Initiative

Deaconess successfully participated in the first state-led pilot program to integrate information from the statewide prescription drug monitoring program (INSPECT) directly into our electronic health record (Epic). Putting INSPECT data directly in the hands of doctors making critical prescribing decisions will save lives and support efforts in the fight against prescription drug and opioid abuse. The statewide initiative is one piece in a broader strategic plan to provide a comprehensive, community-based approach to solving the opioid crisis.

Medication Assisted Treatment

Deaconess Cross Pointe began offering Medication-assisted treatment (MAT) in May 2017. MAT consists of using medications, with counseling and behavioral therapies, to treat substance use disorders and prevent opioid overdose. MAT is primarily used for the treatment of opioid addiction (heroin and prescription pain relievers with opiates).

Suicide Prevention

Deaconess Cross Pointe continues its many community partnerships to address the mental health of our community. In conjunction with others, DCP began a community suicide prevention program and presented five community forums on suicide prevention.

Representatives from our suicide prevention program are assisting with revisions to the Indiana State Suicide Prevention Plan and the Indiana Suicide Prevention Conference was held at the University of Southern Indiana in August 2017.

Primary Care Integration

In February 2017, Deaconess Cross Pointe began integrating services with primary care physicians with the launch of a collaborative relationship with the Deaconess Family Medicine Residency Program.

The Integrative Care Model is team-driven, led by a PCP with support from a “care manager” and consultation from a psychiatrist who provides treatment recommendations for patients who are not achieving clinical goals.

Update—Metrics and Goals

Behavioral Health

Vanderburgh County Goal- Reduce age-adjusted death rate per 100,000 population due to suicide from 20.4 (2012-2014) to the Healthy People 2020 goal of 10.2.

Data for 2015 shows an improvement from 20.4 to 16 in death rate due to suicide.

Suicide Mortality

Suicide deaths per 100,000 population (age-adjusted)



What does this indicator measure?

Suicide mortality is represented by the number of deaths per 100,000 people and is age-adjusted to the 2000 U.S. population. It includes ICD-10 codes: X60–X84, Y87.0.

Why is this indicator important?

Suicide is a serious public health problem that can have lasting harmful effects on individuals, families, and communities. On average, 100 people commit suicide each day in the United States (Centers for Disease Control and Prevention).

