community
HEALTH NEEDS ASSESSMENT

Franciscan HEALTH

TIPPECANOE COUNTY



2022 - 2024 REPORT

Franciscan HEALTH

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community HEALTH NEEDS ASSESSMENT

1 LEARN ABOUT FRANCISCAN HEALTH LAFAYETTE EAST & LAFAYETTE CENTRAL

2 EXAMINE THE GEOGRAPHIC, DEMOGRAPHIC AND ECONOMIC TRAITS OF THE COMMUNITY

3 EXPLORE THE SOCIAL DETERMINANTS OF HEALTH AND OTHER HEALTH INDICATORS

4 REVIEW HEALTH OUTCOMES, SUCH AS CHRONIC DISEASES AND ILLNESSES

5 IDENTIFY THE TOP HEALTH NEEDS IN THE COMMUNITY

6 INVESTIGATE COMMUNITY HEALTH PARTNERS AND ASSETS

7 DETERMINE HOW YOU CAN HELP MEET THE NEEDS

8 UNCOVER FRANCISCAN HEALTH'S STRATEGIC THREE YEAR PLAN TO HELP

INTRODUCTION

Franciscan HEALTH

community HEALTH NEEDS ASSESSMENT

Dear Reader,

This report provides findings from the Community Health Needs Assessment (CHNA), a comprehensive review of health data and community input on health issues relevant to the community served by Franciscan Health. The assessment covers a large range of topics, but is not a complete analysis of any one issue. Rather, this data helps to identify priorities which lead to productive community discussions and the creation of goals and objectives. We invite you to investigate and use the information in this report to move toward solutions for healthier communities.

This report meets the current Internal Revenue Service's requirement for tax-exempt hospitals, which is based on the Patient Protection and Affordable Care Act of 2010. More importantly, this document assists Franciscan Health in providing essential services to those most in need. Based on the findings in this report, Franciscan Health will develop a three-year strategic plan on meeting community health needs as capacity and resources allow.

The CHNA collected input from persons representing the broad interests of the overall community, including those with specialized knowledge of, or expertise in, public health and residents of the communities the hospital serves. Franciscan Health partnered with other hospital systems, foundations, and non-profits to conduct a resident survey. Data from a variety of federal, state, and local entities were also reviewed.

You'll find this document organized in such a way as to guide you through the community. **Most importantly, please see the Call to Action. In this section, we share our commitment to improving community health in 2022-2024. We think it's important to be transparent, and we invite others to join us as we know improving health is a total community effort.**

If you have comments, suggestions, or questions about this report, please do not hesitate to contact Kate Hill-Johnson at Katharine.hill-johnson@franciscanalliance.org.

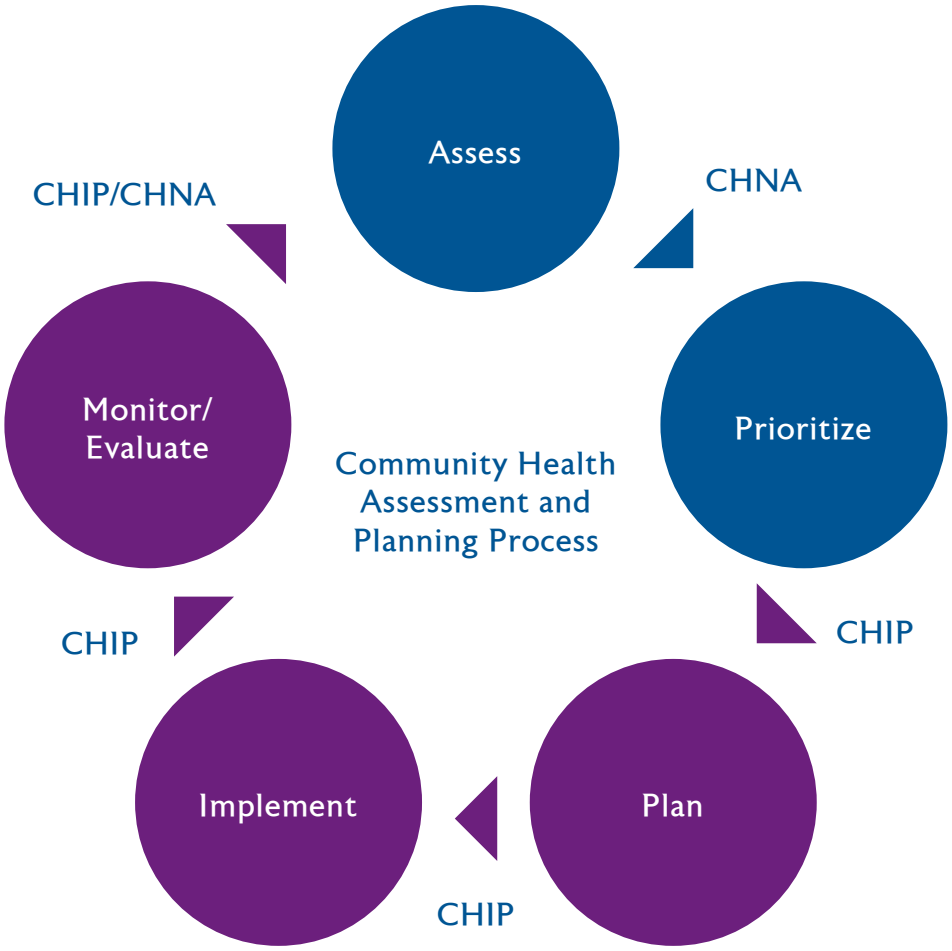
Yours in health,

The Community Health Improvement Team






Every three years, Franciscan Health takes time to assess the health needs of the communities it serves. This assessment allows us to prioritize our resources to implement programs that address these needs with evidence based practices. Throughout each three year cycle, staff evaluate and monitor the effectiveness of our programs. You'll find the strategic plan, also called the Community Health Improvement Plan (CHIP) in the Call to Action Section of this document.



"The ultimate goal of a community health assessment is to develop strategies to address the community's health needs and identified issues. A variety of tools and processes may be used to conduct a community health assessment; the essential ingredients are community engagement and collaborative participation."

– CDC

AUG-DEC 2020
Planning and Consulting with Public Health Experts on CHNA and CHIP Improvement

JAN-FEB 2021
National Public Health Data Reviewed

APR 2021
Community Health Survey Deployed

Two surveys were developed based on the previous cycle's survey with additional questions related to COVID and current stressors. The survey continued to focus on the implementation of interventions related to social determinants of health and health equity. This method added valuable insight to secondary data. One survey was sent to partner organizations to determine community capacity and gaps in the safety net. The other convenience sampled the general community, with emphasis on vulnerable populations.

MAY-JULY 2021
Secondary Data Collection

With the assistance of public health graduate students, data on health and wellness issues was collected. Sources included County Health Rankings, Census Bureau Data, various reports from the Indiana State Department of Health and other national reports. Indiana Indicators, Community Commons and Healthy Communities Institute data management systems also contributed to the secondary data used. Sources of the secondary data are identified throughout this report.

OCT 2021
Analysis of Data and Health Need Prioritization

OCT-NOV 2021
Final Development of CHIP

DEC 2021
Report Completion

FEB-MARCH 2022
Franciscan Health Leadership and Regional Board of Directors Approval

APR 2022
Franciscan Health Board of Trustees Approval

FACILITY INFORMATION

Franciscan HEALTH

community HEALTH NEEDS ASSESSMENT

FACILITY INFORMATION

Throughout our hospitals and many medical practices, we offer a number of nationally recognized Centers of Health Care Excellence.

For 140 years, Franciscan Alliance has stayed true to our founding mission to care for everyone who comes through our doors. We treat our patients with the best possible care by following the guiding ethical values embodied by our founding congregation, the Sisters of St. Francis of Perpetual Adoration. Always mindful of our Christian stewardship to the Roman Catholic Church, we minister with joy, care and compassion according to the ideals of Saint Francis of Assisi and our foundress, Blessed Maria Theresia Bonzel.

Our healthcare system carries forth Christ's healing ministry and strengthens the Catholic health care mission by:

- Providing a broad, coordinated continuum of health care services with an emphasis on improving the health of persons and communities.
- Treating the mind, body and spirit with holistic and comprehensive medical options.
- Developing creative structures for health care delivery.
- Being advocates for those in need.
- Identifying and developing our sisters and laity for Franciscan leadership.

FRANCISCAN HEALTH LAFAYETTE CENTRAL/LAFAYETTE EAST

Address: 501 Hartford Street, Lafayette, IN 47904/
1701 South Creasy Lane, Lafayette, IN 47905
Phone (East): (765)-502-4000
Specific Websites: https://www.franciscanhealth.org/healthcare-facilities/franciscan-health-lafayette-east-62
CEO Name: Terry Wilson

Average Annual Inpatient Admissions (2020): 9,573
Average Annual Outpatient Admissions (2020): 198,864
Average Annual ED Admissions (Arrivals 2020): 39,963
Average Annual Births (2020): 1,943

Number of Employees: 1,785
Number of Volunteers: 215
Number of Doctors (FPN, SPI, & Affiliates): 74
Average Length of Stay (Inpatient 2020 number of days): 4.36



BLESSED MARIA THERESIA BONZEL

Blessed Maria Theresia Bonzel was born on Sept. 17, 1830 in Olpe, Germany. She sought to combine the contemplative and active religious life through an unfailing commitment to Perpetual Adoration of the Blessed Sacrament and the works of mercy in the spirit of Saint Francis of Assisi. She wanted to follow Christ and to serve the poor, and was asked by Bishop Konrad Martin to form a religious Congregation. And thus the Sisters of Saint Francis of Perpetual Adoration was founded on July 20, 1863. On November 25, 1875 Blessed Maria Theresia Bonzel sent six Sisters from Olpe, Germany to Lafayette, Indiana to begin a ministry of healthcare and education for the poor and neglected. After a lifetime of dedicated service and virtuous leadership, Blessed Maria Theresia Bonzel was beatified on November 10, 2013 bestowing on her the title of "Blessed" and moving her one step closer to Sainthood. Today, over 150 years later, the Sisters of Saint Francis of Perpetual Adoration are ministering in the United States, Germany, Brazil and the Philippines.

"One good action or deed will not win the battle; we must daily begin anew."

– Blessed Maria Theresia Bonzel

List of Services (Service Lines):
Behavioral and Mental health, Diabetes and Endocrinology, Gastroenterology and Colorectal, Hospice and Palliative Care, Infectious Disease, Orthopedics, Primary Care, Sleep Medicine, Wound Care, Cancer Care, Diet and Nutrition, Heart Care, Hospital Based Care, Laboratory Services, Pharmacy, Pulmonary and Respiratory Medicine, Surgical Services, Children's Health, Emergency Medicine, Home Health, Imaging and Radiology, Obstetrics and Gynecology (OBGYN), Physical Therapy and Rehabilitation, Rheumatology, Vascular Care

OUR MISSION

Our mission is to Continue Christ's Ministry in our Franciscan Tradition.

OUR COMMUNITY

Franciscan Health Lafayette's community benefit programs target Lafayette and West Lafayette, with the exception of Purdue University. Effort is made to serve the immediately adjacent rural communities. This area also contains the most individuals who participate in community benefit activities, a majority of affiliated services and providers, and residents least served by other health systems.

OUR VALUES

RESPECT FOR LIFE

The gift of life is so valued that each person is cared for with such joy, respect, dignity, fairness and compassion that he or she is consciously aware of being loved.

FIDELITY TO OUR MISSION

Loyalty to and pride in the health care facility are exemplified by members of the health care family through their joy and respect in emphatically ministering to patients, visitors and co-workers.

COMPASSIONATE CONCERN

In openness and concern for the welfare of the patients, especially the aged, the poor and the disabled, the staff works with select associations and organizations to provide a continuum of care commensurate with the individual's needs.

JOYFUL SERVICE

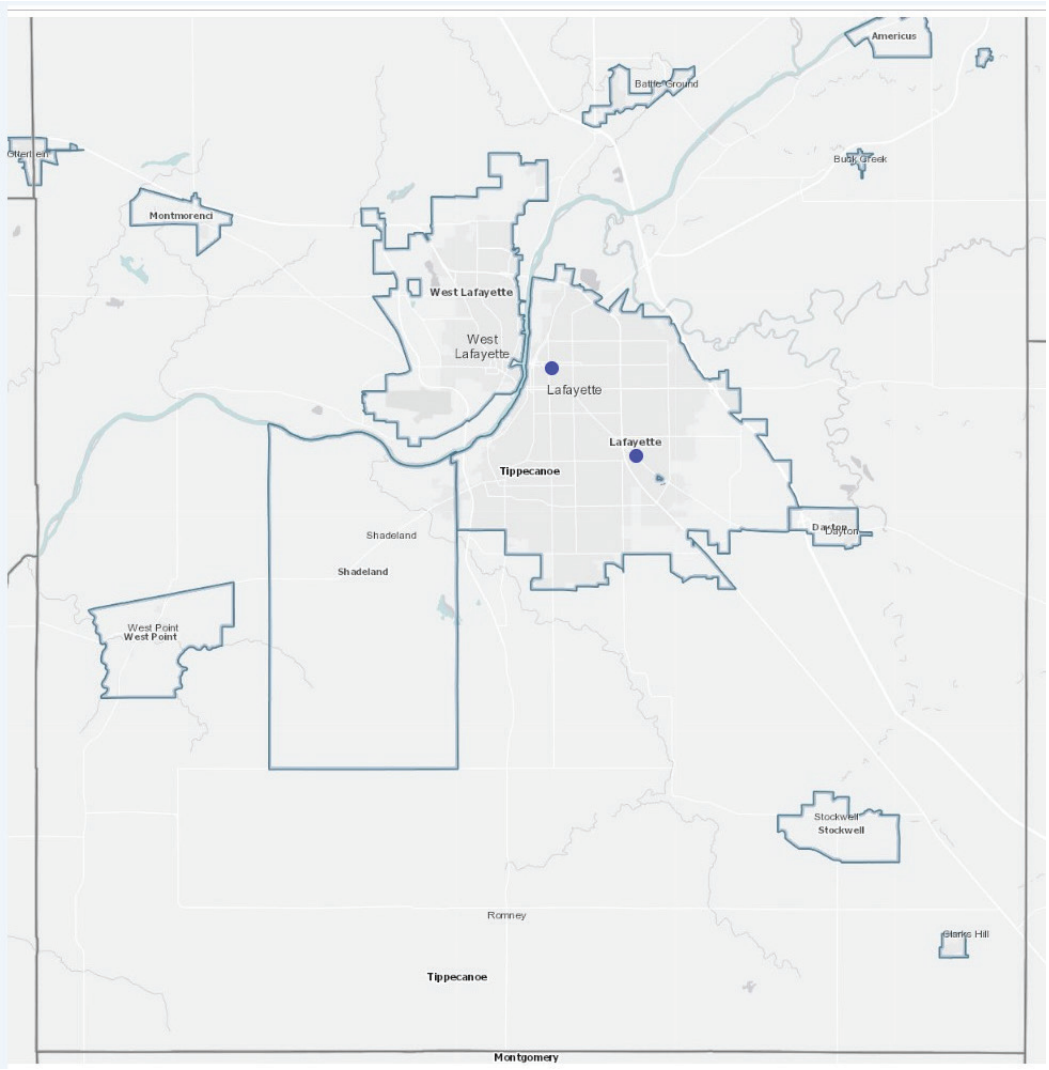
The witness of Franciscan presence throughout the institution encompasses, but is not limited to, joyful availability, compassionate, respectful care and dynamic stewardship in the service of the Church.

CHRISTIAN STEWARDSHIP

Christian stewardship is evidenced by just and fair allocation of human, spiritual, physical and financial resources in a manner respectful of the individual, responsive to the needs of society and consistent with Church teachings.

"Start by doing what is necessary; then do what is possible; and suddenly you are doing the impossible."
– Francis of Assisi

FACILITY INFORMATION



COMMUNITY PROFILE

Franciscan HEALTH

SECTION 1

community HEALTH NEEDS ASSESSMENT

This section details the local community. The community profile contains information such as the geographic details, demographics, and social and economic well-being. Reviewing this information gives readers a sense of the community, including the strengths and challenges of daily living. Because of data constraints and the desire to offer the best snap-shot possible, the community profile may extend beyond the identified target communities for Franciscan Health's community benefit operations.

COUNTY DESCRIPTION



North, Central & South
Indiana Regions



Tippecanoe County
Indiana

DEMOGRAPHICS

Tippecanoe County is located in the west central region of the state of Indiana. The county is home to Purdue University, which brings a large student population. The total population of Tippecanoe County in 2019 was 195,732. Tippecanoe County was established in 1826. The county seat is Lafayette. The largest and most populous city in Tippecanoe County was Lafayette in 2019. It was closely followed by West Lafayette. There are a total of seven cities and towns in the county. Residents not identified in the population estimates below live outside of city or township limits.

Table 1.0: Population Estimates, 2019

Cities & Towns	Populations	Percent of County
Battle Ground	1,975	1.0%
Clarks Hill	727	0.4%
Dayton	1,668	0.9%
Lafayette	71,721	36.6%
Otterbein	399	0.2%
Shadeland	1,916	1.0%
West Lafayette	50,996	26.1%

In 2019, 0.4% of the population was preschool aged children, 14.2% were school aged children, 23.7% were college aged students, 24.9% were young adults, 18.9% were older adults, and 11.9% were seniors. In 2019, the average age of a person in Tippecanoe County was 37.9, which falls in the young adult category.

Table 1.1: Population Estimates by Age, 2019

Population Estimates by Age	Number	Percent Distributed in County	Percent Distributed in State
Preschool: 0 to 4	11,364	0.4%	0.4%
School Age: 5 to 17	28,962	14.2%	17.1%
College Age: 18 to 24	46,422	23.7%	9.8%
Young Adult: 25 to 44	48,663	24.9%	25.5%
Older Adults: 45 to 64	37,041	18.9%	25.2%
Seniors: 65 and older	23,280	11.9%	16.1%
Median Average Age (years)	28.4		37.9

In 2019, 0.1% were Hawaiian natives and other Pacific Islanders, 0.4% of the population was American Indians or Alaskan natives, 5.9% were Black, 8.8% were Asian, 2.2% of the population identified as two or more racial groups, and 82.7% were White. In 2019, 8.7% of the Tippecanoe County population identified as Hispanic and 91% identified as Non-Hispanic.

Table 1.2: Population Estimates by Race (including Hispanic origin), 2019

Population Estimates by Age	Number	Percent Distributed in County	Percent Distributed in State
American Indian or Alaska Native	756	0.4%	0.4%
Asian	17,166	8.8%	2.6%
Black	11,551	5.9%	9.9%
Native Hawaiian & other Pacific Islander	109	0.1%	0.1%
White	161,838	82.7%	84.8%
Two or More Racial Groups	4,312	2.2%	2.2%
Non-Hispanic	178,669	91%	92.7%
Hispanic	17,063	8.7%	7.3%

Veteran Population

According to the 2019 American Community Survey, there were approximately 7,485 U.S. Veterans living in Tippecanoe County, Indiana. Most of the veterans in Tippecanoe County were between 35 and 74 years old.

Population with Disabilities

The Census Bureau defines disability as a long-lasting sensory, physical, mental, or emotional condition or conditions that make it difficult for a person to do functional or participatory activities such as seeing, hearing, walking, climbing stairs, learning, remembering, concentrating, dressing, bathing, going outside the home, or working at a job.

Nearly 9.6% of people living in Tippecanoe County were living with a disability in 2019.

Social and Economic Factors

FINANCIAL

Refer to the table below for a comparison of financial and economic indicators across the state and county.

According to the 2019 American Community Survey, the median household income for Tippecanoe County was $51,228. This was slightly lower than the Indiana median state household income.

Poverty becomes a factor when a family's total income is less than the threshold. The American Community Survey (2019) concluded that 16.1% of Tippecanoe County's population was in poverty. The population with the highest amount of poverty were those between 18 and 34 years of age. When looking at the poverty rate among children under the age of 18, the rate decreased to 14.0%.
In 2019, there were 10,912 recipients of free or reduced lunch in the Tippecanoe County School Corporation.

Table 1.3: Tippecanoe Income & Poverty Rates

Income and Poverty	Number	Percent of State	Indiana
Per Capita Personal Income (annual) in 2019	$39,525	81.2%	$48,678
Median Household Income in 2019	$51,228	88.9%	$57,617
Poverty Rate in 2019	16.1%	135.3%	11.9%
Poverty Rate Among Children under 18	14.0%	92.7%	15.1%
Welfare (TANF) Monthly Average Families in 2019	133	2.0%	6,657
Food Stamp Recipients in 2020	14,121	2.1%	659,095
Free and Reduced Free Lunch Recipients in 2019/2020	10,912	2.1%	507,739

EDUCATION

The following risk factors have generally been associated with increased likelihood of students dropping out of high school: high rate of absenteeism, low level of academic engagement, work or familial responsibilities, internalizing or externalizing behaviors, frequent moving, and attending a school with low achievement scores (Suh, S & Suh, J, 2007; Christle, Jolivette, Nelson, 2007; Rumberger, 2004; Balfanz & Legters, 2004).

In general, dropping out of high school is negatively associated with employment (i.e. difficulty finding a job or maintaining a job) and life outcomes (Child Trends, Data Bank Indicators, 2015). More specifically, high school drop outs are more likely to engage in crimes and exhibit poor health outcomes, especially in regard to mental health (Lochner & Moretti 2004; Freeman, 1996; Alliance for Excellent Education, 2006; Liem, J. H., Dillon & Gore, 2001).

Among one of many goals, Healthy People 2030 aims to increase the high school graduation rate from 84.1% to 90.7% by 2030.

Table 1.4: Educational Attainment Profile in Tippecanoe County

Indicator	Description	Tippecanoe County	Indiana
At Least High School Education	Percent of people aged 25 years or older who have either graduated from high school, completed the GED, or have some other equivalent credential. This percent includes all people who graduated from high school and have completed higher levels of education.	91.6%	88.8%
Bachelor's Degree or Better Education	Percent of people 25 years or older who have at least graduated from college with a bachelor's degree. This does not include vocational, technical schools or job training.	38.7%	26.5%
Disconnected Youth	Percentage of teens and young adults ages 16-19 who are neither working nor in school.	3%	7%

EMPLOYMENT

Unemployment rate is a measure of the prevalence of unemployment and calculated as a percentage by dividing the number of unemployed individuals by all individuals currently in the labor force (United States Department of Labor, 2017). The annual unemployment rate in 2019 was 2.9% in Tippecanoe County with an employment rate of 3.6% by December 2020. In 2019, there were 96,245 employed individuals in Tippecanoe County, while 2,903 were unemployed (STATS Indiana).

Table 1.5: Unemployment in Tippecanoe County

Indicator	Number	Rank in State	Percent of State	Indiana
Total Resident Labor Force	99,148	7	2.9%	3,387,366
Employed	96,245	7	2.9%	3,275,056
Unemployed	2,903	9	2.6%	112,310
Annual Unemployment Rate	2.9%	66	87.9%	3.3%

MAJOR INDUSTRIES

Table 1.6: Industries in Tippecanoe County

Indicator	Employment	Percent Distributed in County	Earnings	Percent Distributed in County	Average Earnings per Job
Total by place of work	116,469	100%	$6,470,854	100%	$55,559
Wage and Salary	98,713	84.8%	$4,737,444	73.2%	$47,992
Farm Proprietors	564	0.5%	($3,408)	-0.1%	($6,043)
Nonfarm Proprietors	17,192	14.8%	$484,788	7.5%	$28,198
Farm	808	0.7%	$5,229	0.1%	$6,472
Nonfarm	115,661	99.3%	$6,465,625	99.9%	$55,902
Private	90,294	77.5%	$4,742,697	73.3%	$52,525

TRANSPORTATION

In 2019, 3.7% of Tippecanoe County residents identified having no vehicle available for use, while 25.9% identified having at least one vehicle available and 42.8% identified having two vehicles available. This means that the majority of residents had vehicular transportation available, but approximately 4,963 residents did not.

ENVIRONMENTAL

Ground-Level Ozone

Ozone occurs naturally in the sky and helps protect us from the sun's harmful rays. But ground-level ozone can be bad for your health and the environment. Ground-level ozone is one of the biggest parts of smog. When ozone levels are above the national standard, everyone should try to limit their contact with it by reducing the amount of time spent outside. Tippecanoe County residents were exposed to unhealthy levels of ozone for one day in 2014.

Particulate Matter

Air pollution is a leading environmental threat to human health. Particles in the air like dust, dirt, soot, and smoke are one kind of air pollution called particulate matter. Fine particulate matter, or PM2.5, is so small that it cannot be seen in the air. Breathing in PM2.5 may: lead to breathing problems, make asthma symptoms or some heart conditions worse, and lead to low birth weight. The national standard for annual PM2.5 levels is 12.0 micrograms per cubic meter. When PM2.5 levels are above 12, this means that air quality is more likely to affect your health. In 2014, the annual level of PM2.5 in Tippecanoe County was 10.9 micrograms per cubic meter.

Drinking Water Safety

In 2018, Tippecanoe County residents were potentially exposed to zero days of unsafe drinking water.

Childhood Lead Poisoning

In 2017, the CDC released Indiana State Surveillance System data indicating that there were 27 confirmed cases of lead poisoning among Tippecanoe County children.

Table 1.7: Environmental Health Indicators

Indicator	Description	Source	Measurement Period	Tippecanoe County	Indiana
Air Pollution - Particulate Matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)	County Health Rankings	2014	10.9	6.1
Drinking Water Violations	Indicator of the presence of health-related drinking water violations measured by a yes/no variable	County Health Rankings	2018	No	N/A

HOUSING

Homeownership

Homeownership rates are defined by the amount of available housing units currently occupied by a homeowner. From 2015-2019, 54.0% of housing units in Tippecanoe County were occupied by a homeowner. The reported homeowner vacancy rate of Tippecanoe County in 2019 was 15.6%.

Renter's Spending 30% or more of household income on rent

From 2015-2019, 6.2% of Tippecanoe County residents, spent 30% or more of their household income on monthly rent payments.

Severe housing problems

Safe and affordable housing is an essential component of healthy communities, and the effects of housing problems are widespread. Residents who do not have a kitchen in their home are more likely to depend on unhealthy convenience foods, and a lack of plumbing facilities increases the risk of infectious disease. Research has found that young children who live in crowded housing conditions are at increased risk of food insecurity, which may impede their academic performance. In areas where housing costs are high, low-income residents may be forced into substandard living conditions with an increased exposure to mold and mildew growth, pest infestation, and lead or other environmental hazards. 18.0% of Tippecanoe County residents had severe housing problems.

Subsidized housing

There are 11 properties considered subsidized housing units recognized by the U.S. Department of Housing and Urban Development in Tippecanoe County.

HEALTH ACCESS

There are four hospitals in Tippecanoe County, Indiana:

Franciscan Health - Lafayette
1701 S Creasy Ln.
Lafayette, IN 47905

Indiana University Health Arnett
5165 McCarty Ln.
Lafayette, IN 47905

Riverbend Hospital
2900 N River Rd.
West Lafayette, IN 47906

Sycamore Springs
833 Park E Blvd.
Lafayette, IN 47905

Health Professions Shortage Areas (HPSAs)

According to the Health Resources and Services Administration, "medically underserved areas/populations are areas or populations [are defined as] having too few primary care providers, high infant mortality, high poverty or a high elderly population."

Tippecanoe County is a primary care and dental HPSA, due to a low income designation. The county also is a mental health geographic HPSA, as well as a designated medically underserved area.

HEALTH PROFILE

Franciscan HEALTH

SECTION 2

community HEALTH NEEDS ASSESSMENT

Section Two reviews social determinants of health that contribute to the community's ability to engage in healthy behaviors and achieve the best quality of life possible. From safe sleep practices to engaging in preventative screenings, these indicators provide an overview of opportunities for improvement.

MATERNAL CHILD HEALTH

Breastfeeding

In 2017, 77.4% of mothers received early prenatal care during their pregnancy. There has been a nearly 6% increase among mothers who received prenatal care since 2013. The smoking rate among expecting mothers has decreased by 4.0% since 2013. According to the CDC, tobacco use during pregnancy is linked to increased miscarriage, premature birth, low birthweight, SIDS, and birth defects (2017). Nearly 10.5% of mothers smoked during pregnancy in Tippecanoe County in 2017. Also in 2017, 84.8% of Tippecanoe County mothers breastfed their children. Since 2013, the population of mothers who breastfed had increased nearly 4% in the county. While this indicator is not a social determinant in the strictest sense, these indicators help readers understand some of the first challenges babies and mothers face.

Table 2.0: Tippecanoe County Prenatal Care Practices, 2013-2017

Indicator	2013	2014	2015	2016	2017	2013-2017 Combined
# Early Prenatal Care	1,595	1,616	1,808	1,690	1,733	8,442
% Early Prenatal Care	71.8%	69.1%	75.7%	71.7%	77.4%	73.1%
State Percent	**67.4%**	**67.5%**	**69.3%**	**69.3%**	**68.6%**	**68.4%**
# Smoked	321	313	273	277	235	1,419
% Smoked During Pregnancy	14.5%	13.4	11.4%	11.7%	10.5%	12.3%
State Percent	**15.7%**	**15.1%**	**14.3%**	**13.5%**	**13.5%**	**14.4%**
# Unmarried Mothers	834	891	886	911	781	4,303
% Unmarried Mothers	37.6%	38.1%	37.1%	38.6%	34.9%	37.3%
State Percent	**43.3%**	**43.3%**	**43.3%**	**42.7%**	**42.8%**	**43.1%**
# Breastfeeding Mothers	1,795	1,856	1,965	1,945	1,899	9,460
% Breastfeeding Mothers	80.8%	79.3%	82.3%	82.5%	84.8%	81.9%
State Percent	**77.3%**	**79.3%**	**80.5%**	**80.9%**	**81.9%**	**80.0%**
# Mothers on Medicaid	882	914	892	898	742	4,328
% Mothers on Medicaid	39.7%	39.1%	37.4%	38.1%	33.1%	37.5%
State Percent	**44.1%**	**43.7%**	**43.0%**	**41.7%**	**41.0%**	**42.7%**
# Teen Births 15-17	36	38	37	27	16	154
Teen Birth Rate (15-17)	12.9	13.2	12.8	9.1	U	12.0
State Rate	**13.1**	**11.9**	**11.1**	**9.6**	**8.9**	**11.0**

* Unstable rate due to fewer than 20 births or outcomes. We do not recommend comparing unstable rates.
** Percentages have been suppressed when there are fewer than 5, including 0, birth outcomes.
Early Prenatal Care: Prenatal care beginning at first trimester
Teen Birth Rate: Live births per 1,000 women in specified age group
Source: Indiana State Department of Health, Division of Maternal and Child Health

Data Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team

Childcare Services

This indicator shows the percentage of total consumer expenditures spent on all childcare. This includes child care, day care, nursery school, preschool, babysitting, and non-institutional day care. Childcare is a major expense for families with young children. Access to affordable and high quality childcare is essential for parents to be able to provide sufficient income for their family while ensuring all of their children's social and educational needs are met. In 2017, there were 19 licensed child care options in Tippecanoe County.

Table 2.1: Childcare Facilities in Tippecanoe County

Child Care Facility Type (2017)	Number of Facilities
# of Licensed Child Care Centers	19
# of Licensed Child Care Homes	77

FOOD SECURITY

Food insecurity is measured by the percentage of people in a county who did not have access to a reliable source of food during the past year. Lacking constant access to food is related to negative health outcomes such as weight-gain and premature mortality. In addition to asking about having a constant food supply in the past year, the measure also addresses the ability of individuals and families to provide balanced meals further addressing barriers to healthy eating. The consumption of fruits and vegetables is important but it may be equally important to have adequate access to a constant food supply. In Tippecanoe County, 15% were considered food insecure in 2020. Feeding America is the largest domestic hunger-relief organization in the United States. According to the 2017 "Map the Meal Gap", the population in Tippecanoe County was 183,397 the food insecurity rate was 15.8%, and the estimated number of food insecure individuals was roughly 29,000.

Food Environment Index

The Food Environment Index ranges from 0 (worst) to 10 (best) and equally weighs two indicators of the food environment: 1) Limited access to healthy foods estimates the percentage of the population that is low income and does not live close to a grocery store. Living close to a grocery store is defined differently in rural and nonrural areas; in rural areas, it means living less than 10 miles from a grocery store whereas in nonrural areas, it means less than 1 mile. "Low income" is defined as having an annual family income of less than or equal to 200% of the federal poverty threshold for the family size. 2) Food insecurity estimates the percentage of the population who did not have access to a reliable source of food during the past year. A two-stage fixed effects model was created using information from the Community Population Survey, Bureau of Labor Statistics, and American Community Survey. There are many facets to a healthy food environment, such as the cost, distance, and availability of healthy food options. This measure includes access to healthy foods by considering the distance an individual lives from a grocery store or supermarket; there is strong evidence that food deserts are correlated with high prevalence of overweight, obesity, and premature death. Supermarkets traditionally provide healthier options than convenience stores or smaller grocery stores. Additionally, access in regards to a constant source of healthy food due to low income can be another barrier to healthy food access. Food insecurity, the other food environment measure included in the index, attempts to capture the access issue by understanding the barrier of cost. Lacking constant access to food is related to negative health outcomes such as weight-gain and premature mortality. In addition to asking about having a constant food supply in the past year, the module also addresses the ability of individuals and families to provide balanced meals further addressing barriers to healthy eating. It is important to have adequate access to a constant food supply, but it may be equally important to have nutritious food available. In Tippecanoe County, the food environment index was 7.3 out of 10 (County Health Rankings, 2015 & 2017).