About the data

Community: Vanderburgh County

Reference: Indiana

Goal: Healthy People 2020

Measurement Period: 2015

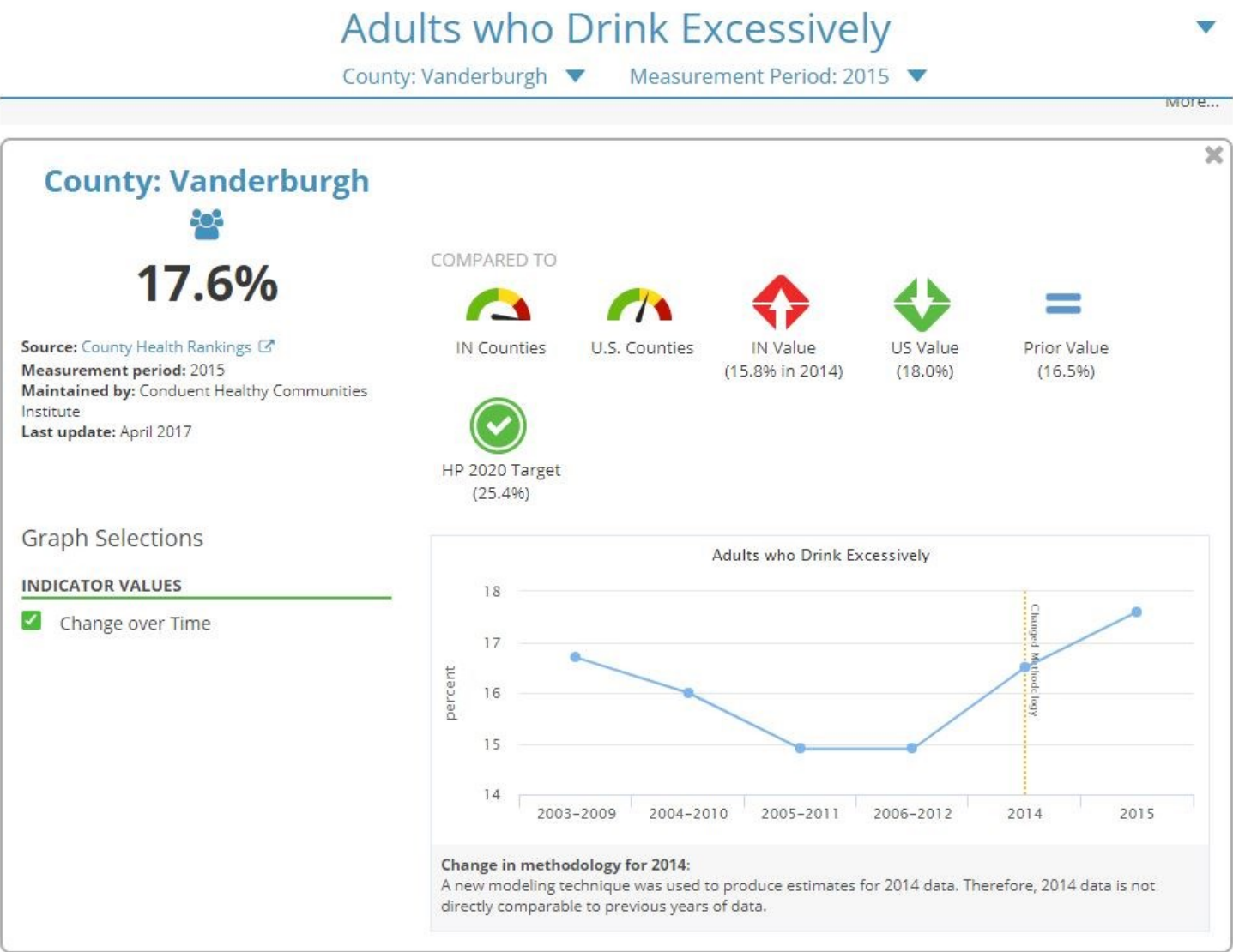
Category: Injury Prevention & Safety

Community Source: Indiana State Department of Health

Reference Source: Indiana State Department of Health

Update—Metrics and Goals

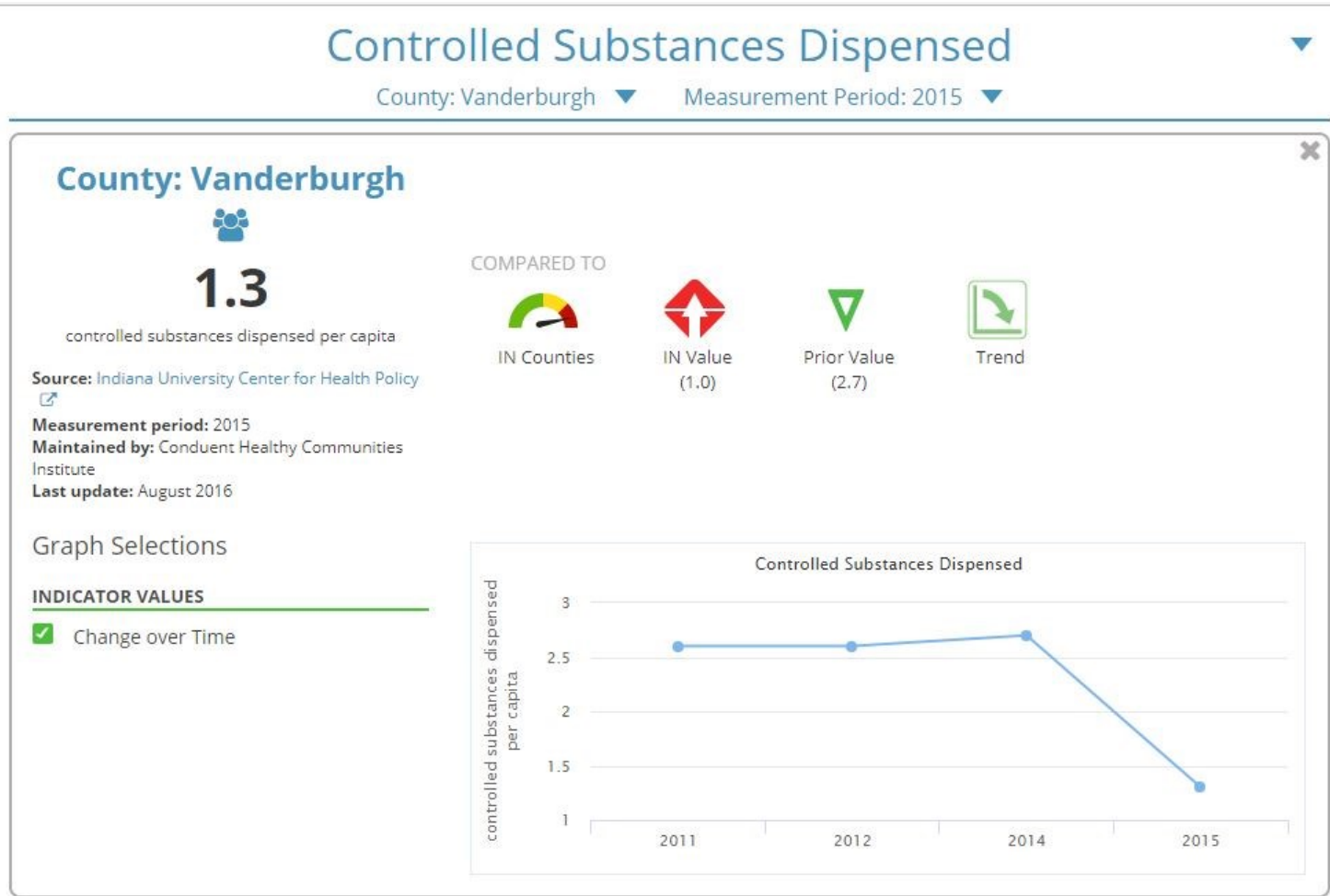
Behavioral Health—Substance Abuse



This indicator shows the percentage of adults who reported heavy drinking in the 30 days prior to the survey or binge drinking on at least one occasion during that period. We are monitoring this statistic because local data shows an increase in alcohol use and abuse along with an increase of related incidents such as drunk driving fatalities and child abuse.

Update—Metrics and Goals

Behavioral Health—Substance Abuse



This indicator shows the number of controlled substances dispensed by a licensed pharmacist or physician per capita. We are monitoring this statistic because local data shows increased use of opioids and several initiatives currently address opioid addiction, prescription practices, and statewide focus on all controlled substances.

FY16-17 Activities and Outcomes (Year 1 of the plan)

Maternal, Fetal, Infant, and Children's Health: Vanderburgh County

- Baby and Me Tobacco Free
- Fetal Infant Mortality
- Child Abuse
- Additional Deaconess Activities

CHNA Maternal, Fetal, Infant, and Children's Health: Vanderburgh County

Infant Mortality

One of the 2016 CHNA goals is to improve data regarding fetal and infant mortality rates. More specifically, we want to **reduce mortality before a baby's 1st birthday from the 2010-2014 Vanderburgh County average of 8.3 per 1,000 live births to the Healthy People 2020 goal of 6.0/1000 live births.**

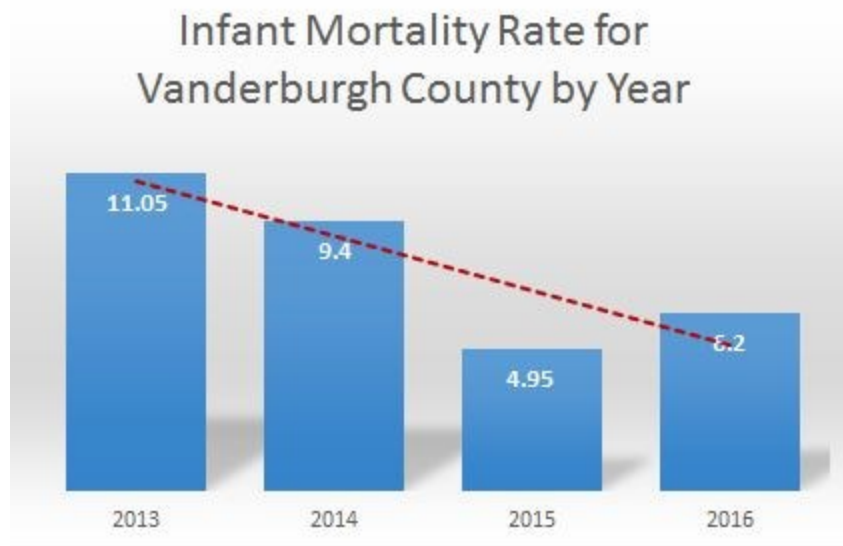
Thanks to the great community effort, Vanderburgh County has seen a drastic decrease in the Infant Mortality Rate (IMR) over the past three years. The IMR peaked at 11.05/1,000 live births in 2013, decreased to 9.4/1,000 live births for 2014, 4.95/1,000 live births for 2015, and 6.2/1000 live births in 2016.

The **Fetal Infant Mortality Review Committee** meets regularly to discuss all cases of infant death including those caused by low birth weight or being born preterm. (List of committee members appears in the appendix.)

A low birthweight (LBW) baby is considered to be less than 2,500 grams. Vanderburgh County has seen a drop in the percentage of LBW babies over the past few years. In 2014 9.8% of babies were born LBW, compared to 8.1% in 2015.