Table 2.2: Tippecanoe County Food Index

Indicator	Description	Source	Measurement Period	Tippecanoe County	Indiana
Food Environment Index	Percentage of the population that is low-income and has low access to a grocery store, and the percentage of the population that did not have access to a reliable source of food during the past year (food insecurity). Rated on a scale from 0 (worst) to 10 (best).	County Health Rankings	2015 & 2017	7.3	7.1
Food Insecurity	Percentage of population who lacks adequate access to food.	County Health Rankings	2020	15.0%	13.0%
Child Food Insecurity Rate	Percentage of children in a county who are considered food insecure	Feeding America	2018	15.2%	17.5%
SNAP - Authorized Stores	Number of stores in a county authorized to accept and use SNAP benefits.	USDA - Food Environment Atlas	2017	25	N/A
Grocery Store Density	Number of grocery stores in a county	USDA - Food Environment Atlas	2016	25	N/A
Farmers Market Density	Number of farmers markets in a county	USDA - Food Environment Atlas	2018	4	N/A

PHYSICAL ACTIVITY

High Schoolers Physically Active

In 2015, the USDA reported that 25.3% of high schoolers were physically active in the state of Indiana. No specific county-level data was available.

Physical Inactivity

Adult physical inactivity is another valuable health indicator that represents the percent of adults 20 years and older who answered "no" to the following question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" (Indiana Indicators, 2017). According to County Health Rankings, 22% of adults ages 20 or older in Tippecanoe County were identified as physically inactive compared to 26% in the entire state (2017). Healthy People 2030 has a goal to reduce the proportion of adutls who engage in no leisure-time physical activity from 25.4% to 21.2%. Regular physical activity is an important component of maintaining a healthy lifestyle, improving overall quality of life, and reduces risk of chronic health conditions.

Access to Exercise Opportunities

Access to Exercise Opportunities measures the percentage of individuals in a county who live reasonably close to a location for physical activity. Locations for physical activity are defined as parks or recreational facilities. Individuals are considered to have access to exercise opportunities if they:

- reside in a census block that is within a half mile of a park, or
- reside in an urban census block that is within one mile of a recreational facility, or
- reside in a rural census block that is within three miles of a recreational facility.

The numerator is the number of individuals who live in census blocks meeting at least one of the above criteria. The denominator is the total county population. Parks included in the Access to Exercise Opportunities measure include local, state, and national parks. Recreational facilities included in the Access to Exercise Opportunities measure are businesses including gyms, community centers, YMCAs, dance studios and pools.

In Tippecanoe County, 72% of residents had access to exercise opportunities. The average in Indiana was 75%, with a range of 12 to 92%.

Recreation and Fitness Facilities

Fitness and recreation centers are defined as "establishments primarily engaged in operating fitness and recreational sports facilities featuring exercise and other active physical fitness conditioning or recreational sports activities, such as swimming, skating, or racquet sports."

In 2014, it was reported that there were 20 recreation and fitness facilities to service all of Tippecanoe County.

SLEEP HEALTH

Insufficient Sleep (county-level)

Insufficient sleep measures are calculated by measuring the percentage of adults who report getting fewer than seven hours of sleep on average. In 2016, 32% of adults reported this. The state average was 36%.

Proportion of High School Students Who Get Sufficient Sleep

Healthy People 2030 identified sufficient sleep as one of the target health goals for students across the nation. "Sufficient sleep" is defined as eight or more hours of sleep in a single night.

In 2015, it was reported by the Youth Risk Behavior Surveillance System that only 21.4% of Indiana students surveyed identified getting a sufficient amount of sleep.

Proportion of Adults Who Get Sufficient Sleep

In 2015, it was reported by the National Health Interview Survey results that approximately 61.5% of adults in Indiana surveyed identified getting a sufficient amount of sleep.

IMMUNIZATIONS

The table provided gives a comparative view of the rates of immunizations in Indiana and Tippecanoe County (when county-level data is available).

Table 2.3: Immunization Profile Tippecanoe County

Indicator	Description	Source	Measurement Period	Tippecanoe County	Indiana	HP 2030 Goal
Recommended Infant Immunizations	This measure represents the percent of fully immunized and recorded in Indiana's immunization registry (CHIRP)	IDSH, Epidemiology Resource Center, Surveillance and Investigation Division	2017	73%	63%	1.3%
Flu Shot Vaccinations	Percentage of adults, 18 and older, who have received a flu shot in the past year.	ISDH & CDC Behavioral Risk Factor Surveillance System	2017	41%	49%	70.2
Pneumonia Vaccinations	Percentage of adults, aged 65 and older, who have ever received a pneumonia vaccination.	ISDH & CDC and Prevention, Behavioral Risk Factor Surveillance System	2017	N/A	74%	N/A
HPV Vaccinations	Percentage among adolescents 13-17 years with the vaccine as reported by NIS-Teen in 2016.	TeenVaxView	2016	45.2%	N/A	80%

SCREENINGS

Health screenings are an important part of public health because they allow for early detection and treatment of various health conditions. In Tippecanoe County, 87.29% of diabetic Medicare enrollees received routine monitoring in 2015 and 43% of Tippecanoe County female Medicare enrollees received a mammogram in 2017.

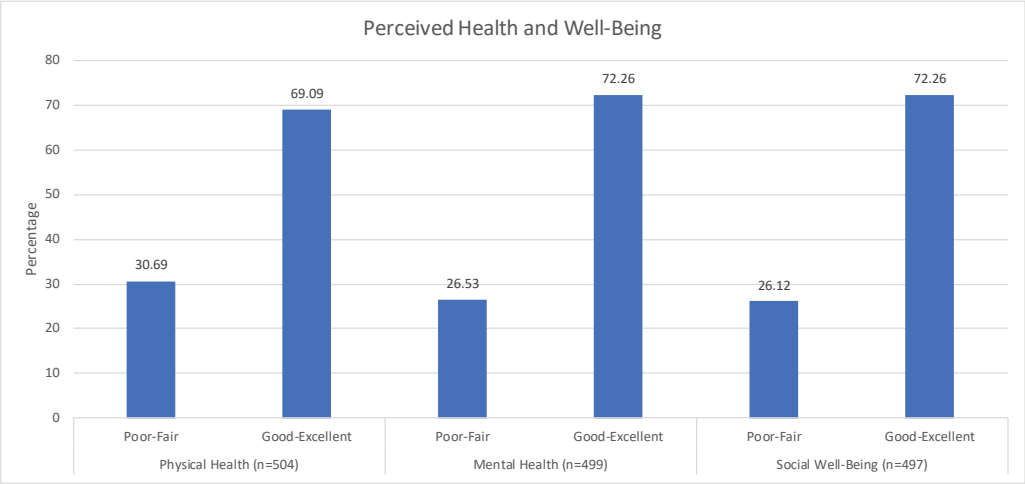
Table 2.4: Tippecanoe County Health Screening Statistics

Indicator	Description	Source	Measurement Period	Tippecanoe County	Indiana
Diabetes Monitoring	Percentage of Medicare enrollees ages 65-75 that receive HbA1c monitoring.	Dartmouth Atlas of Healthcare	2015	87.29	86%
Mammography Screening	Percentage of female Medicare enrollees ages 67-69 that receive mammography screening	County Health Rankings	2017	43%	42%

In the survey conducted for this report, the following information was reported. The convenience sample data reported included responses from targeted vulnerable populations within the community. Please consult the Appendix for the full survey report.

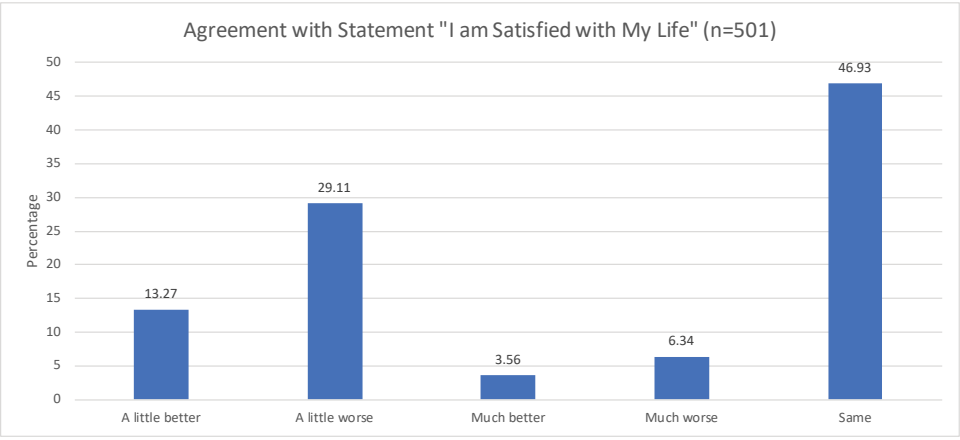
PARTICIPANTS PERCEPTION OF HEALTH AND WELL-BEING

Figure 2.1: Participants' Perception of Health and Well-Being, Tippecanoe County



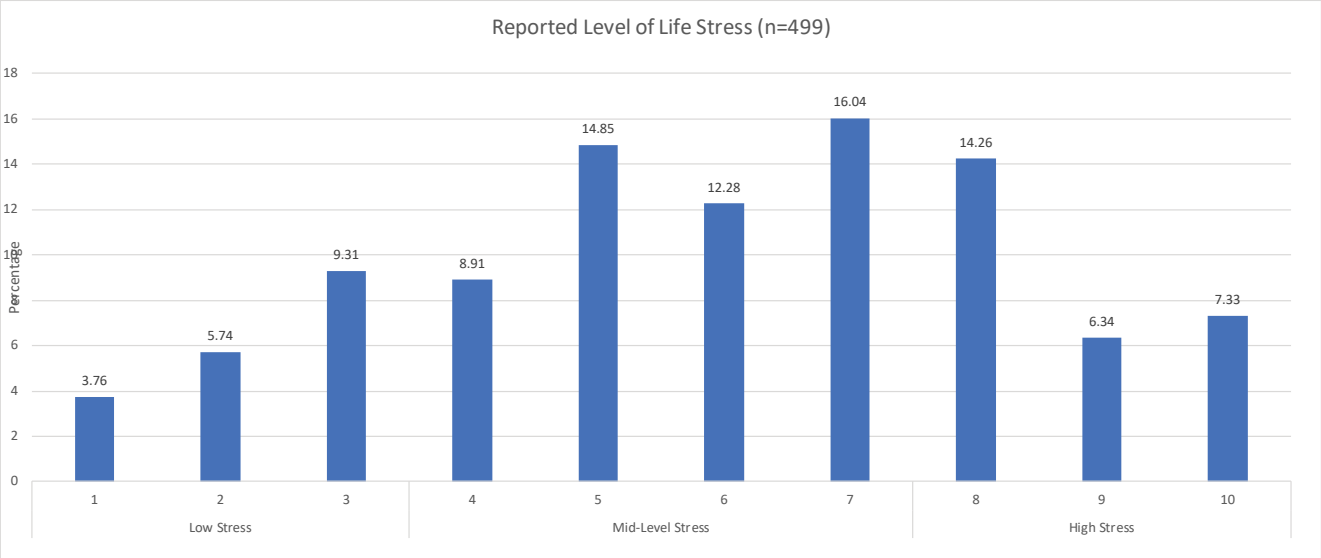
Participants were asked to respond to a single question that asked them to respond to the statement "How has the statement 'In general, I am satisifed with my life' changed before the COVID-19 pandemic" with five response options ranging from much worse to much better. The majority of participants reported "same" with the statement, with 3.56% (n = 18) responding "much better" and 13.27% (n =67) responding "a little better." Some participants 46.93% (n = 237) responded "same." Those indicating less overall life satisfaction responded with "a little worse" 29.11% (n=147) or "much worse" 6.34% (n = 32).

Figure 2.2: Participants Agreement with Life Satisfaction



Level of Stress. Participants were asked to rank their current level of life stress by responding to a single item "Please rank yourself on a scale of 1 to 10 where 1 means you have "little or no stress" and 10 means you have "a great deal of stress." Some participants, 27.93% (n = 141) responded with scores in in the top third of possible responses (eight or higher) indicating that a relatively significant proportion of the participants identify with what would be considered an elevated (or greater) level of stress.

Figure 2.3: Ranking of Level of Life Stress

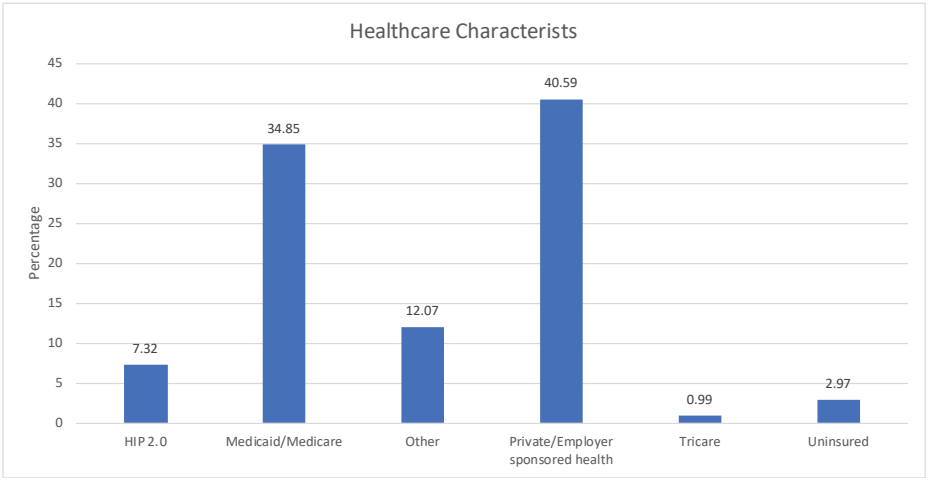


HEALTHCARE ACCESS AND ENGAGEMENT

Participants were asked to respond to a range of questions related to their current level of healthcare coverage and also asked what prevents them from getting the health care you feel you need.

Insurance on Healthcare Coverage. Participants were asked "What health coverage are you currently enrolled in?" Of the participants, the vast majority, 95.82% (n = 484) reported that they did have such coverage or insurance, while 2.97% (n = 15) responded "Uninsured."

Figure 2.4: Participants' Reported Insurance and Personal Provider Characteristics



Healthcare Engagement. Participants were provided with a list of 11 health-related services and types of healthcare engagement and asked what prevents them from getting the health care they feel they need.

Table 2.5: Participants' Reported Types of Healthcare Engagement (n=505)

What prevents you from getting the health care you feel you need? (Select all that apply.)		
	Number	Percentage
Cultural/religious beliefs	8	1.58%
Do not know how to find the type of doctor I want	94	18.61%
Fear (e.g., not ready to face/discuss health problem)	126	24.95%
I cannot get an appointment when I am available	149	29.50%
Language barriers	12	2.37%
Immigration status	5	0.99%
No insurance and unable to pay for the care	35	6.93%
Unable to pay co-pay/deductibles	101	20.00%
Transportation	41	8.11%
Lack of access to a computer	25	4.95%
Bad past medical experience	90	17.82%

Resources and Healthcare Engagement. Participants were provided a list of 10 resources they might have had trouble getting or accessing during the COVID-19 pandemic. Participants were asked to select all that applied to trouble getting or accessing resources. A majority of participants reported "not applicable" to this question. Table 2.6 breaks down each response to the 10 resources.

Regarding access to healthcare/doctor visits, 29.90% of participants (n = 151) indicated that they had trouble getting or accessing a healthcare provider or getting a doctor visit.

Regarding needing to fill a prescription/medication, 10.30%, (n = 52) indicated that that they were not able to fill a medication or prescription.

Regarding needing transportation, 10.69% of participants (n = 54) indicated that they had not been able to access transportation due to other needs.

Figure 2.5: Participants' Reports of Resource Challenges and Healthcare

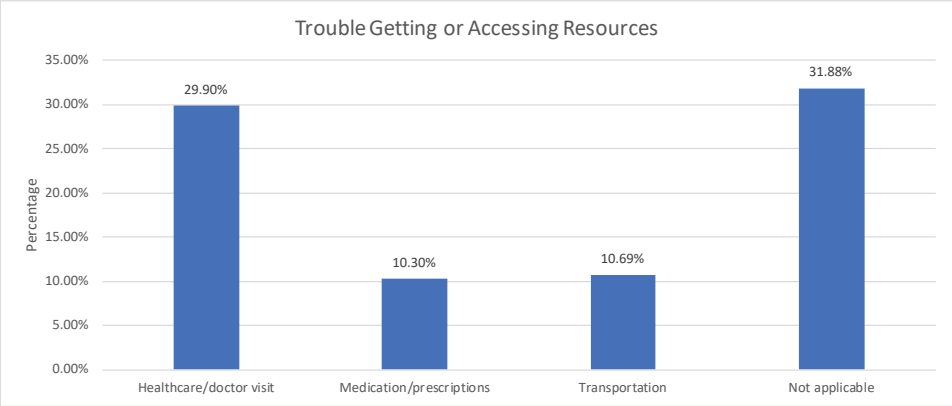


Table 2.6: Participants' Reports of Resource Challenges and Healthcare

During the COVID-19 pandemic, have you had trouble getting or accessing any of the following? (Select all that apply.) (n=505)		
	Number	Percentage
Exercise/physical activity	162	32.08%
Food/groceries	80	15.84%
Healthcare/doctor visit	151	29.90%
Infant supplies	11	2.18%
Medication/prescriptions	52	10.30%
Spiritual/religious support	67	13.27%
Transportation	54	10.69%
Time with family	237	46.93%
Utilities	52	10.30%
Not applicable	161	31.88%

PERSONAL HEALTH-RELATED BEHAVIORS

The hospital was interested in a general understanding of the extent to which participants had participated in certain behaviors within the past 30 days. Of particular interest were behaviors that were conceptualized as health-promoting (e.g., behaviors perceived by the hospital to be supportive of ones' health and well-being) or health-challenging (e.g., behaviors perceived by the hospital to be challenging to ones' health and well-being). Table 2.7 provides a summary of this data.

Table 2.7: Self-Reported Health Behaviors (n=505)

What type of health changes do you want to make in the next year? (Choose up to 3).		
	Number	Percentage
Drinking less alcohol	24	4.75%
Eating better food	267	52.87%
Improving sleep	190	37.62%
Managing Stress	195	38.61%
Getting more exercise	285	56.44%
Improving relationships	92	18.22%
Quitting tobacco or nicotine products	33	6.53%
Getting recommended health screenings, like blood tests or mammograms	43	8.51%
Finding a doctor	47	9.31%

SOCIAL DETERMINANTS OF HEALTH

Of particular interest was a better understanding of whether participants perceived that certain social issues (often considered to be determinants of health status) were impacting their lives. Participants were provided with a list of 12 statements and asked to report the extent to which that statement applied to them. Each statement reflected a particular social determinant of health.

Table 2.8: Participants' Reports of Felt Social Determinants

Which of these items cause you stress in your DAILY life? (Check all that apply.) (n=505)		
	Number	Percentage
Not enough food	28	5.54%
Having a safe place to live	48	9.50%
Paying utility bills	100	19.80%
Reliable transportation	81	16.04%
Violence inside the place I live	12	2.38%
Violence or crime in my neighborhood	59	11.68%
Getting or maintaining a good job	75	14.85%
Lack of support from family and friends	140	27.72%
Lack of spiritual/pastoral support	48	9.50%
Experiencing disrespect or discrimination	71	14.06%
Language barriers	16	3.17%
Financial planning/budgeting	198	39.21%

HEALTH OUTCOMES

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SECTION 3

community HEALTH NEEDS ASSESSMENT

The previous sections highlighted the environment and factors that contribute to health. Those factors, along with genetics, personal choice, and access to health services, lead to various health outcomes. This section reviews major health issues faced by residents.

ACCIDENTS, INJURIES, AND HOMICIDES

Unintentional injury and accidents continue to rank in the top 15 leading causes of injury or death, across the state and within the county. County and state data regarding injury prevention and safety indicators are shown below.

Table 3.0: Alcohol & Driving-Related Indicators

Indicator	Description	Source	Measurement Period	Tippecanoe County	Indiana	HP 2030 Goal
Traffic Injury Mortality	Number of road traffic fatal injury deaths per 100,000 population (age-standardized).	Civil registration and vital statistics systems with full coverage	2017	8.9	13.4	10.1
Alcohol-Impaired Driving Deaths	Percentage of motor vehicle crash deaths with alcohol involvement.	County Health Rankings	2014-2018	21%	20%	28.3%

Table 3.1: Unitentional Injury Indicators

Indicator	Description	Source	Measurement Period	Tippecanoe County	Indiana	HP 2030 Goal
Unintentional Injury Mortality	Unintentional injury mortality is represented by the number of deaths per 100,000 people.	ISDH	2017	42.8	58.0	43.2
Unintentional Poisoning Mortality	Unintentional poisoning mortality is represented by the number of deaths per 100,000 people.	ISDH	2017	15.1	27.3	N/A
Injury ED Visits	This measure represents the number of injury related emergency department encounters among Indiana residents per 10,000 people.	ISDH, Epidemiology Resource Center and Injury Prevention and Trauma Program	2017	674.6	849.6	N/A
Injury Hospitalization	This measure represents the number of injury related hospital admissions among Indiana residents per 10,000 people.	ISDH, Epidemiology Resource Center and Injury Prevention and Trauma Program	2017	58.4	69.1	N/A
Homicide Mortality	Homicide mortality is represented by the number of deaths per 100,000 people.	ISDH	2017	6.2	7.1	5.5

BEHAVIORAL HEALTH

Quality of Life Indicators

Mentally Unhealthy Days
According to County Health Rankings, Poor Mental Health Days measures the average number of mentally unhealthy days reported in past 30 days. This measure is based on responses to the Behavioral Risk Factor Surveillance System (BRFSS) question: "Thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?" Tippecanoe County's value of 5.2 was the average number of days an adult living in the county reported that their mental health was not good (2017).

Table 3.2: Tippecanoe County Mental Health Profile

Indicator	Days or Percent	Error Margin
Frequent Physical Distress	14%	11-12%
Frequent Mental Distress	15%	13-14%
Mentally Unhealthy Days	5.2	3.5-5.2

Physically Unhealthy Days
Physically unhealthy days are determined by the average number of days reported over the course of one month. In Tippecanoe County, the average was 4.4 days per every 30 days.

Disconnected Youth
The amount of disconnected youth is measured by the percentage of teens and young adults (ages 16-24) who are neither working nor in school. The average in the state of Indiana was 7%. Tippecanoe County was lower than the state average at 3%.

Substance Abuse/Recovery
Excessive Drinking measures the percentage of a county's adult population that reports binge or heavy drinking in the past 30 days. Binge drinking is defined as a woman consuming more than four alcoholic drinks during a single occasion or a man consuming more than five alcoholic drinks during a single occasion. Heavy drinking is defined as a woman drinking more than one drink on average per day or a man drinking more than two drinks on average per day. The numerator is the sum of binge and/or heavy drinking while the denominator is the total county population. In Tippecanoe County, 20% of surveyed adults reported excessive drinking in the past 30 days.

Suicide
This measure is determined by averaging the percent change of the age-adjusted death rate per 100,000 people each year. The average number of deaths due to suicide deaths per 100,000 population in Tippecanoe County was 17.1. For the entire state of Indiana, the average was 16.2 (Indiana Indicators, 2017).

Infectious Disease Rates

Hepatitis C Virus Infections

The Hepatitis C Virus (HCV) is a blood-borne virus primarily transmitted by an HCV-infected person. HCV occurs in the first several months after infection and results in illness from very mild or no symptoms to a serious acute HCV infection requiring hospitalization. Many people living with HCV do not have symptoms and do not know they are infected. Chronic HCV infection results when a person is not able to clear the virus after an acute infection. In 2018, the rate of acute infection in Indiana was 5.7 cases per 100,000. In Tippecanoe county we see that the incidence rate is 7.2 but is unstable due to the low number of cases present. For Chronic infections we see that there are 85.8per 100,000 residents.

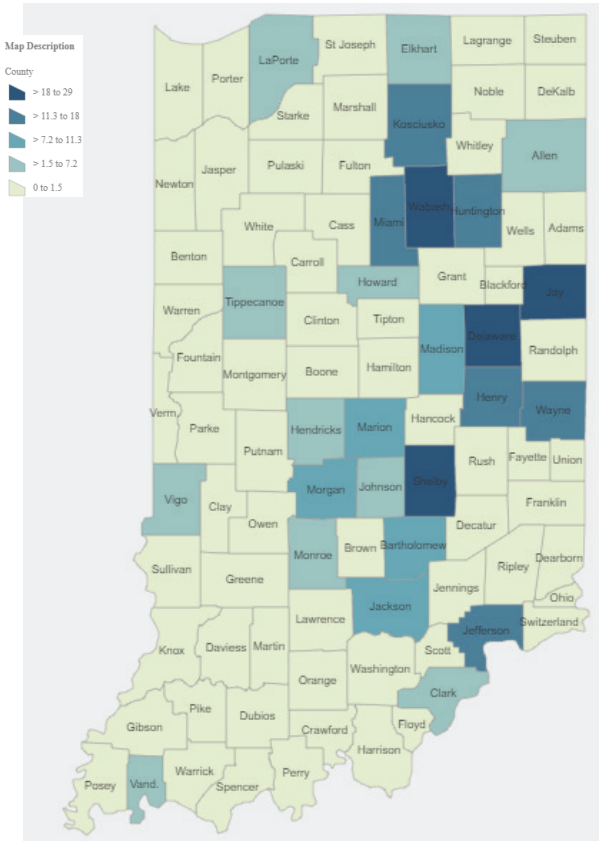


Figure 3.0: Tippecanoe County Acute Hepatitis C Rates

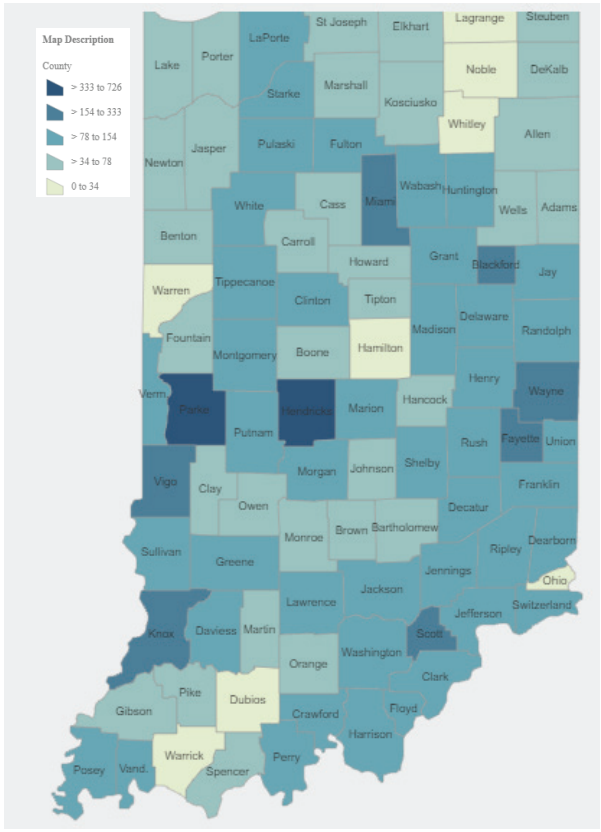
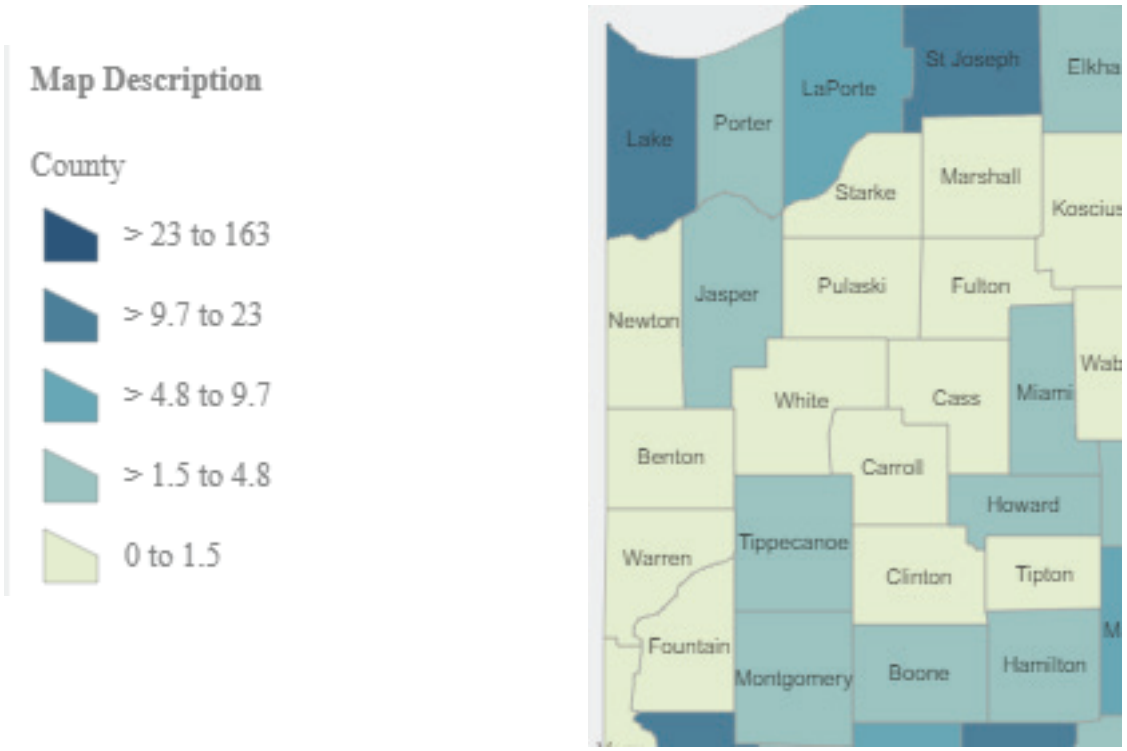


Figure 3.1: Tippecanoe County Chronic Hepatitis C Rates

Newly Diagnosed HIV/AIDS

The Human Immunodeficiency Virus (HIV) is transmitted by an HIV-infected person having unprotected sex or by sharing needles, syringes, and other injection equipment. Sharing these objects put individuals at high risk for transmitting HIV because the drug materials may have blood in them, which can carry HIV. Use of drugs can reduce inhibitions and increase sexual risk behaviors, which may result in other STDs. Currently there is no cure for HIV, but treatment with antiviral therapy greatly extends the life expectancy of people living with HIV. From 2014 to 2018, the rate of newly diagnosed HIV/AIDS infection in Indiana increased by 7 from 7.8 (n=515) to 7.8 (n=522) cases per 100,000 population. The new diagnosed HIV and AIDs by County was 4.1 in Tippecanoe County which is lower than the average in Indiana.

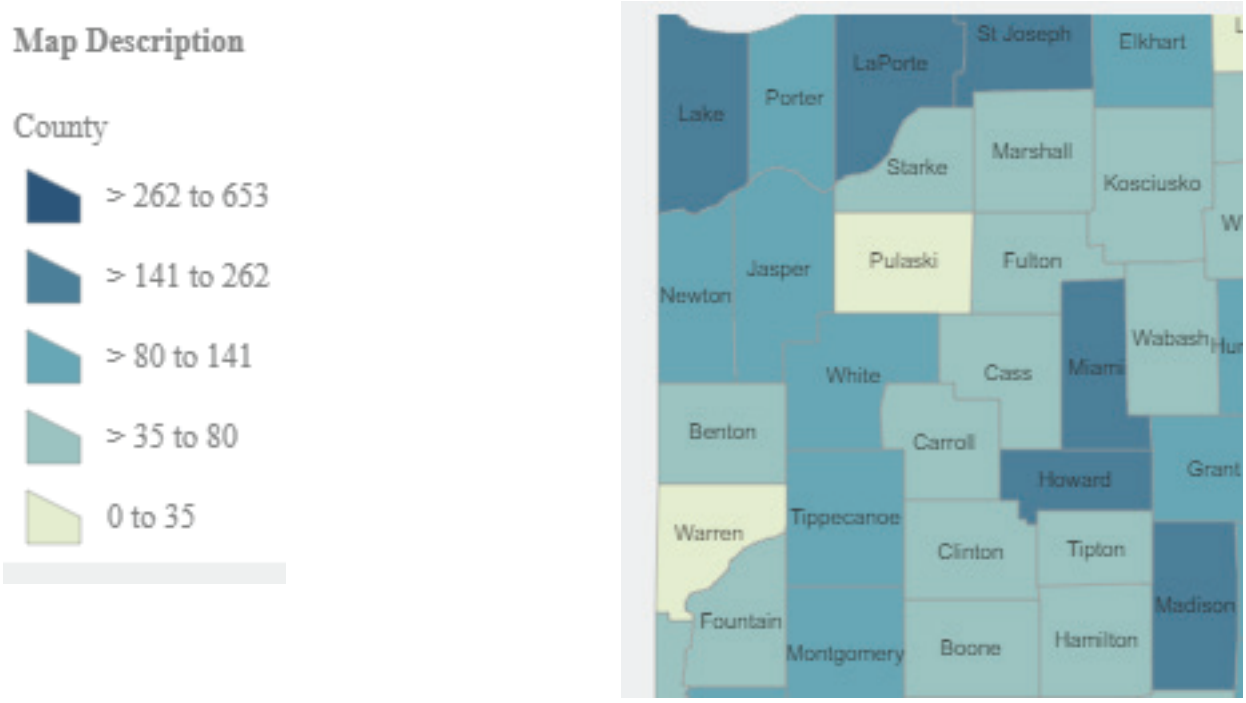
Figure 3.2: Tippecanoe County Newly Diagnosed HIV/AIDS Cases



HIV/AIDS Prevalence

The Human Immunodeficiency Virus (HIV) prevalence is dealing with the number of existing cases of HIV at a specified time. From 2015 to 2018, the number of Indiana residents living with HIV/AIDS increased from 11,698 to 12,708 cases. In Tippecanoe County the number of prevalent cases is estimated to be 187.