Vanderburgh County has seen consistently higher LBW rates than the Indiana average over the past few years, but it moved closer to the state average in 2015, which was 8.0%.

A baby is considered preterm if they are born before 37 weeks gestation. Vanderburgh County saw an improvement in this outcome over the 2014-2015 span as well. In 2014, 11.3% of babies were born preterm, while only 10% of babies were preterm in 2015. Again, Vanderburgh County moved closer to the Indiana average of 9.6% preterm for 2015.



*Data obtained from Indiana State Department of Health

CHNA Maternal, Fetal, Infant, and Children's Health: Vanderburgh County

Reduce Infant Mortality

Baby and Me Tobacco Free Program (BMTFP)

Baby and Me Tobacco Free is a program that provides incentives to pregnant women who quit smoking. The goal is to keep women smoke free for as long as possible before and after they give birth, and to also help women give birth to healthy, full-term babies.



2016 Grant Year

118 total participants with 63% still active at the end of the grant year.

For Vanderburgh County:

Pre-term birth rate—7%

Full-term (at least 37 weeks) birth rate—93%

Low birth weight rate (less than 5 lbs. 8 oz.) - 9.7%

2017 Grant Year

258 total enrolled participants with 70 joining the program between May and September.

For Vanderburgh County:

Pre-term birth rate—7%

Full-term (at least 37 weeks) birth rate—93%

Low birth weight rate (less than 5 lbs. 8 oz.) - 11%

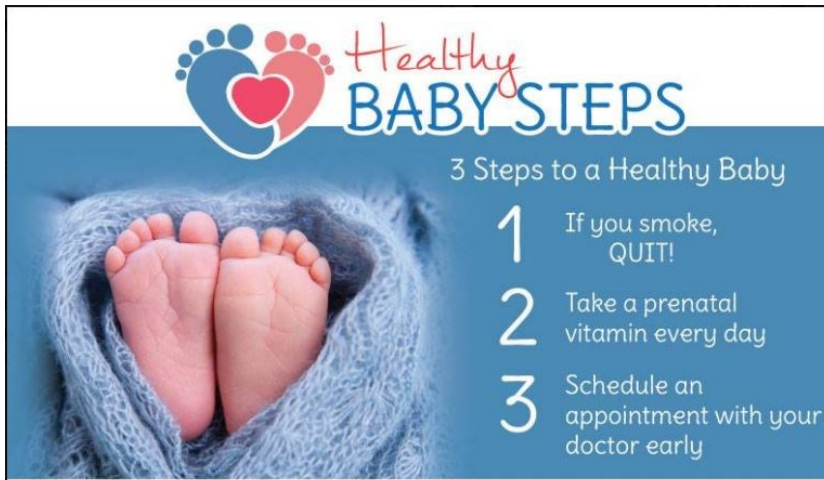
The Vanderburgh County BMTFP is working in the community to increase the amount of women joining the program. This year the program accomplished three specific tasks in order to increase referrals coming in and also create incentives to keep mothers in the program:

1. They hosted a “lunch and learn” event featuring the national BMTFP director and invited current and potential community partners.
2. They hired a community health liaison to visit providers in the area and tell them about BMTFP and how to refer patients.
3. In order to increase retention, they added a diaper bag initiative in May 2017 that allows women to pick out a diaper bag and add something to it every visit. Of the 70 women who joined BMTF between May and September 2017, only 2 have dropped out of the program. That equates to a 97% participation rate at the end of the grant year.

Full reports for BMTFP are available at the Vanderburgh County Health Department.



CHNA Maternal, Fetal, Infant, and Children's Health: Vanderburgh County



The Healthy Baby Steps initiative was funded through a grant from the Indiana State Department of Health and designed to reduce infant mortality in Vanderburgh and surrounding counties. The goal is to create healthier pregnancies and babies by asking pregnant women to follow three important steps: quit smoking, take prenatal vitamins and have prenatal care.

Over the past year, the Healthy Baby Steps (HBS) initiative worked toward increasing awareness about steps women can take to have a healthy baby. In 2016, HBS started a social media account and created a website. Banners were created and distributed to local healthcare facilities, like Deaconess and ECHO, and in areas that draw in a lot of people, like Eastland Mall and the Westside Nut Club Fall Festival.

A two-sample Z test found that there was a significant difference in the number of women of childbearing age who recognized the Healthy Baby Steps initiative over a six-month period. In May 2016, only 13% of the surveyed population recognized HBS, versus 20.43% in October 2016. The figure below depicts Healthy Baby Steps recall and recognition over the six-month period.

Due to the regional focus and success of the program during 2016, the Indiana Perinatal Network presented Healthy Baby Steps with the Julie A. Foster Communication Spirit of Service Award.



* Data obtained from Vanderburgh County Health Department

CHNA Maternal, Fetal, Infant, and Children's Health: Vanderburgh County

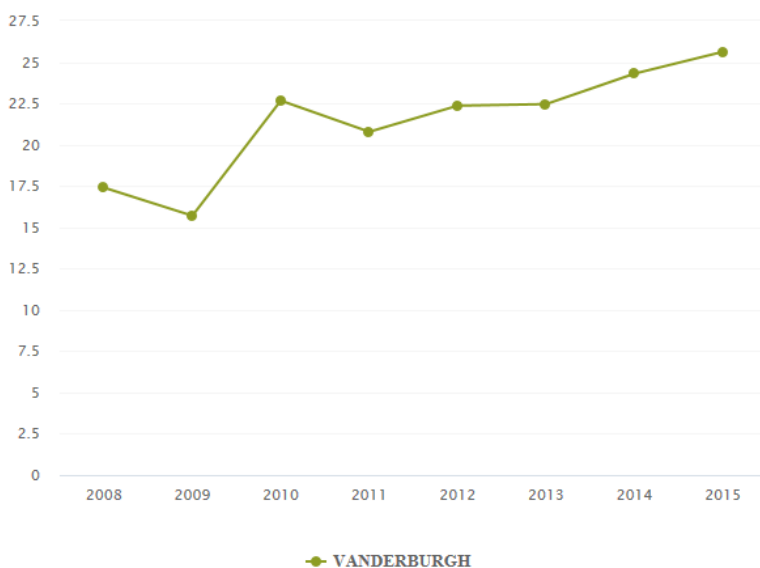
Address Child Abuse Rates

The goals associated with child abuse rates in Vanderburgh County are to increase awareness and education around cases of childhood abuse and neglect. Over the past year, the Child Abuse Task Force made progress tracking cases of abuse, educating providers, and raising public awareness of the issue.

Utilizing data made available by the Annie E. Casey Foundation and local trauma centers, the Child Abuse Task Force identified 32 potential cases of child abuse and/or neglect from May 2016—June 2017. During the same time period, 19 cases of child death were reviewed by the Child Fatality Review (CFR) coordinator, and 12 cases reviewed by the CFR team. The committee members have met 10 times since June of 2016 to address the child abuse problem in Vanderburgh County.

The Child Abuse Task Force members have also made efforts to educate providers on what to look for in a potential abuse/neglect case. The task force facilitated a "lunch and learn" meeting with healthcare providers and community organizations. At this event, information regarding how to identify potential child abuse cases by looking at injuries was covered. Grand rounds on this same topic were presented at Deaconess and St. Vincent Evansville.

**Data Obtained from Vanderburgh County Health Department*



CHILD ABUSE AND NEGLECT RATE PER 1,000 CHILDREN UNDER AGE 18 (RATE PER 1,000)

Indiana Youth Institute
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation



The task force constructed pinwheel gardens throughout the county during April, Child Abuse Awareness month, to bring attention to the number of local child abuse cases.

Pinwheel gardens are used nationally to spread awareness about child abuse and neglect with each pinwheel representing one case of child abuse in a given area.

Deaconess Activities and Initiatives — Maternal/Child Health — Vanderburgh County

Accessible Healthcare

The Deaconess Family Medicine Residency Program operates Deaconess Family Practice, an income-based primary care clinic. An OB/GYN and Midwife are part of the faculty and the residents care for pregnant women and their babies.

Mobile Breast Center

The 40 ft. coach travelled throughout the tri-state area providing mammograms to women where they live and work. Grant dollars are available for immediate use for women with no or inadequate insurance needing a mammogram.



Homeless Connect and Community First Health Fair

Deaconess continued to provide on-site services at two community events intended to increase access to health care for the homeless, near homeless, and those living in poverty. Services include blood pressure checks, blood sugar screenings, prostate checks (DRE and blood test), mammograms, immunizations, pap smears, HPV screenings, colon cancer FOBT kits, and connecting people with needed services.

Trauma Education – Play for Kate ATV Safety Initiatives

Deaconess worked closely with our local health department, legislators, and Ashlee Bruggenschmidt to create a law requiring ATV riders under the age of 18 to wear a helmet anytime they ride. The “Play for Kate” bill was passed by the Indiana legislature in April 2017 and in June, Governor Eric Holcomb came to Sharon Elementary, where Ashlee serves as principal, for a bill signing ceremony.

Local injury prevention experts presented our ATV safety initiatives at “PrevCon,” the Safe Kids Worldwide conference held in Baltimore. Their poster presentation featuring ATV safety won the People’s Choice award, and Safety Sam, the ATV safety training robot, was very popular at the conference.



Deaconess Activities and Initiatives — Maternal/Child Health — Vanderburgh County

The Women's Hospital enhanced the reach of our **neonate and high-risk pregnancy transport system**. Now, we have relationships with surrounding rural counties and a plan for quick and safe transport of premature or very ill newborns as well as pregnant women with serious complications or other high-risk attributes.

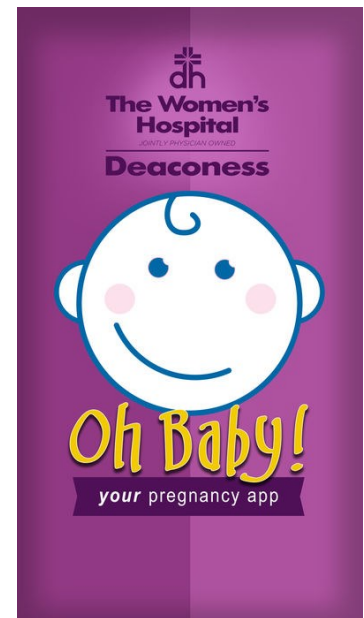
Continued participation and leadership in the local March of Dimes, Indiana Perinatal Network, and ISDH Labor of Love program.

Maintaining our Baby Friendly designation.

Prenatal Classes Offered

- From Pregnant to Parent
- Prenatal Yoga
- Big Brother/Big Sister
- Breastfeeding
- “Dude Camp” for expectant fathers
- Pediatric CPR
- Car Seat Fitting
- Safe Sitter

The Women's Hospital created and launched an app to help women during their entire pregnancy process - from planning through post partum.



TWH, Ford Center and the Deaconess Foundation teamed up to offer an amazing service to breastfeeding mothers. Together, they funded a lactation area called the Mamava Suite inside the Ford Center.



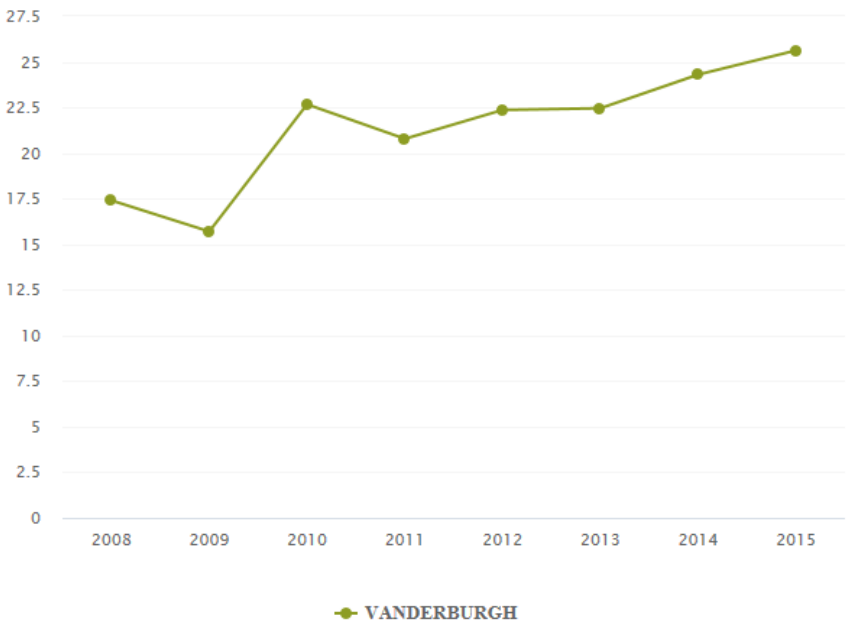
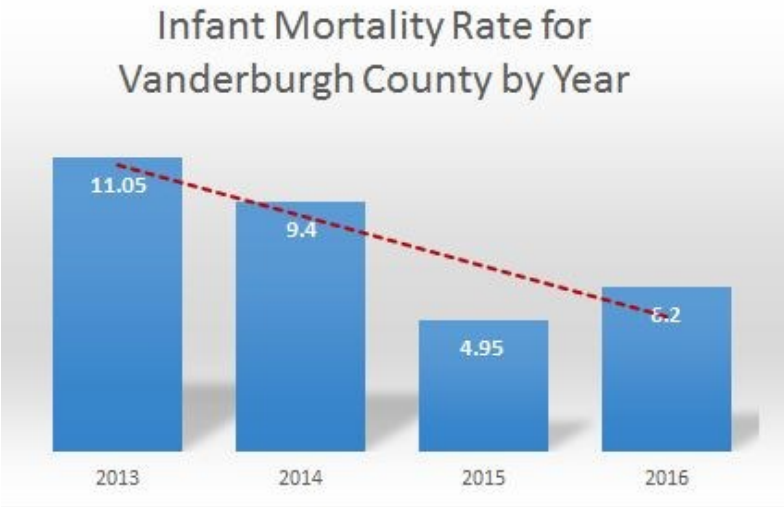
In late 2016, the Pelvic Health and Wellness Center opened. The staff specializes in helping women address conditions such as bladder or pelvic organ prolapse, incontinence, and chronic pelvic pain.