Figure 3.3: Tippecanoe County HIV/AIDS Prevalence



Chlamydia

Chlamydia is a common sexually transmitted disease (STD) that is transmitted to both men and women through unprotected anal, vaginal, or oral sex. The infection is caused by bacteria that are effectively treated with antibiotics. From 2016 to 2019, the rate of Chlamydia infection in Indiana remained relatively stable, 465 (n=30,847) and 526.3 (n=35,430) cases per 100,000 population, respectively. In Tippecanoe County the number of new cases of Chlamydia in 2019 was 560.5 per 100,000 residents.

Gonorrhea

Gonorrhea is an STD that is transmitted to both men and women through unprotected anal, vaginal, or oral sex. The infection is caused by bacteria that are effectively treated with antibiotics. From 2016 to 2019, the rate of Gonorrhea infection in Indiana increased slightly from 142.5 (n=9,451) to 177.1 (n=11,926) cases per 100,000 population. The number of new cases of Gonorrhea in Tippecanoe County was 164 per 100,000 population in 2019.

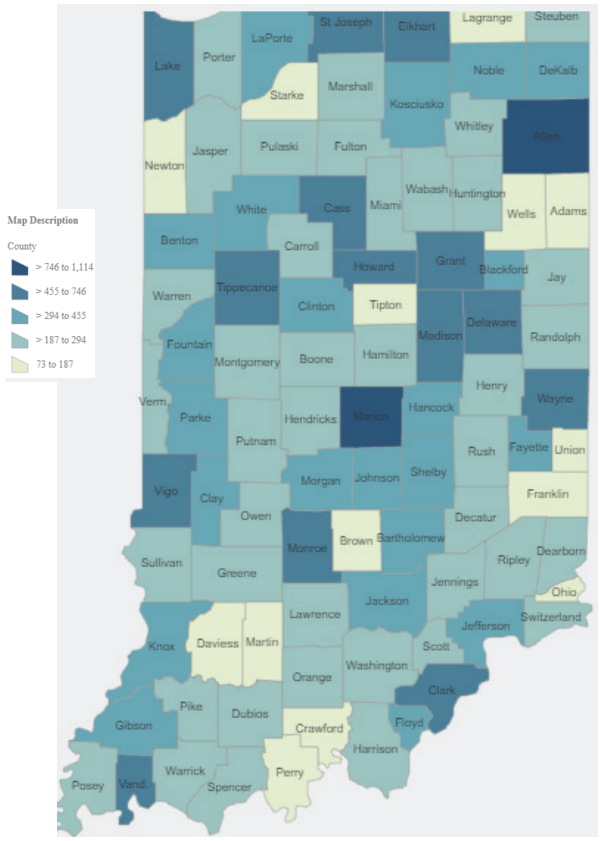


Figure 3.4: Tippecanoe County Chlamydia Cases, 2019

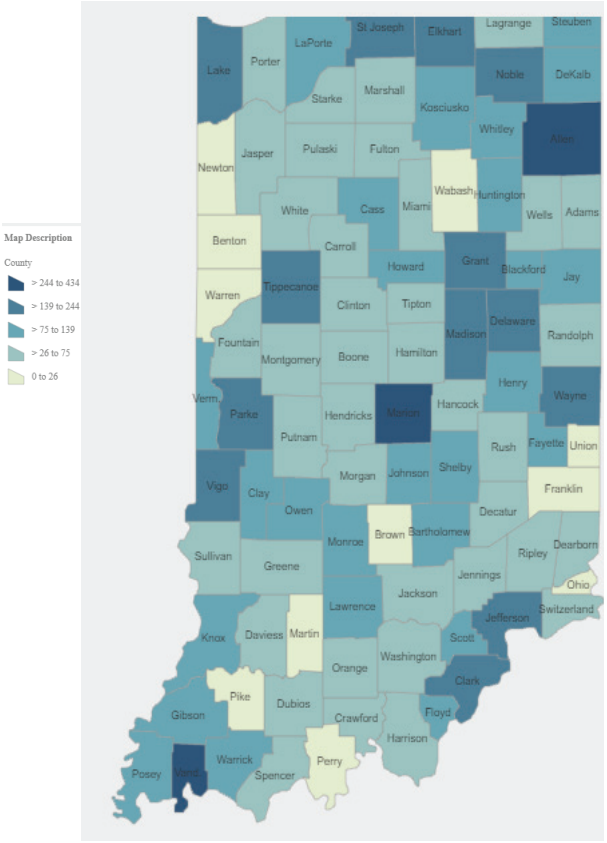


Figure 3.5: Tippecanoe County Gonorrhea Cases, 2019

MATERNAL, INFANT AND CHILD HEALTH

Since 2013, the number of live births in Tippecanoe County has stayed relatively stable at around 2,300 a year. The number of babies born with low birth weight in Tippecanoe County has also remained stable with around 160 low births per year. The number of babies born before 37 weeks gestation in Tippecanoe County has relatively stable with the average of the 7.1%. Infant death rates had increased from 6.8 in 2013 to 9.6 in 2015.

From 2013 to 2017, there had been fluctuation in the number of neonatal deaths ranging from seven to 13 over this time period. This same trend was seen in the number of infant deaths from 2013 to 2017 with a range of 8 to 23. The infant mortality rate has been consistently over the state rates.

Table 3.3: Tippecanoe County Birth Outcomes Indicators

Indicator	2013	2014	2015	2016	2017	2013-2017 Combined
# Live Births	2,221	2,340	2,388	2,358	2,240	11,547
# Low Birth Weight	156	179	159	157	169	820
% Low Birth Weight	7.0%	7.6%	6.7%	6.7%	7.5%	7.1%
State Percent	***7.9%***	***7.9%***	***8.0%***	***8.2%***	***8.3%***	***8.1%***
# Preterm Births	181	217	204	203	229	1,034
% Preterm Births	8.1%	9.3%	8.5%	8.6%	10.2%	8.9%
State Percent	***9.6%***	***9.7%***	***9.6%***	***10.0%***	***9.9%***	***9.8%***
# Infant Deaths	15	21	23	8	17	84
Infant Mortality Rate per 1,000 Live Births	6.8	9	9.6	U	U	8.4
State IMR	***7.1***	***7.1***	***7.3***	***7.5***	***7.3***	***7.3***
# Neonatal Deaths	8	13	12	7	13	53

Preterm births is before 37 weeks gestation
Low birth weights is less than 2,500 grams
Very low birth weights is less than 1,500 grams

*=Unstable rate due to less than 20 deaths
**=Percentages have been suppressed when there are fewer than 5 deaths
Source: Indiana State Department of Health, Division of Maternal and Child Health

Young Child

In Tippecanoe County In 2015 there were three fatalities due to neglect or abuse in Tippecanoe County. One death was due to abuse and two were due to neglect. We also see over the past few years the number of children in need of service has been over 200 children.

Table 3.4: Tippecanoe County Young Child Indicators

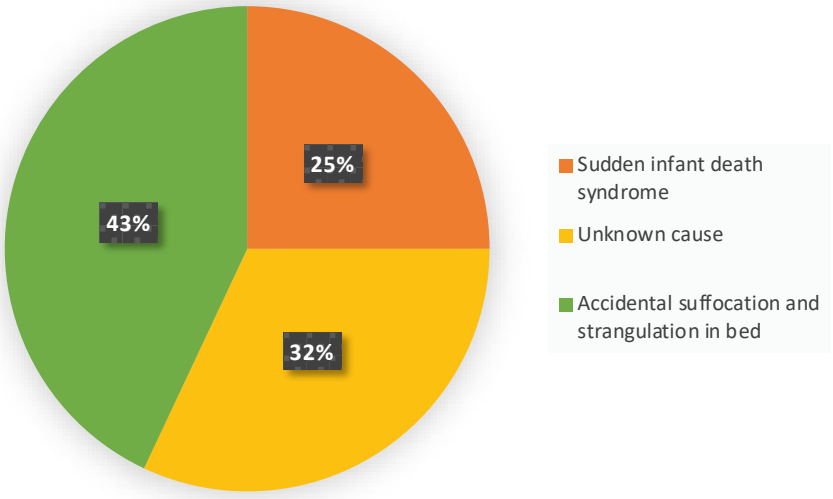
Location	Measure	2013	2014	2015	2016	2017
Tippecanoe	Number of Children in Need of Services	209	305	294	372	483

Sudden Unexpected Infant Death & Sudden Infant Death Syndrome

According to the CDC, sudden unexpected infant deaths (SUIDS) occur among infants less than one year old and have no immediately apparent cause (2017). The three commonly reported types of SUID include the following:

1. Sudden infant death (SIDS)
2. Unknown cause
3. Accidental strangulation or suffocation in bed

Figure 3.6: Commonly Reported SUIDs in Indiana



SOURCE: CDC/NCHS, National Vital Statistics System, Compressed Mortality File.

CHRONIC DISEASES

Chronic diseases are among the most prevalent and costly health issues in Indiana and across the nation. Indiana has significantly inflated rates compared to the nation in regard to a variety of chronic health diseases. Chronic diseases are often easily detected and preventable.

RESPIRATORY DISEASES

Respiratory disease continues to be a problem in Tippecanoe County as asthma and other respiratory disease like COPD lead to emergency department visits and hospitalization. The table below shows respiratory disease rates in Tippecanoe and Indiana for comparison. The number of pediatric and adult asthma cases is show in the table below as well along with the percentage of adults who smoke in the county.

Table 3.5: Tippecanoe County Asthma Indicators

Indicator	Number of Indicator
Pediatric Asthma Count	3,479
Adult Asthma Count	14,883
Adults who Smoke	66,977

Table 3.6: Tippecanoe County Other Respiratory Indicators

Indicator	Description	Source	Measurement Period	Tippecanoe County	Indiana
Asthma ED Visits	This measure represents the number of asthma-related emergency department encounters among Indiana residents per 10,000.	ISDH, Epidemiology Resource Center	2017	31.7	43.3
Child Asthma ED Visits	This measure represents the number of asthma-related emergency department encounters among Indiana children ages 5 to 17 per 10,000 children.	ISDH, Epidemiology Resource Center	2017	38.2	57
Asthma Hospitalization	This measure represents the number of asthma-related hospital admissions among Indiana residents per 10,000 people.	ISDH, Epidemiology Resource Center	2017	2.1	4
Child Asthma Hospitalization	This measure represents the number of asthma-related hospital admissions among Indiana children ages 5 to 17 per 10,000 children.	ISDH, Epidemiology Resource Center	2017	0	4.8
Age-Adjusted Population Rate due to COPD	Average annual age-adjusted hospitalization rate due to chronic obstructive pulmonary disease per 10,000 people aged 18 years and older.	Centers for Medicare & Medicaid Services	2018	<65 yo 15.8% >65 yo 12.0%	<65 17.5% >65 13.6%
COPD Medicare Population	The percentage of Medicare beneficiaries who were treated for chronic obstructive pulmonary disease (COPD).	Centers for Medicare & Medicaid Services	2018	12.6%	14.3%
Chronic Lower Respiratory Disease Mortality	Chronic lower respiratory disease mortality is represented by the number of deaths per 100,000 people.	ISDH, Epidemiology Resource Center	2017	58.5	55.2

CANCER

General cancer rates are higher in Tippecanoe County than the Indiana state average at 488.8 and 467.2 per 100,000 residents respectively. The cancer incidence rates in Tippecanoe County are all higher than the state averages other than lung cancer. In terms of mortality, colorectal, breast and prostate cancers are both above the state averages.

Table 3.7: Cancer Indicators

Indicator	Tippecanoe County	Indiana	HP 2030 Goal
Cancer Incidence	488.8	467.2	N/A
Lung	68.7	71.9	N/A
Colorectal	49.1	42.4	N/A
Female Breast	126.3	121.7	N/A
Prostate	108.7	89.9	N/A
Cancer Mortality	176.1	169.9	122.7
Lung	47.2	47.2	25.1
Colorectal	17.9	15.8	8.9
Female Breast	23.3	21.0	15.3
Prostate	21.1	18.7	16.9

*Measurement period for cancer incidence rates was 2016 and mortality incidence rate data was collected in 2017. Rate per 100,000 population.

CARDIOVASCULAR DISEASE

Cardiovascular disease continues to be a problem in Tippecanoe County as stroke; heart disease and other cardiovascular diseases lead to emergency department visits and hospitalization. Table 3.8 shows cardiovascular disease rates in Tippecanoe County. The number of hospitalizations and deaths are shown in the table as well as the given measurement period.

Table 3.8: Cardiovascular Indicators

Indicator	Description	Source	Measurement Period	Tippecanoe County
Stroke Hospitalization	This measure represents the number of stroke hospital admissions per 10,000 population	ISDH, Epidemiology Resource Center	2017	20.8
Stroke Deaths	This measure represents the number of stroke related deaths per 100,000 population.	ISDH, Epidemiology Resource Center	2017	44.2
Heart Disease Hospitalization	This measure represents the number of heart disease related hospital admissions per 10,000 population.	ISDH, Epidemiology Resource Center	2017	72.8
Heart Disease Deaths	This measure represents the number of heart disease deaths per 100,000 population.	ISDH, Epidemiology Resource Center	2017	173.7
Acute Myocardial Infarctions Hospitalizations	This measure represents the number of acute myocardial infarctions related hospital admissions per 1000 Medicare beneficiaries 65 and older.	CDC	2013-2015	10.7
Acute Myocardial Infarctions Deaths	This measure represents the number of acute myocardial infarctions related deaths per 100,000 population.	CDC	2014-2016	74.3
Heart Failure Hospitalizations	This measure represents the number of heart failure hospital admissions per 1000 Medicare beneficiaries 65 and older.	CDC	2013-2015	34.9
Heart Failure Deaths	This measure represents the number of heart failure deaths per 100,000 population.	CDC	2013-2015	178.8

DIABETES

Obesity

The obesity rate in Tippecanoe is the same as the states average at 33%. We also see that diabetes in those 20 and older is lower in Tippecanoe County than that of the state average. Trends like these being above the states average can be changed with healthier lifestyle choices and improved physical activity.

Table 3.9: Diabetes Indicators

Indicator	Description	Source	Measurement Period	Percentage or Rate	
				Tippecanoe County	Indiana
Diabetes Prevalence	Percentage of adults aged 20 or older with medically diagnosed diabetes.	County Health Rankings	2018	8%	12%
Adults, aged 20 and older, with Diabetes	Percentage of adults aged 20 and olderw ho have ever been diagnosed with diabetes.	CDC	2017	9.4%	11.1%
Age-Adjusted Hospitalization Rates due to Diabetes	Average annual age-adjusted hospitalization rate due to diabetes per 10,000 population aged 18 years and older, including type 1 and 2.	Indiana Hospital Association	2014-2016	24.3	20.3
Age-Adjusted Hospitalization Rate due to Short-Term Complications of Diabetes	Age-adjusted hospitalization rate due to short-term complications of diabetes per 10,000 population aged 18 years and older.	Indiana Hospital Association	2014-2016	1.4	9.0
Age-Adjusted Hospitalization Rate due to long-Term Complications of Diabetes	Age-adjusted hospitalization rate due to long-term complications of diabetes per 10,000 population aged 18 years and older.	Indiana Hospital Association	2014-2016	11.0	9.5
Age-Adjusted Hospitalization Rate due to Uncontrolled Diabetes	Average annual age-adjusted hospitalization rate due to uncontrolled diabetes per 10,000 population aged 18 years and older.	Indiana Hospital Association	2014-2016	1	1.5

TOP HEALTH NEEDS

Franciscan HEALTH

SECTION 4

community HEALTH NEEDS ASSESSMENT

Collecting data for this report presented many challenges due to delayed secondary data sets, COVID restrictions, and the complications of daily life in 2020 and early 2021. Fortunately, the large scale of research in the 2019-2021 report allowed the Community Health Improvement Team to use previous tools and update the overall findings for this new cycle. As in every data collection and analysis process, there are many limitations to the data.

Two surveys were conducted in 2021. The first focused on community based organizations, including food pantries, schools, social service agencies, health care providers, community action programs, and local government offices. This survey highlighted strengths and weaknesses in community safety nets and populations most in need of additional services.

The second survey was deployed to those living in Franciscan Health communities using convenience sampling. Individuals on Franciscan Health's various email list serves received two invitations to complete the survey. In addition, staff worked with partner organizations to get responses from the most vulnerable populations in communities, such as those in homeless shelters, using food pantries, receiving health care from a federally qualified health center, or those who speak languages other than Spanish and English. By using income and insurance qualifying questions, staff are able to understand unique needs in the general population versus vulnerable populations. The public survey focuses on opinions, needs, and community resources.

Secondary data for this report relies on the data collection efforts of other organizations, such as state health departments, federal agencies, and others. This data is often lagging in time or represents larger geographic areas than preferred.

The following details more survey findings, followed by the results of the data assessment.

STRESS AND COVID

As a gage of health and wellbeing, respondents indicated their perceived physical, mental, and social health.