Update—Metrics and Goals

Maternal, Fetal, Infant and Children’s Health

Vanderburgh County Goal – Reduce mortality before 1st birthday rate per 1,000 live births from 11.05 in 2013 to the Healthy People 2020 goal of 6.0. Data obtained from the ISDH.

Data shows a significant decline in infant mortality rates between 2014 and 2015. The rates increased in 2016.



We are tracking this data to monitor the rate of abuse and neglect and how that relates to our local education and prevention initiatives.

CHILD ABUSE AND NEGLECT RATE PER 1,000 CHILDREN UNDER AGE 18 (RATE PER 1,000)

Indiana Youth Institute
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation

FY16-17 Activities and Outcomes (Year 1 of the plan)

Exercise, Nutrition, and Weight: Vanderburgh County

- Pre-Diabetes
- Built Environment
- Toddler and Preschool Nutrition
- Additional Deaconess Activities

CHNA Exercise, Nutrition, and Weight: Vanderburgh County

Pre-Diabetes

Year One Progress:

Assemble diabetes educators and other related professionals. Arrange regularly scheduled meetings.

The YMCA agreed to facilitate meetings for this subcommittee. Representatives from area diabetes education programs, clinics, and health systems were invited to join the group. Regular meetings were scheduled.

Identify trusted sources of information on diabetes that are appropriate and helpful for the general public.

American Diabetes Association (ADA), the American Medical Association (AMA), and the Centers for Disease Control and Prevention (CDC).

Work together to coordinate diabetes classes, grant projects, and other activities throughout the community. This avoids multiple events/classes happening at the same time and increases the opportunity for people to participate.

The start date for diabetes education classes in Vanderburgh County were coordinated so patients interested in joining a program do not have to wait for several months.

Additional work not specified in original action plan:

Create a community awareness campaign related to pre-diabetes. Design a landing page on the www.healthyswin.org website to help community members find trusted sources of information.

CURRENT WORK STAGE: Awareness campaign scheduled to start 4th quarter of 2017. Landing page on the www.healthyswin.org website has been brainstormed and structured, now we are working on developing within the website.

BARRIERS TO WORK: Need additional funds for the marketing campaign to be impactful to drive awareness and change.

“Do I Have Prediabetes?” National Campaign

This campaign was launched at the end of January 2016. It is a national public service announcement (PSA) campaign created by the American Diabetes Association (ADA), the American Medical Association (AMA) and the Centers for Disease Control and Prevention (CDC) in partnership with the Ad Council. It is a three-year-long campaign which promotes the simple, but strong message: No one is excused from prediabetes. Many communication mediums will be utilized to get this message out, including TV, radio and print ads. **Billboards and social media messages were placed in Evansville.**



CHNA Exercise, Nutrition, and Weight: Vanderburgh County

Built Environment and Nutrition

Healthy Community Partnership of Southwest Indiana represents seven counties including Vanderburgh and Warrick. The group formed in 2012 and created a comprehensive plan to prevent chronic diseases and increase lifespan. The plan is being used to promote tobacco-free living, active living and healthy eating, clinical preventive services, and healthy and safe physical environments.



For the purposes of CHNA, Healthy Community Partnership took the lead in addressing built environment issues and the need for better nutrition for toddlers and pre-school-age children.

Year 1 Review:

The Healthy Communities Partnership Leadership Team, which consists of representation from 25 Evansville businesses, set a goal to decrease the number of children in Vanderburgh County that are considered overweight or obese 20% by 2020.

Three strategies are in place to accomplish this goal:

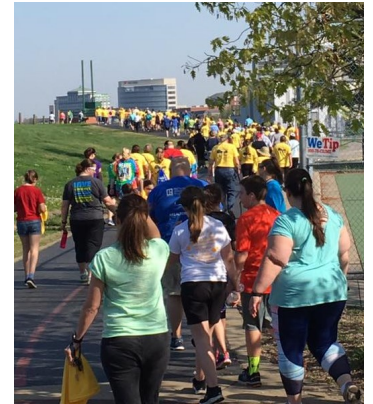
- 1) Develop and promote the implementation of policies that increase healthy eating and physical activity within daycare, preschool, school, after-school and community settings.
- 2) Promote the development of countywide access that supports healthy eating and active living for children and their families.
- 3) Increase community engagement to motivate healthy eating and active living for children and their families.

Four workgroups were created to tackle the strategies listed above. The four workgroups have met monthly since March 2017. Each workgroup has two co-chairs. Three of the workgroups have already set smaller goals to help reach the leadership team's larger goal of 20% by 2020.

Deaconess Activities and Initiatives Exercise, Nutrition, and Weight: Vanderburgh County

Healthier U Walks

Starting in 2011, Deaconess began the Healthier U Walks. The program encourages exercise but also provides people with the opportunity to explore new places with the safety of a “tour guide” and a group to walk with. A lot of people are hesitant to walk, because they don’t want to go alone to parks/trails. The program also rotates through different trails or walking paths in Vanderburgh and Warrick Counties to help identify areas, new for some, for exercise in the community. For 12 Saturdays, May through July, individuals meet each week at a different park or walking trail and walk from 9-10 AM. Strollers and leashed pets are welcome to encourage attendance. Eastland Mall is used as a location for rainy days and market presence for walking awareness.



Energize Evansville



Once a month, Deaconess partners with Energize Evansville (Mayor’s Office) and sponsors free fitness programs and activities such as yoga and Zumba. These classes are also continued throughout the year at various city locations like Swonder Ice Rink, public pools and city parks.

Deaconess Fitness Center

The Deaconess Fitness Center maintains a location at the Midtown hospital and offers long operating hours from 5 AM – 12 Midnight daily including weekends and holidays. The Fitness Center offers a variety of Cybex weight training equipment, six treadmills, one stationary bicycle, two airdyne bicycles, three EFX elliptical cross trainers, a Stairmaster and two NuSteps. Each member, as a part of the orientation process, is properly trained to use the equipment.

Employee Wellness

In FY16-17, Deaconess continued their work on a robust employee wellness program. In addition to flu shots and annual wellness screenings, employees are offered personal trainers, exercise classes, nutrition classes, smoking cessation programs, and mental health counseling to help make and reach personal wellness goals.

Deaconess Activities and Initiatives Exercise, Nutrition, and Weight: Vanderburgh County

Wise Choice - Deaconess Hospital and the West Side Nut Club collaborated again to provide a “Wise Choice” Fall Festival munchie map. The Fall Festival in Evansville has been said to be the second largest street festival next to Mardi Gras and draws over 200,000 individuals each year. The festival is known for deep fried and unhealthy options. The Wise Choice map identifies food items that are determined by a dietitian to be low calorie, low fat, and low sodium. Wise Choice debuted in 2012.



Baby Friendly - The Women’s Hospital received Baby-Friendly Facility Designation in August 2015 by Baby-Friendly USA, Inc. The designation symbolizes the hospital’s commitment to supporting breastfeeding mothers. Over the past year, The Women’s Hospital further developed components of the program including “skin to skin” contact and having the baby “room-in” with mom while in the hospital.

“BFUSA believes: (1) human milk fed through direct breastfeeding is the optimal way for human infants to be nurtured and nourished; (2) the precious first days should be protected as a time of bonding and support not influenced by commercial interests; and (3) every mother should be informed about the benefits of breastfeeding and respected to make her own choice.” <https://www.babyfriendlyusa.org/>

Meals on Wheels

Meals on Wheels of Evansville offers nutritionally appropriate and proportioned meals prepared under the direction of dietitians at Deaconess and St. Mary’s (now St. Vincent Evansville) for needy individuals of all ages. Meals can be specifically catered to an individual’s dietary needs based on a physician order.

Farmers Markets

Deaconess sent staff members and physicians to multiple farmers markets throughout Vanderburgh and Warrick Counties during the 2016 and 2017 summer. They provided healthy recipes and information related to their specialty area such as sleep medicine, heart, women’s health, cancer, etc.

A special initiative called POP Club began at the Historic Newburgh Farmers Market in 2017. This child-focused program encouraged kids to complete activities at the market each week and get their passport stamped. Stamps were rewarded with prizes.

2016 Farmers Markets — April/May through September/October:

Deaconess Farmers Markets — Tuesdays at Gateway Hospital and Wednesdays at Midtown Hospital

Downtown Evansville Farmers Market — Fridays

Franklin Street Bazaar — Saturdays

Historic Newburgh Farmers Market — Saturdays

New Harmony Farmers Market — Saturdays

2017 Farmers Markets — April/May through September/October:

Downtown Evansville Farmers Market — Fridays

Franklin Street Bazaar — Saturdays

* Markets were not held at Deaconess due to major construction projects.



Update—Metrics and Goals

Exercise, Nutrition, and Weight— We will continue to monitor incidences of diabetes and preschool obesity to measure the success of our intervention and prevention programs.

Adults with Diabetes

Census Place (City): Evansville Measurement Period: 2015

Census Place (City): Evansville

11.4%

Source: CDC - 500 Cities Project
Measurement period: 2015
Maintained by: Conduent Healthy Communities Institute
Last update: January 2018

COMPARED TO



500 Cities



US Value
(10.4%)



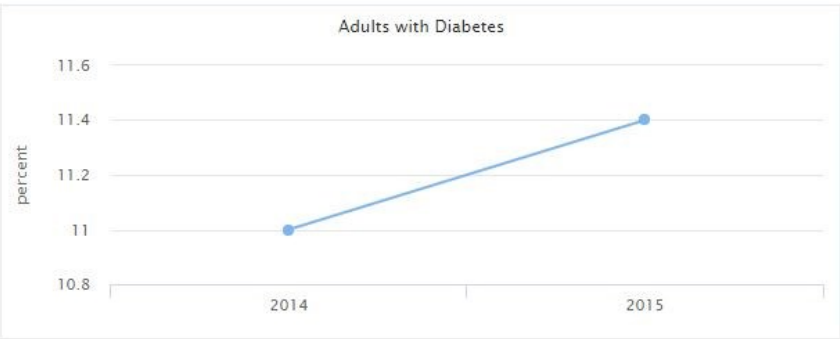
Prior Value
(11.0%)

Technical note: Sub-county small area estimates use state and county data from the CDC's Behavioral Risk Factor Surveillance System (BRFSS) in tandem with demographic data for census tracts and cities. It is not appropriate to use this data for evaluation purposes.

Graph Selections

INDICATOR VALUES

Change over Time



Low-Income Preschool Obesity

County: Vanderburgh Measurement Period: 2009-2011

More...

County: Vanderburgh



14.2%

Source: U.S. Department of Agriculture - Food Environment Atlas
Measurement period: 2009-2011
Maintained by: Conduent Healthy Communities Institute
Last update: December 2012

COMPARED TO



IN Counties



U.S. Counties



Prior Value
(14.1%)