Table 4.1: Perceived Health and Wellbeing, Tippecanoe County

Response	Excellent		Fair		Good		Poor		Very good	
	Number	%	Number	%	Number	%	Number	%	Number	%
Your physical health is…	36	7.12	111	21.98	189	37.42	44	8.71	124	24.55
Your mental health is…	57	11.28	100	19.80	175	35.24	34	6.73	130	25.74
Your social well-being is…	22	10.89	91	18.01	173	34.25	41	8.11	137	27.12

To clarify the impact of COVID, participants were also asked to rank change in life satisfaction as a result of COVID.

Table 4.2: Pandemic Life Satisfaction, Tippecanoe County

Response	Number	Percentage
A little better	67	13.27%
A little worse	147	29.11%
Much better	18	3.56%
Much worse	32	6.34%
Same	237	46.93%

Participants were also asked to rate their average level of stress during the past month.

Table 4.3: Levels of Stress, Montgomery County

Level of Stress	Number	Percentage
1	19	3.76%
2	29	5.74%
3	47	9.31%
4	45	8.91%
5	75	14.85%
6	62	12.28%
7	81	16.04%
8	72	14.26%
9	32	6.34%
10	37	7.33%

The table below examines some of the causes of daily stress.

Table 4.4: Which of These Items Cause Stress In Your Daily Life, Tippecanoe County

	Number	Percentage
Not enough food	28	5.54%
Having a safe place to live	48	9.50%
Paying utility bills	100	19.80%
Reliable transportation	81	16.04%
Violence inside the place I live	12	2.38%
Violence or crime in my neighborhood	59	11.68%
Getting or maintaining a good job	75	14.85%
Lack of support from family and friends	140	27.72%
Lack of spiritual/pastoral support	48	9.50%
Experiencing disrespect or discrimination	71	14.06%
Language barriers	16	3.17%
Financial planning/budgeting	198	39.21%

HEALTH BEHAVIORS

Respondents were able to choose up to three changes they would like to make in the following year.

Table 4.5: Health Changes, Tippecanoe County

	Number	Percentage
Drinking less alcohol	24	4.75%
Eating better food	267	52.87%
Improving sleep	190	37.62%
Managing Stress	195	38.61%
Getting more exercise	285	56.44%
Improving relationships	92	18.22%
Quitting tobacco or nicotine products	33	6.53%
Getting recommended health screenings, like blood tests or mammograms	43	8.51%
Finding a doctor	47	9.31%

In an effort to better understand hesitancy or access to medical care, a question was asked on barriers.

Table 4.6: Healthcare Barriers, Tippecanoe County

	Number	Percentage
Cultural/religious beliefs	8	1.58%
Do not know how to find the type of doctor I want	94	18.61%
Fear (e.g., not ready to face/discuss health problem)	126	24.95%
I cannot get an appointment when I am available	149	29.50%
Language barriers	12	2.37%
Immigration status	5	0.99%
No insurance and unable to pay for the care	35	6.93%
Unable to pay co-pay/deductibles	101	20.00%
Transportation	41	8.11%
Lack of access to a computer	25	4.95%
Bad past medical experience	90	17.82%

COMMUNITY GAPS AND RESOURCES

Two questions assist in understanding the need for programming and resources within communities. First, participants were asked what type of healthcare related services are missing in their community.

Table 4.7: Missing Healthcare Services, Tippecanoe County

Response	Number	Percentage
Chronic disease care	128	25.34%
Acute care, like for an injury or infection	49	9.70%
Vaccines or health screenings	23	4.55%
General primary care	103	20.39%
Prenatal or well-baby care	26	5.14%
Hospital emergency room/Urgent center care	48	9.50%
Pharmacy/Drug store	18	3.56%
Dental care	69	13.66%
Screening for anxiety or depression	158	31.28%
Treatment for mental health	181	35.84%
Treatment for an addiction	114	22.57%
Vision or hearing care	53	10.49%

Second, a list of typical health promotion activities was provided for participants to indicate if services were needed for themselves, their family or friends, or community:

Table 4.8: Health Promotion Programs, Tippecanoe County

Responses	Me		Family/Friends		Community		None	
	Number	%	Number	%	Number	%	Number	%
Healthy cooking classes	150	29.70	92	18.21	250	49.50	121	23.96
Free or reduced cost healthy foods	151	29.90	98	19.40	304	60.19	88	17.42
Free exercise programs	252	49.90	135	26.73	267	52.87	68	13.46
Weight loss programs	204	40.39	114	22.57	252	50.40	93	18.41
Mental health counseling	161	31.88	135	26.73	310	61.38	82	16.23
Low cost legal help	114	22.57	81	16.03	307	60.79	103	20.39
Financial planning/budgeting	137	27.12	91	18.01	287	56.83	104	20.59
Help getting health insurance	66	13.06	71	14.05	310	61.38	107	21.18
Programs to help young children learn	58	11.48	82	16.23	329	65.14	107	21.18
Parenting classes	33	6.53	56	11.08	335	66.33	119	23.56
Prenatal classes	20	3.96	40	7.82	332	65.74	127	25.14
Classes just for fathers	24	4.75	53	10.49	320	63.36	129	25.54
Programs for grandparents raising grandchildren	19	3.76	50	9.90	329	65.14	116	22.97
Places to dispose of precriptions and needles safety	103	20.39	73	14.45	314	62.17	112	22.17
Stress management	169	33.46	121	23.96	305	60.39	88	17.42
Community gardens/gardening workshops	106	20.99	72	14.25	306	60.59	123	24.35
Diabetes management classes	76	15.04	83	16.43	305	60.39	108	21.38
Help for people experiencing abuse or neglect	31	6.13	41	8.11	360	71.28	97	19.20
Suicide prevention training	40	7.92	55	10.89	357	70.69	107	21.18

TOP HEALTH NEEDS, TIPPECANOE COUNTY 2022-2024

Determining the top health needs in a community is a difficult process. Many poor health outcomes, health disparities, and poor social determinants of health weigh heavily on segments of our community. We also acknowledge that there are many strengths and positive growth that balance some of these challenges. Franciscan Health determined the top health needs by reviewing secondary data, survey responses, and feedback meeting input. A core team of 12 staff members with education and experience in public health worked with staff in each community to come to consensus on the top issues. A combination of multi-vote ranking and the Hanlon method were used. Once a refined list of the top ten issues was brought to consensus, each staff member ranked health issues based on the following criteria:

- Size: How many people are affected by this issue?
- Seriousness: How serious of an issue is this? Is it potentially deadly? How much of a threat is it to the population that is affected?
- Equity: How much does this affect the most vulnerable residents? Because of this, does it put those who are affected at a serious disadvantage?
- Intervention:How likely is it that a non-clinical intervention will change this need?
- Time: How urgent or pressing is this? Is there imminent danger or life-threating consequences within months?

To assist with intervention planning, a second score on the potential for Franciscan Health to prioritize the health issue was determined. Scoring criteria included:

- Community Health Staffing: Is the Community Health Improvement Department able to adequately staff this?
- Internal Capacity:To what degree does the specific Franciscan Health hospital have the resources to meet this need?
- Community Acceptability: How acceptable is action or an intervention to the community? Are there community organizations that also want to engage in this?
- Sustainability: How sustainable are efforts after three years? Are there community partners or internal departments that can continue this work for six years?
- Long-Term Impact: How likely is it that an intervention can create long-term or permanent change in individuals, conditions, or communities?

Using a mix of Hanlon and PEARL techniques, the Franciscan Health community health team scored the secondary data, feedback meeting comments, and survey data to produce the following list of top health needs in the community. A copy of the scoring sheet is available in the appendix.

The following table shows the top health needs in three categories: social need, poor health behaviors, and poor health outcomes. This takes into account the complexity of social determinants of health and the many factors that make up individual health. In some cases, one will notice a clear path between social need, poor behaviors, and the resulting outcome.

Many needs are self-explanatory or based on commonly understood definitions. However, some issues are a bit nuanced or emerging community trends. The Department offers these definitions to aid in understanding identified issues:

SOCIAL COHESION

• Includes overall sense of community, social bonding, bridging, connectedness, support networks, family building, "warm hand-off" for resources, understanding of others, communication and conflict skill development
• **How we know**: Victimization rates, behavioral health issues, social service agencies report/survey, service provider rates (patient:provider ratio), public survey data, professional survey data

VICTIMS OF VIOLENCE

• Includes domestic and interpersonal violence, child abuse/neglect, human trafficking, violent crime, elder abuse/neglect
• **How we know**: Mortality rates, public survey data, professional survey date, lack of service provider capacity; CHINS cases, DCS/DCFS substantiated abuse cases, violent crime rates, ED data, hate crime rates

BEHAVIORAL HEALTH

• Includes diagnosed and undiagnosed mental health issues, suicide, self-harm, depression, anxiety
• **How we know**: Service provider rates (patient:provider ratio), suicide rates, self-harm rates, poor mental health days, professional survey data, public survey data, lack of resources

SUBSTANCE ABUSE

• Includes illegal drugs, prescription abuse, alcohol
• **How we know**: Mortality rates, overdose rates, DUI, ED/patient data, public survey data, professional survey data

ACCESS TO HEALTH CARE

• Includes barriers that prevent or limit access to needed health care services, no transportation, lack of insurance, underinsured, transportation, availability of providers and services
• **How we know**: Public survey data, professional survey data, insurance rates, service provider rates (patient:provider ratio)

TIPPECANOE COUNTY

Most vulnerable community groups: Those in poverty, working poor, elderly, homeless, mental health population, low income pregnant women

Social Needs	Poor Health Behaviors	Poor Health Outcomes
Sufficient Income	Unsafe Sex	Infant Mortality
Housing	Nutrition	Cardiovascular Disease
Inability to Access Health Care	Substance Abuse	Obesity
Social Cohesion	Tobacco	Unintentional Injury
Food Insecurity	Physical Activity	Respiratory Diseases
	Violence	Cancer

COMMUNITY ASSETS

Franciscan HEALTH

SECTION 5

community HEALTH NEEDS ASSESSMENT

While the health needs of this community are substantial, there are partners and assets that may offer services to address the needs in the community. This section outlines some of the organizations in the community. Readers should also review the services provided by Franciscan Health in Section 1 of this document. The appendix also lists community organizations that informed this report and provide services in the community.

Organization	Street	City	State	Zip	Phone Number
Family and Youth Services (Excluding schools and government agencies)					
National Youth Advocate Program	105 Executive Drive STE C	Lafayette	IN	47905	
The Foster Closet at Innovation	2502 Mondavi Blvd	Lafayette	IN	47909	765-250-5185
The Villages of Indiana	200 Professional Court	Lafayette	IN	47905	(765) 420-7711
Isaiah 117	No Address Yet	Lafayette	IN	47906	(423) 518-376 ext .627
The Child Care Resource Network	31 N. 7th St., Suite B	Lafayette	IN	47901	(765) 742-7105
Gifts of Grace Adoption Support Center	100 Executive Drive, Suite K	Lafayette	IN	47905	(765) 807-5117
Hanna Community Center	2000 Elmwood Avenue, Suite A	Lafayette	IN	47904	(765) 742-0191
Lyn Treece Boys & Girls Club	1529 North 10th Street	Lafayette	IN	47904	(765) 742-2991
Beck Lane Boys & Girls Club	2112 Beck Lane	Lafayette	IN	47909	(765) 471-1973
YWCA	605 N. 6th Street	Lafayette	IN	47901	(765) 742-0075
Job Works	820 Park East Blvd.	Lafayette	IN	47905	(765) 474-5411
Arts Federation	638 N. Street	Lafayette	IN	47901	(765) 423-2787
Heartford House	703 North 36th St.	Lafayette	IN	47905	765-420-9764
Purdue Extension 4-H	3150 Sagamore Pkwy South	Lafayette	IN	47905	765-474-0793
Girl Scouts	8439 IN-26	Lafayette	IN	47905	317.924.6800
Big Brothers Big Sisters	2000 Elmwood Ave, Ste J	Lafayette	IN	47904	765-446-2227
Boy Scouts Sagamore Council	518 N. Main St.	Kokomo	IN	46901	765-452-8253
Bauer Family Support Center	409 S 3rd St	Lafayette	IN	47902	765-742-4848
YMCA	3001 S Creasy Lane	Lafayette	IN	47905	(765) 474-3448
Indiana Youth Institute	603 East Washington Street, Suite 800	Indianapolis	IN	46204	317-396-2700
Tippecanoe County CASA	301 Main St, 5th Floor	Lafayette	IN	47901	765-423-9109

Organization	Street	City	State	Zip	Phone Number
Social Cohesion (Senior services, community centers)					
Wabash Center	2000 Greenbush Street	Lafayette	IN	47904	765-423-5531
Vocational Rehabilitation	615 N. 18th Street	Lafayette	IN	47904	765-449-4278
Grant's House	2000 Greenbush Street	Lafayette	IN	47904	765-423-5531
United Way of Greater Lafayette	1114 State St	Lafayette	IN	47905	765-742-9077
Area IV Council on Aging and Community Action Programs, Inc.	660 N. 36th Street	Lafayette	IN	47903	765-447-7684
Tippecanoe County Senior Center	2000 Elmwood Avenue	Lafayette	IN	47904	765-447-2311
Hanna Community Center	2000 Elmwood Avenue, Suite A	Lafayette	IN	47904	765-742-0191
YMCA	3001 S Creasy Lane	Lafayette	IN	47905	765-474-3448
Lyn Treece Boys & Girls Club	1529 North 10th Street	Lafayette	IN	47904	765-742-2991
Beck Lane Boys & Girls Club	2112 Beck Lane	Lafayette	IN	47909	765-471-1973
Morton Community Center	222 N Chauncey Ave	West Lafayette	IN	49706	765-775-5120
Faith Community Center	5572 Mercy Way	Lafayette	IN	47905	765-449-4600
Faith West Community Center	1920 Northwestern Ave	West Lafayette	IN	47906	765-449-3750
Tippecanoe County Fairgrounds	1406 Teal Rd W	Lafayette	IN	47905	765-474-5906
Art Museum of Greater Lafayette	102 S 10th St	Lafayette	IN	47905	765-742-1128
Fort Ouiatenon	3136 S River Rd	West Lafayette	IN	47906	765-476-8411
Haan Museum of Indiana Art	920 E State St	Lafayette	IN	47905	765-742-6449
Moses Fowler House	909 South St	Lafayette	IN	47901	765-400-2002
Purdue University Galleries	552 W Wood St	West Lafayette	IN	47906	765-494-3061
Samara House	1301 Woodland Ave	West Lafayette	IN	47906	765-409-5522
Tippecanoe Battlefield Museum	200 Battleground Ave	Battle Ground,	IN	47920	765-567-2147
Tippecanoe County Public Library – Downtown Library	627 South St	Lafayette	IN	47901	765-429-0100
Tippecanoe County Public Library – Klondike Branch	3062 Lindberg Rd	West Lafayette	IN	47906	765-463-5893
Tippecanoe County Public Library – Wyandotte Branch	5542 E 50 S	Lafayette	IN	47905	765-447-4774
Tippecanoe County Public Library - Wea Prairie	4200 S 18th St	Lafayette	IN	47909	765-588-3002
West Lafayette Public Library	208 W Columbia St	West Lafayette	IN	47906	765-743-2261

Organization	Street	City	State	Zip	Phone Number
Physical Activity/Built Environment (Parks, free activity, non-profit organizations)					
Visit Lafayette- West Lafayette: Greater Lafayette Hiking and Biking Trails	(multiple)	Tippecanoe County	IN		800-872-6648
City of Lafayette: Parks & Trails	(multiple)	Tippecanoe County	IN		765-807-1000
West Lafayette Wellness Center	1101 Kalberer Rd	West Lafayette	IN	47906	(765) 269-4950
McCallister Center	2351 N. 20th Street	Lafayette	IN	47904	765-807-1360
Faith Community Centers	(multiple)	Tippecanoe County	IN		(765) 448-1986
Lafayette Family YMCA	3001 S. Creasy Lane	Lafayette	IN	47905	(765) 474-3448
Downtown YMCA	250 Main Street #50B	Lafayette	IN	47901	(765) 838-3605
Tippecanoe County Government: Parks and Recreation Facilities	(multiple)	Tippecanoe County	IN		765-423-9215
Prophetstown State Park	5545 Swisher Rd	West Lafayette	IN	47906	765-567-4919
Columbian Park Zoo	1915 Scott St	Lafayette	IN	47904	765-807-1540

Organization	Street	City	State	Zip	Phone Number
Food Related (Food antries, food education, special food outlets)					
ACE/Baptist Student Foundation at Purdue, Inc (Purdue Students/Faculty/Staff Only)	200 N. Russell St.	West Lafayette	IN	47906	765-496-2450
Bethlehem Holy Temple Church	505 S. 3rd St.	Lafayette	IN	47905	765-201-8085
Battleground United Methodist Church	201 Tipton St	Battle Ground	IN	47920	765-567-2671
Brady Lane Church of Christ	2701 Brady Ln	Lafayette	IN	47909	765-474-1633
Clarks Hill Christian Church	9410 Pearl St	Clarks Hill	IN	47930	765-426-2052
Connection Point Church (formally Bethel Christian Life Center)	2541 Cumberland Avenue	West Lafayette	IN	47906	765-463-0956
Elmwood Church of Christ	2501 Elmwood Ave.	Lafayette	IN	47904	765-447-2874
Evergreen Wesleyan Church	1525 Grove St	Lafayette	IN	47905	765-742-7842
Food Finders Food Bank Fresh Market	2200 Elmwood Ave. Ste. C7	Lafayette	IN	47904	765-471-0062
LUM Protein Pantry	525 N. 4th St.	Lafayette	IN	47901	765-423-2691
River City Community Center Food Pantry	2828 Old US Highway 231 South	Lafayette	IN	47909	765-250-8507
Salvation Army of Tippecanoe County	1110 Union St.	Lafayette	IN	47904	765-742-0006
St. James Lutheran Church	710 N. 9th St	Lafayette	IN	47904	765-423-1616
Tippecanoe County United Food Pantry	1320 Tippecanoe St.	Lafayette	IN	47904	765-471-0062
Wea Ridge Baptist Church	1051 E. 430 S.	Lafayette	IN	47909	765-474-9603
Whole Truth Apostolic Faith Assembly	901 S. 19th Street	Lafayette	IN	47905	765-532-4241
Food Finders Food Bank	1204 Greenbush Street	Lafayette	IN	47904	765.471.0062
Lafayette Farmers Market	N 5th St	Lafayette	IN	47901	(765) 742-4044
West Lafayette Farmers Market	Cumberland Park	West Lafayette	IN	47906	(765) 775-5100
Purdue University Extension Tippecanoe County	3150 Sagamore Pkwy S	Lafayette	IN	47909	765-474-0793
Mid-Land Meals – Fairington Apartments	225 Fairington Ct	Lafayette	IN	47905	765-447-4115
Mid-Land Meals – Friendship House	1010 Cumberland Ave	West Lafayette	IN	47906	765-464-3701
Tippecanoe Senior Center	2000 Elmwood Ave	Lafayette	IN	47904	765-447-2311
Area IV Agency on Aging and Community Action Programs, Inc	660 N 36th St, P.O. Box 4727	Lafayette	IN	47903	765-447-7683
Area IV Agency on Aging and Community Action Programs, Inc	661 N 36th St, P.O. Box 4727	Lafayette	IN	47903	765-447-7684
Mid-Land Meals	3313 Concord Rd	Lafayette	IN	47909	765-477-7189
Meals on Wheels of Greater Lafayette – Tippecanoe Community Center	2000 Elmwood Ave, Ste. F	Lafayette	IN	47904	765-429-6325
Bethany Sharing Garden	3305 Longlois Dr	Lafayette	IN	47904	
Brown Street United Methodist Garden	905 Brown St	Lafayette	IN	47904	
Erie Street Neighbors Garden	612 Erie St	Lafayette	IN	47904	
First Baptist Church Garden	411 N 7th St	Lafayette	IN	47901	
Footbridge Sharing Garden	244-264 Smith St	Lafayette	IN	47905	
Howarth Garden – Lafayette Transitional Housing Center	615 N 18th St	Lafayette	IN	47904	
Lincoln Sharing Garden	1126 N 6th St	Lafayette	IN	47904	
North 10th Street (N10) Community Garden	1529 N 10th St	Lafayette	IN	47904	
Salvation Army Community Garden	1110 Union St	Lafayette	IN	47904	
Trinity United Methodist Church Garden	404 N 6th St	Lafayette	IN	47901	

Organization	Street	City	State	Zip	Phone Number
Job Skills/Employment Programs (Programs for idle teens, adult job skills, employers hiring vulnerable populations legally)					
Indiana Department of Workforce Development – Tippecanoe County	820 Park E Blvd	Lafayette	IN	47905	(765) 474-5411
LARA-Lafayette Reading Academy	1100 Elizabeth Street	Lafayette	IN	47904	765-476-2920
Goodwill Education Initiatives – Lafayette Excel Center	615 N 18th St	Lafayette	IN	47904	317-524-3641
Vocational Rehabilitation Services – Region 6	615 N 18th St, Ste. 103	Lafayette	IN	47904	765-449-4278
Wabash Center	2000 Greenbush St	Lafayette	IN	47904	765-423-5531

Organization	Street	City	State	Zip	Phone Number
Legal/Civil/Immigration (Organizations that provide free legal services, assist immigrants/refugees/undocumented populations)					
LARA-Lafayette Reading Academy	1100 Elizabeth Street	Lafayette	IN	47904	765-476-2920
Legal Aid Corporation of Tippecanoe	212 N 5th St	Lafayette	IN	47901	765-742-1068
Indiana Legal Services – Lafayette	8 N 3rd St, Ste. 102	Lafayette	IN	47901	765-423-5327
The Immigrants' and Languate Rights Center of Indiana Legal Services, Inc.		Call Center - no physical address			866-964-2138
Lafayette Urban Ministry Immigration Clinic	420 North 4th St	Lafayette	IN	47901	765-423-2691
LAVA Project, Indiana Legal Services Inc	151 N Delaware St, 1800	Indianapolis	IN	46204	317-829-3104

Organization	Street	City	State	Zip	Phone Number
Housing/Utilities (Healthy housing, subsidized housing, utility assistance)					
Lafayette Housing Authority	2601 Greenbush Street	Lafayette	IN	47904	765-771-1300
LTHC Homeless Services	815 N. 12th Street	Lafayette	IN	47904	765-423-4880
Salvation Army Pathway to Hope Program	1110 Union Street	Lafayette	IN	47904	765-742-0006
Lafayette Urban Ministry	420 N. 4th Street	Lafayette	IN	47904	765-423-2691
Victory Christian Church	10 N. Earl Avenue	Lafayette	IN	47904	765-447-7777
Trustee's Office	718 Wabash Avenue	Lafayette	IN	47905	765-742-7476
Safe Families		Lafayette	IN	47901	765-201-0845
YWCA Domestic Violence Shelter	605 N. 6th Street	Lafayette	IN	47901	765-742-0075
Family Promise	2010 Elmwood Ave	Lafayette	IN	47904	765-838-3651
Homestead CS	671 N 36th St	Lafayette	IN	47905	765-423-1284
Faith Presbyterian Church	3318 SR 26 W	West Lafayette	IN	47906	765-743-3683
Salvation Army Emergency Financial Assistance	1110 Union St	Lafayette	IN	47904	765-742-8556
Area IV Agency on Aging and Community Action Programs, Inc	660 N 36th St, P.O. Box 4727	Lafayette	IN	47903	765-447-7683
Military Family Assistance Center - Lafayette	5280 Haggerty Ln	Lafayette	IN	47905	317-247-3300 x 85124
Family Promise of Greater Lafayette	2010 Elmwood Ave	Lafayette	IN	47906	765-838-3651
The Salvation Army Family Emergency Shelter	1110 Union St	Lafayette	IN	47904	765-742-0007

Organization	Street	City	State	Zip	Phone Number
Health Care (Free clinics, FQHCs, CHCs, other health systems)					
Tippecanoe County Health Department	629 North 6th Street	Lafayette	IN	47901	765-423-9221
Wllowstone	615 North 18th Street	Lafayette	IN	47904	765-423-5361
Valley Oaks	610 main street	Lafayette	IN	47901	765-423-2638
Riggs Community Health Center	1716 Hartford Street	Lafayette	IN	47904	765-742-1567
Meridian Health Services	2900 North River Road	West Lafayette	IN	47906	866-306-2647
Goodwill of Central and Southern Indiana	615 North 18th Street	Lafayette	IN	47901	765-237-0097
American Senior Communities (ACS)	1903 Union Street	Lafayette	IN	47904	888-996-8272
MedExpress	102 Sagamore Parkway South	Lafayette	IN	47905	(765) 446-2871
IU Health (Hospital, ED, Urgent Care)	5165 McCarty Ln	Lafayette	IN	47905	765.448.8000
North Central Health Services (NCHS)	2900 North River Road	West Lafayette	IN	47906	765-464-0400
Franciscan Health (Hospital, ED, clinics)	1701 South Creasy Lane	Lafayette	IN	47905	765-502-400
Aspire Indiana	1231 Cumberland Ave Ste C	West Lafayette	IN	47906	765-742-4481
Unity Immediate Care	1321 Unity Place	Lafayette	IN	47905	765-446-1362

Organization	Street	City	State	Zip	Phone Number
Mental Health Services (Health systems, providers, substance abuse counseling/treatment)					
Valley Oaks	415 N. 26th Street	Lafayette	IN	47904	765-446-6400
Meridian Health Inpatient	2900 N. River Rd	West Lafayette	IN	47906	765-337-8855
Meridian Health outpatient	1500 Salem Street	Lafayette	IN	47904	765-250-9212
River Bend Hospital	2900 N. River Rd	West Lafayette	IN	47906	765-464-0400
Empath Unit/Franciscan	1701 S. Creasy Lane	Lafayette	IN	47905	765-502-4000
Willowstone Family Services	615 N. 18th Street	Lafayette	IN	47904	765-423-5361
Sycamore Springs	833 Park East Blvd.	Lafayette	IN	47905	765-300-3281
Mental Health of America	914 South Street	Lafayette	IN	47904	765-742-1800
Celebrate Recovery at River City Community Center	2842 Old U.S. 231	Lafayette	IN	47909	765-607-4770
Clean Slate	30 Professional Court	Lafayette	IN	47905	765-838-1218
Groups of Indiana	3423 South Lafountain Street	Kokomo	IN	46902	800-683-8313
Oxford House	8312 Charter Oak Drive	Indianapolis	IN	46206	317-389-5801
NAMI	913 Columbia Street	Lafayette	i	47901	765-723-6939
US Dept of Veteran Affiars (VA) - Veterans Health Administration(VHA)	1990 East Main Street	Dainville	IL	61832	800-273-8255
Limestone Health	4705 Meijer Court	Lafayette	IN	47905	765-743-4400
Light House Recovery	2525 Kossuth Street	Lafayette	IN	47904	844-641-7616
Recovery Café	330 Fountain Street	Lafayette	IN	47902	765-609-0826
Tippecanoe County Health Department	629 North 6th Street	Lafayette	IN	47901	765-423-9221
Riggs Community Health Center	1324 Tippecanoe Street	Lafayette	IN	47905	765-742-1567
Alpine Health Services	3660 Rome Drive	Lafayette	IN	47905	765-446-9394
Trinity Life Mission	2150 Elmwood Ave.	Lafayette	IN	47904	765.742.1060
Home with Hope	1119 Ferry St	Lafayette	IN	47901	765.807.0009
Restoration (men only)	5526 SR 26 E	Lafayette	IN	47905	765.448.1986
Vision of Hope (women only)	5652 Mercy Way	Lafayette	IN	47905	765.447.5900
Phoenix Recovery Solutions QRT	1600 Kepner Drive.	Lafayette	IN	47905	765.448.4327
Brighter Way Counseling	15 Executive Dr, Ste. 3	Lafayette	IN	47905	765-427-3310
Child and Family Partners/ Counseling Partners	115 Farabee Dr N, Ste. B2 and C	Lafayette	IN	47905	765-427-6756
Locker Psychological Services, LLC	678 N 36th St, Ste. B	Lafayette	IN	47905	765-637-9200
Matrix LifeCare Center – Lafayette	938 Mezzanine Dr, Suite B	Lafayette	IN	47905	765-742-1533
Matrix LifeCare Center – West Lafayette	233 Harrison St	Lafayette	IN	47905	765-742-1533
Richard L. Roudebush Veterans Affairs Medical Center	3851 N River Rd	West Lafayette	IN	47906	765-464-2280
Suncrest Psychological Services	674 N 36th St	Lafayette	IN	47905	812-629-4999
Cary Home for Children	1530 S 18th St	Lafayette	IN	47905	765-474-4616
Group Homes for Children	3307 Longlois Dr	Lafayette	IN	47904	765-447-7410
T.C. Harris School	3700 Rome Dr	Lafayette	IN	47905	765-448-4220

Organization	Street	City	State	Zip	Phone Number
Transportation (Public, Medicaid/Medicare cab, senior services)					
Citybus Public Transport	316 N. 3rd Street	Lafayette	IN	47904	765-742-7433
ACCESS (City Bus of Lafayette)	317 N. 3rd Street	Lafayette	IN	47904	765-742-2121
Area IV Council on Aging	660 N. 36th Street	Lafayette	IN	47903	765-447-7684
Caregiver Companion	612 Wabash Avenue	Lafayette	IN	47905	765-423-1879
Angels Senior Home Solutions	1330 Win Hentschel Blvd #203B	West Lafayette	IN	47906	765-463-2100
Brightstar Care	3601 Sagamore Pkwy N Suite d-2	Lafayette	IN	47904	765-237-3650
Comfort Keepers	1803 S Creasy Lane	Lafayette	IN	47905	765-449-9797
Home Instead	976 Mezzanine Dr Suite A	Lafayette	IN	47905	765-448-8800
Hoosiers at Home	602 Columbia Street	Lafayette	In	47904	800-977-1856
Integrity Care	133 N. 4th Street Ste. 605	Lafayette	IN	47904	765-463-7111
Cheney's Magic Cab Ride	1728 Everett St	Lafayette	IN	47905	765-742-8400
Lafayette Senior Transport and Concierge	4012 Campion St	Lafayette	IN	47909	765 586-1420
Tippecanoe County Senior Center	2000 Elmwood Avenue	Lafayette	IN	47904	765-447-231
Med-a-Port	508 N 26th St	Lafayette	IN	47904	765-607-1183
Necessities Transportation, LLC	665 N 36th St	Lafayette	IN	47905	765-463-7111

Organization	Street	City	State	Zip	Phone Number
Infant/New Parent Supplies or Services (BABE stores, diaper banks, car seats)					
Matrix LifeCare Center	938 Mezzanin Dr. Suite B	Lafayette	IN	47905	(765)742-1533
Goodwill of Central and Southern NFP	615 North 18th Street	Lafayette	IN	47904	(844) 637-6669
Bauer Family Resources Pregnant Women's Programs	3600 Eisenhower Road	Lafayette	IN	47905	(765) 449-0487
IU Health	5165 McCarty Lane	Lafayette	IN	47905	(765) 838-4670
Franciscan Health	1501 Hartford Street	Lafayette	IN	47904	(765) 449-5133
Gifts of Grace Adoption Support Center	100 Executive Drive Suite K	Lafayette	IN	47905	(765) 807-5117
Willowstone Family Services	615 N 18th Street #101	Lafayette	IN	47904	(765) 423-5361
Children's Bureau	2529 Schuyler Ave, Ste. 500	Lafayette	IN	47905	317.634.5050
Connection Point Church	2541 Cumberland Ave	West Lafay-ette	IN	47906	765-463-0956

Organization	Street	City	State	Zip	Phone Number
Licensed Child Care					
Bauer Family Resources	Various Locations	Lafayette	IN	47905	(765) 449-0487
Scooby Doo Daycare	1815 Thompson St	Lafayette	IN	47904	(765)543-7369
Grace Day Care	615 North 22nd Street	Lafayette	IN	47904	(765) 447-2204
Bright Beginning Academy	2512 Cayuga trl	Lafayette	IN	47904	(765) 607-4202
Rights Steps - Central Presbyterian	31 N 7th St	Lafayette	IN	47901	(765) 742-8481
Aunt Ambers Child Care		Lafayette	IN	47904	
Very Important People Childcare Services		Lafayette	IN	47904	(765) 414-4862
Two by Two		Lafayette	IN	47909	
St. James Lutheran Childcare	800 Cincinnati Stree	Lafayette	IN	47901	(765) 742-6464
Hanna Community Center	2000 Elmwood Ave. Suite A	Lafayette	IN	47904	765-742-0191
Rights Steps - Dennis Burton	1200 N 19TH ST	Lafayette	IN	47904	7654234906
St. Francis Early Learning Academy	1223 N. 16th Street	Lafayette	IN	47904	(765) 767-4200
Angela's Stepping Stones		Lafayette	IN	47904	(765) 269-9177
Seeds to Sprouts		Lafayette	IN	47905	(765) 490-3401
Lafayette Urban Ministry	420 N 4th St	Lafayette	IN	47901	(765) 423-2691
Jenn's Friends Daycare		Lafayette	IN	47909	(765) 413-5215
Right Steps Child Development Centers Downtown	218 Ferry Street	Lafayette	IN	47901	(765) 429-6798
Kimberly's Playmates		Lafayette	IN	47904	(765) 448-4389
Little Bronchos	1415 Ball St	Lafayette	IN	47904	(765) 476-2900
Bethany Child Care and Preschool	3305 Longlois Dr	Lafayette	IN	47904	(765) 447-7044
Marilynn's Child Care		Lafayette	IN	47905	(765) 474-6365
Chosen Childcare Ministry	100 Murphy Street	Lafayette	IN	47905	(765) 259-2348
Jennifer Pruitt		Lafayette	IN	47905	(765) 471-1851
Kinder Care	2233 Brothers Dr	Lafayette	IN	47909	(765) 474-3663
Happy Hearts Daycare		Lafayette	IN	47905	(765) 448-3778
Sewgro Learning Center		Lafayette	IN	47905	(765) 543-7165
Penny's Daycare		Lafayette	IN	47905	(765) 426-9070
Little Hands Day Care		Lafayette	IN	47909	(765) 714-2611
Second Baptist Childcare Ministry	2925 South 18th Street	Lafayette	IN	47909	(765) 477-0300
The Play Zone		Lafayette	IN	47909	
Rise & Shine Daycare		Lafayette	IN	47905	
Right Steps - Creasy	1170 South Creasy Lane	Lafayette	IN	47905	(765) 477-2010
Grandma's House of Angels		Lafayette	IN	47909	(765) 607-8432
Adventure Station Child Care	6121 E 50 S	Lafayette	IN	47905	(765) 414-5858
Romack Daycare		Lafayette	IN	47909	
Ben and Maxin Miller Child Development Laboratory School	1200 West State Street (FWLR)	West Lafayette	IN	47906	765-494-0240
STEAM Academy Preschool	2850 Old U.S. 231	Lafayette	IN	47909	(765) 414-9523
Steckler Daycare		Lafayette	IN	47909	765 477-6999
Rachel's Childcare and Preschool	1009 N Southland Dr	Lafayette	IN	47909	(765) 237-4620
Safe Harbor Schools - West Lafayette Intermediate School	1838 N. Salisbury St.	West Lafayette	IN	47906	(765) 746-0500