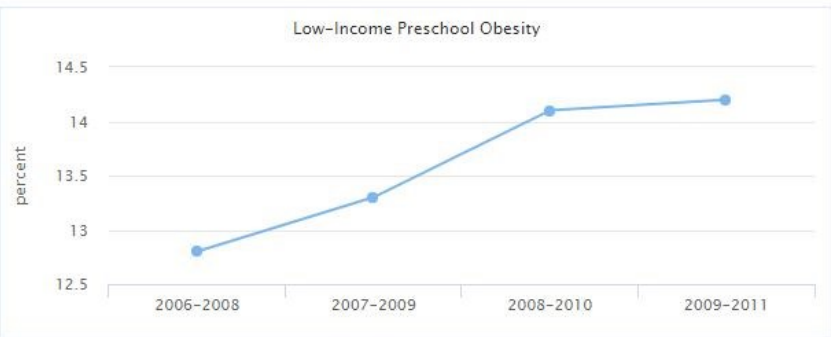


Trend

Graph Selections

INDICATOR VALUES

Change over Time



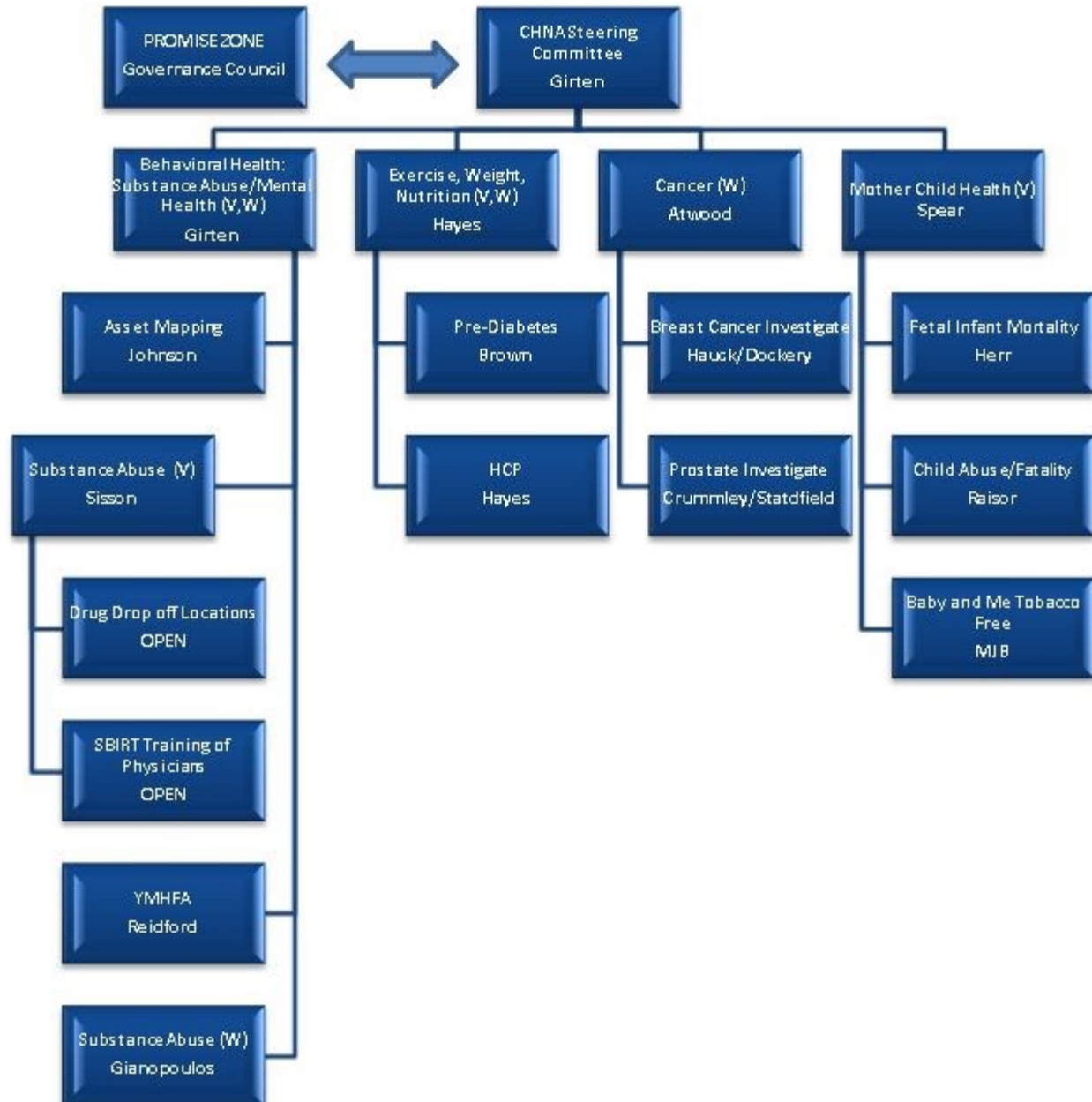
Primary Data Collection—Community Input

To expand upon the information gathered from the secondary data, The collaborative conducted **9** key informant interviews and **10** focus group discussions to obtain input from persons with expertise in public health and those who represent the broad interests of the community. In total, **84** people participated in primary data collection to provide community input with representation from the organizations below:

Albion Fellows Bacon Center	Easter Seals Rehabilitation	Hearing Healthcare Center	St. Mary's Case Management	University of Evansville
Alcoa	ECHO Health	IPMG	St. Mary's Center for Children	University of Southern Indiana
ARK Crisis Child Care Center	Evansville Fire Department	Ivy Tech Community College	St. Mary's Outreach Services	University of Southern Indiana Nursing Department
Aurora	Evansville Mayor's Office	Knight Township Trustee	St. Mary's Pastoral Care	Vanderburgh Community Foundation
Boys and Girls Club	Evansville Psychiatric Children's Center (FSSA)	Lampion Center	St. Mary's Weight Management	Vanderburgh County Health Department
CAJE (Congregations Acting for Justice and Empowerment)	Evansville State Hospital (FSSA)	Old National Bank	SWIRCA	Welborn Baptist Foundation
CAPE	Evansville Vanderburgh School Corporation	One Life Church	The Arc of Evansville	Youth First
Deaconess Cross Pointe	Girl Scouts of South-west Indiana	Smoke Free Communities	TJ Maxx	YWCA
Deaconess Family Medicine Residency	Harding, Shymanski & Company	Southwestern Behavioral Healthcare	United Caring Services	
Deaconess Pharmacy	Harrison College Nursing Department	St. Mary's Behavioral Services	United Way of SWIN	

2016 CHNA Committee and Subcommittee Structure

Vanderburgh and Warrick Counties



CHNA Behavioral Health Subcommittee

Member	Organization
Lindsey Johnson	St. Mary's Health
Katy Adams	Southwestern Behavioral Health
Chris Allen	Vanderburgh County Health Department
Sharon Barclay	Indiana State Department of Health
Jessica Black	Brentwood Springs
Parri Black	Youth First
Scott Branam	Deaconess Cross Pointe
Sharon Burns	Evansville Catholic Schools
Amy Canterbury	United Way of Southwest Indiana
Deb Capps	Tri-Cap (Warrick County)
Janie Chappell	Deaconess Cross Pointe
Christine	Holly's House
Heather Clark	Deaconess
Deidra Conner	ARC of Evansville
Lottie Cook	Evansville Children's Psychiatric Center
Angie Cooley	ARK Crisis Nursery
Maria Del-Rio Hoover, MD	St. Mary's Health
Amy DeVries	CAJE - Congregations Acting for Justice and Empowerment
Dan Diehl	Diehl Consulting
Dr. Candi Vincent	Deaconess
Suzanne Draper	CASA Vanderburgh County
Heather Gogel	St. Mary's Health
Jason Emmerson	United Caring Services
Jane Friona	USI
Mark Funkhouser	PEACE Zone
Marge Gianopoulos	Youth First - Warrick County
Christy Gillenwater	Southwest Indiana Chamber of Commerce
Eric Girten	St. Mary's Health
Cathlin Gray	Evansville Vanderburgh County School Corporation
John Greaney	St. Mary's Health
Joe Gries	Vanderburgh County Health Department
Monty Guenin	Evansville Police Department
Susan Hammock	USI
John Harding	Buffalo Trace Boy Scout Council
Anna Hargis	Big Brothers Big Sisters
Wyeth Hatfield	ECHO Health
Luzada Hayes	United Way of Southwest Indiana
Andrea Hays	Welborn Baptist Foundation
Ann Hayworth	Q Source
Lynn Herr	Vanderburgh County Health Department
Jill Hoskins	Brentwood Springs
Tracy Huck	St. Mary's Health

CHNA Behavioral Health Subcommittee Continued

Member	Organization
Kathy Hybarger	Indiana State Department of Health
Ashley Johnson	Deaconess
Joyce	Tri-Cap Warrick County
Elizabeth Kalb	USI
Brian Kerney	Aurora
Laura Keys	Youth First
Brett Kruse	Warrick County Sheriff's Department
Lynn Kyle	Lampion Center
Kent Leslie	Deaconess Cross Pointe
Faren Levell	Southwestern Behavioral Health
Donna Lilly	Deaconess Cross Pointe
Silas Matchem	Promise Zone
Wanda McCarter	Brentwood Springs
Susan Milligan	Evansville Catholic Schools
Sara Murray	United Way of Southwest Indiana
Lisa Myer	St. Mary's Health
Swateja Nimkar	USI - Public Health
Michelle Parks	St. Mary's Health
Chris Patterson	Vanderburgh County Medical Society
Kerseclia Patterson	USI
Ginger Patton	Vanderburgh County Health Department
Julie Phillips	Smoke Free Communities
Cathie Pritchard	Q Source
John Pulcini, MD	Surgeon
Janet Raisor	St. Mary's Health
Emily Reidford	Mental Health America - Vanderburgh County
Kathy Riedford	USI
Renee Rockers	Ivy Tech Community College
Vicki Schmitt	Southwest Indiana Chamber of Commerce
Denise Schultz	Youth First
Aleisha Sheridan	4C
Crystal Sisson	Vanderburgh County Substance Abuse Council
Holly Smith	St. Mary's Health
Nicole Smith	Brentwood Springs
Ken Spear, MD	Vanderburgh County Health Department
Davi Stein-Kiley	Youth First

CHNA Behavioral Health Subcommittee Continued

Member	Organization
Sally Sternberg	Evansville Catholic Schools
Susan Steinkamp	Aurora
Erika Taylor	YWCA
Teasa Thompson	Q Source
Ann Tornatta	Deaconess
Adam Trinkel	St. Mary's Health
Jody Uebelhack	Vanderburgh County Government
Vickie	St. Vincent DePaul
Beverly Walton	Community Patient Safety Coalition
Greg Wathen	Southwestern Behavioral Health
Ann White	USI
Mayor Lloyd Winnecke	City of Evansville
Bill Wooten, MD	Mayor's Substance Abuse Task Force
Matt Young	Warrick County Sheriff's Department

Asset Mapping Group	
Susan Hammock	University of Southern Indiana
Wyeth Hatfield	ECHO Health
Joe Gries	Vanderburgh County Health Department
Sylvia Groves	Evansville Vanderburgh School Corporation
Emily Reidford	Mental Health America
Dr. Ken Spear	Health Officer, Vanderburgh County Health Department
Stephanie Crandell	Evansville Vanderburgh School Corporation
Ashley Johnson	Deaconess Health System
4 College Interns	Vanderburgh County Health Department

CHNA Maternal, Fetal, Infant and Children's Health Subcommittees

Fetal Infant Mortality Review Case Review Team

St. Vincent Evansville

Social services

Obstetricians

Maternal Fetal Medicine Physicians

Nursing

Family Practice Physicians

The Women's Hospital (Deaconess)

Social services

Maternal Fetal Medicine Physicians

Nursing

Neonatology

University of Evansville

University of Southern Indiana

Vanderburgh County Coroner's Office

ECHO Health (FQHC)

Evansville Christian Life Center

Health Departments by County

Vanderburgh

Warrick

Posey

Gibson

Vanderburgh County Prosecutor's Office

March of Dimes

Community Action Program of Evansville (CAPE)

Department of Child Services

Indiana State Department of Health

Child Abuse Task Force

The initiative has grown to more than 60 participants with multidisciplinary team participation from:

St. Vincent Evansville

Deaconess

Vanderburgh County Health Department

ECHO Community Health Center (FQHC)

Vanderburgh County Prosecutor's Office

Department of Child Services

Vanderburgh County Sheriff's Office

CHNA Exercise, Nutrition, and Weight Subcommittees

Pre-diabetes Committee Members:

Amy Harris (Deaconess), Jennifer Brown (YMCA), Sally Kroeger (YMCA), RaShawnda Bonds (CAPE), Lacy Wilson (Purdue Extension), Ashley Johnson (Deaconess), Eric Girtten (St. Vincent), Kitty Williams (Deaconess), Mary Jo Boroweicki (Vanderburgh County Health Department), Lisa Verkamp (YMCA), Megan Brothers (Purdue Extension), Mandy and Anna (St Vincent).

Healthy Communities Partnership—Leadership team

Last Name	First Name	Organization
Armstrong	Joshua	Downtown Alliance
Bain	Kevin	Welborn Baptist Foundation
Becker	Shirley	Tri-State Medical Alliance
Carpenter	Jill	Vanderburgh Community Foundation
Coures	Kelley	Department of Metropolitan Development
Dauer	Sarah	Shoe Carnival
Gillenwater	Christy	Southwest Indiana Chamber
Hays	Andrea	Welborn Baptist Foundation
Jones	Don	University of Evansville
Kimmel	Brad	WNIN
McCullough	Julie	USI
Paradossi	Pete	Evansville Regional Business Committee
Raisor	Janet	St. Mary's
Schoettlin	Kathy	Old National Bank
Schriefer	Erin	Evansville Metropolitan Planning Organization
Shokouhzadeh	Seyed	Evansville Metropolitan Planning Organization
Spear	Dr. Kenneth	Vanderburgh County Health Department
Stewart	Derrick	YMCA
Strader-McMillen	Sandee	ECHO
Susott	Amy	Deaconess
Terry	Stephanie	cMoe
White	Ann	University of Southern Indiana
Whitehouse	Caren	EVSC
Whiteside	Jeff	Vectren
Wilson	Lacy	Purdue Extension

CHNA Exercise, Nutrition, and Weight Subcommittees Continued

Exercise, Nutrition, and Weight Sub-Committee Member	Organization
Ginger Patton	Vanderburgh County Health Department
Amy Canterbury	United Way of SWIN
Holly Smith	St. Mary's Health System (Now St. Vincent)
Ashley Johnson	Deaconess Health System
Joe Gries	Vanderburgh County Health Department
Lacy Wilson	Purdue Extension Office
Lisa Myer	St. Mary's Health System
Eric Girten	St. Mary's Health System
Chris Allen	Vanderburgh County Health Department
Janet Raisor	St. Mary's Health System
Faren Levell	Southwestern Behavioral Health
Karen Sue Conaway	iPickHere
Andrea Hays	Welborn Baptist Foundation
Linda Lutz	Evansville Vanderburgh School Corporation
Lisa Fulton	United Way of SWIN
Erin Schriefer	Evansville Metropolitan Planning Organization
Seyed Shokouhzadeh	Evansville Metropolitan Planning Organization