Organization	Street	City	State	Zip	Phone Number
Licensed Child Care					
Lafayette Family YMCA	3001 S Creasy Ln	Lafayette	IN	47905	(765) 474-3448
Kinder Care at Work	90 Nimitz Drive	West Lafayette	IN	47906	(765) 743-6503
Smile Little Angels Day Care		West Lafayette	IN	47906	(765) 607-1458
Courtney's Childcare		Lafayette	IN	47909	(765) 337-6718
Bizzy Bee Home Child Care		Lafayette	IN	47909	(765) 471-0318
Brookshire Learning Center	3206 Daugherty Dr	Lafayette	IN	47909	(765) 474-9494
Christ United Methodist Church Child Care Ministry	3610 South 18th Street	Lafayette	IN	47909	(765) 474-8534
Little Steps Early Learning Center	3526 Osborne Dr	Lafayette	IN	47909	(765) 607-1095
Tracey McDonald		Lafayette	IN	47909	(765) 586-5423
Safe Harbor Schools - West Lafayette Elementary	600 Cumberland Ave	West Lafayette	IN	47906	(765) 418-0699
Kiddie Kolleg	201 Veterans Memorial Pkwy E	Lafayette	IN	47905	(765) 449-9444
Future Scholars	2363 Yeager Rd	West Lafayette	IN	47906	(765) 588-6700
Heather Colglazier's Family Childcare		West Lafayette	IN	47906	(765) 807-2967
Amazing Gems Childcare		Lafayette	IN	47909	(765) 404-6475
Heartland Child Care Ministry	3900 E 300 N	Lafayette	IN	47905	(765) 838-3972
Faith Community Infant Care	5526 St Rd 26 E	Lafayette	IN	47905	(765) 449-3710
Nana's Place		Lafayette	IN	47905	(765) 446-3742
Wea Daycare		Lafayette	IN	47909	(765) 471-0261
Wea One's Preschool		Lafayette	IN	47909	(765) 491-9477
Small Wonders Daycare		Lafayette	IN	47909	(765) 586-5485
Kathy Lumley		Lafayette	IN	47905	(765) 412-0411
Angel's Little Friends Child Care		Lafayette	IN	47909	(765) 838-1076
Little Wonders Day Care		Lafayette	IN	47909	(765) 474-8240
Tracie's Home Daycare		Lafayette	IN	47909	(765) 269-6234
Patty's Daycare		Lafayette	IN	47909	(765) 477-1924
Auntie Em's Child Care		Lafayette	IN	47909	(765) 474-7044
Janiali's Daycare		Lafayette	IN	47909	(765) 477-1017
Creative Learning Daycare and Preschool		Lafayette	IN	47909	(765) 426-1745
Erin Haltom		Lafayette	IN	47909	(765) 426-4545
Dora's Daycare		Lafayette	IN	47909	(765) 586-4948
Just Us Kids	1494 Kalberer Road	West Lafayette	IN	47906	(765) 463-6129
Lil' Face Childcare		Lafayette	IN	47909	(765) 807-2882
Subaru Child Development Center	5500 State Road 38 East	Lafayette	IN	47905	(765) 772-7400
WL Child Care		West Lafayette	IN	47906	(765) 543-0350
Mary's Little Lambs		West Lafayette	IN	47906	(765) 497-1576
Samiyah's Playhouse		Lafayette	IN	47906	(765) 337-1184
Erin's Family Childcare		West Lafayette	IN	47906	(574) 870-0147

Organization	Street	City	State	Zip	Phone Number
Community Coalitions					
Juvenile Detention Alternatives Initiative (JDAI)		Lafayette	IN		
Drug Free Coalition of Tippecanoe County		Lafayette	IN		
Mental Health Network		Lafayette	IN		
Healthy Active Tippecanoe	1114 E. State St	Lafayette	IN	47905	765-742-9077
Homeless Prevention & Intervention Network		Lafayette	IN		
Tippecanoe County Resilience & Recovery Network		Lafayette	IN		
Tippecanoe County Resilience & Recover Network - Prevention Subcommittee		Lafayette	IN		
Chamber of Commerce	337 Columbia St	Lafayette	IN	47901	765.742.4044
Rotary Club of Lafayette	PO Box 3923	West Lafayette	IN	47906	765-413-2977
GrowLocal Urban Gardens Network		Lafayette	IN		

Organization	Street	City	State	Zip	Phone Number
Government Entities for Purposes of Coalitions or Patient Services					
Tippecanoe County Division of Family Resources, FSSA	823 Park E Blvd, Ste. A	Lafayette	IN	47905	800-403-0864
Tippecanoe County DCS	250 Main Street, Suite 301	Lafayette	IN	47901	765-742-0400
Tippecanoe County WIC	324 N 25th St	Lafayette	IN	47904	765.420.9999
Tippecanoe County Health Department	20 N 3rd St	Lafayette	IN	47901	765.423.9221

CALL TO ACTION

Franciscan HEALTH

SECTION 6

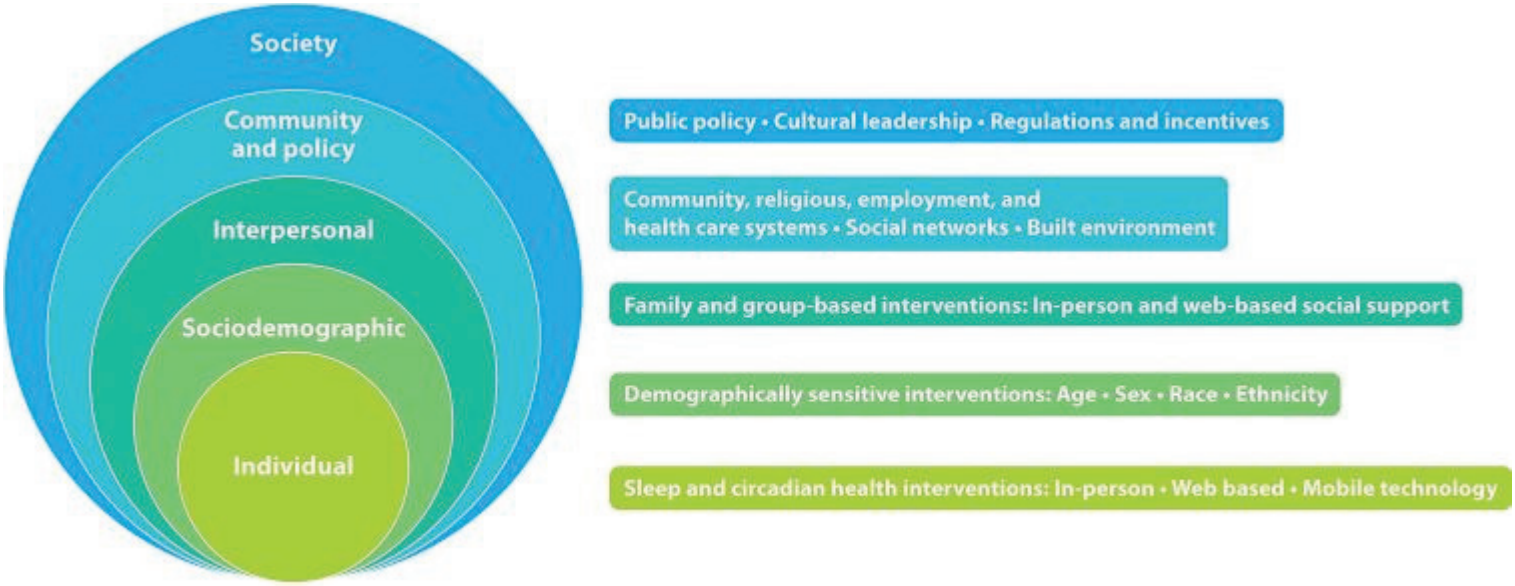
community HEALTH NEEDS ASSESSMENT

THE COMMUNITY HEALTH IMPROVEMENT PLAN

The purpose of the Community Health Improvement Plan (CHIP) is to link the data found in the CHNA to action. The federal regulation recommends that hospitals pay special attention to those in the community with significant health equity barriers and consult those same groups for acceptable interventions. Partnerships, sustainable change, and working directly with neighborhoods are priorities. Guidance from a variety of sources also recommend addressing root cause of issues, including structural injustices and social determinants of health.

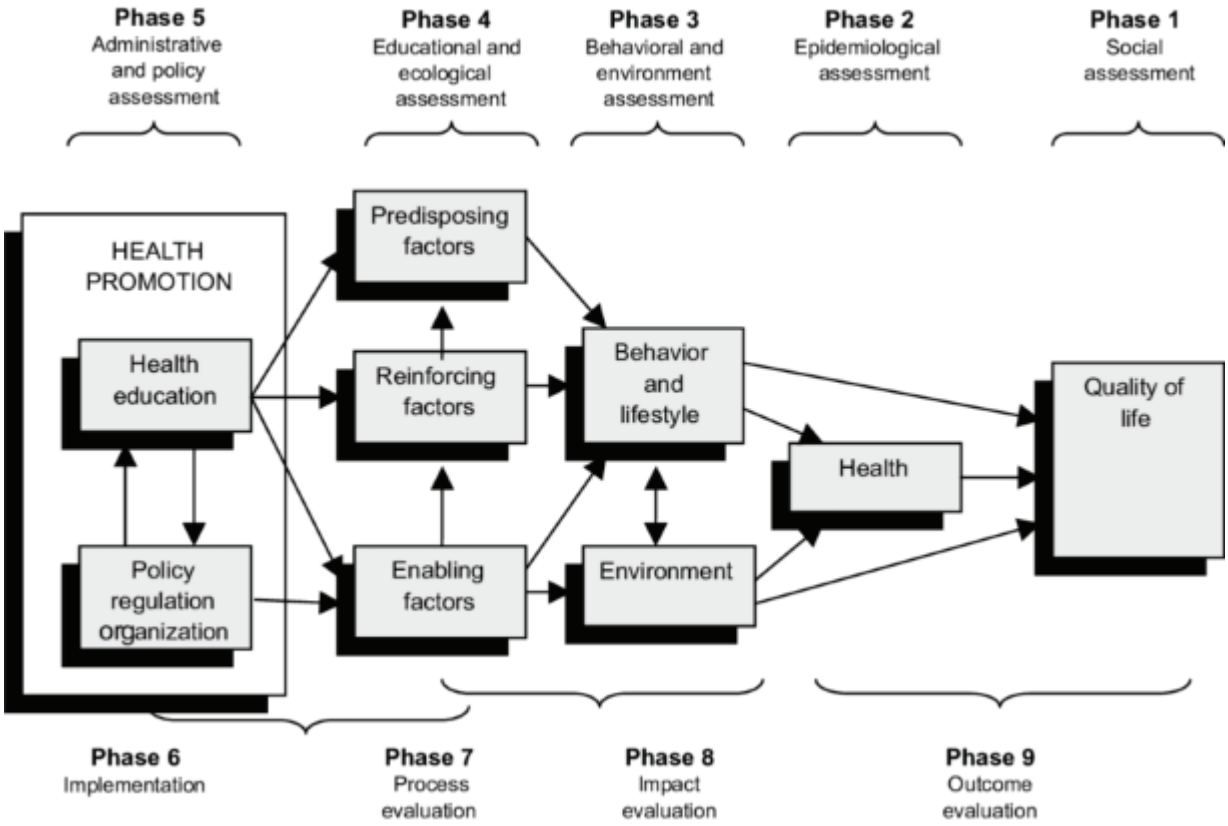
METHODOLOGY

The Community Health Improvement Department has rooted its intervention philosophies and frameworks in public health, using evidence based practices to ensure best possible outcomes. The Socio-Ecological model, developed by Urie Bronfenbrenner, is routinely used to consider the appropriate community based strategies.

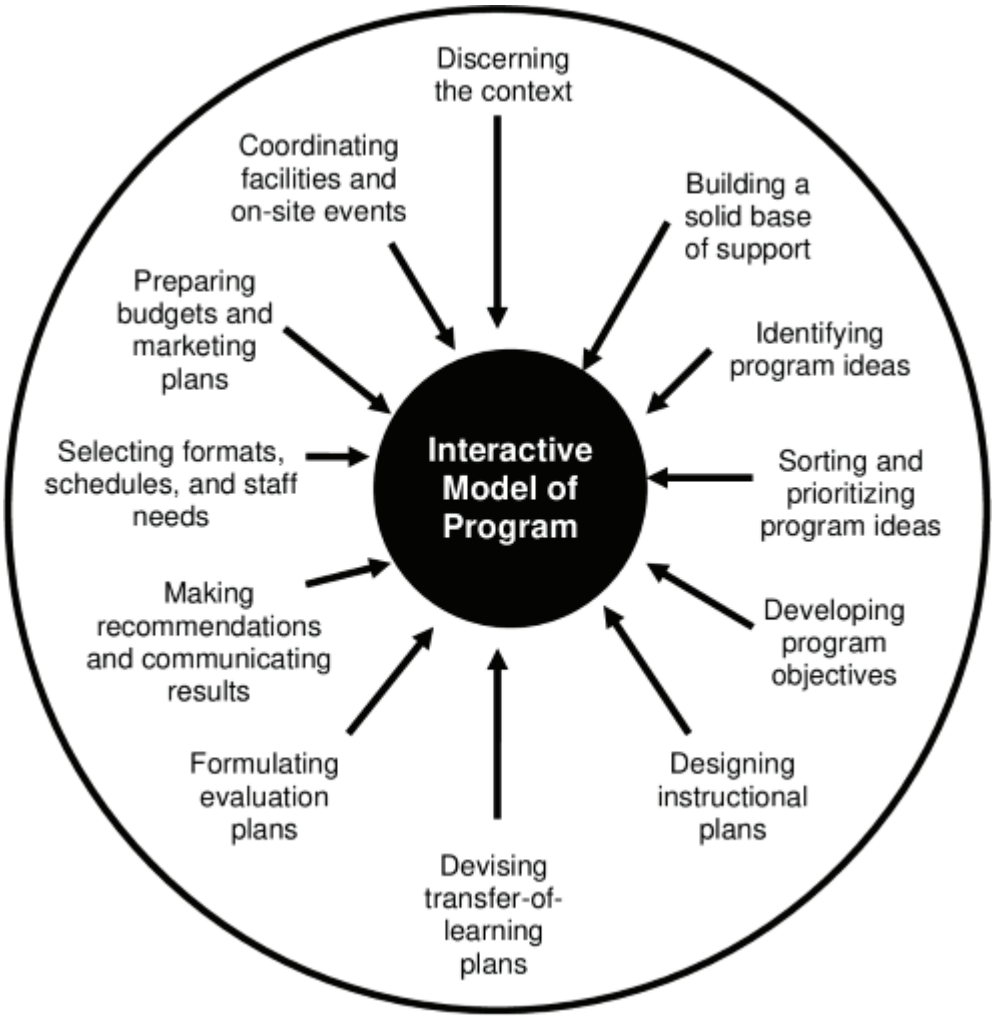


Hale L, et al. 2020. *Annu. Rev. Public Health.* 41:81–99

The Precede-Proceed Model is used with health education and health promotion activities. This model indicates how and when to evaluate interventions and the cost benefit analysis



In terms of content, logistics, and practical matters, the Department uses Rosemary Cafarella's Interactive Model of Program Planning for Adult Learners.



Finally, to ensure a focus on health equity, the Department has begun to use the Robert Wood Johnson Foundation's Health Equity Framework.



FRANCISCAN HEALTH'S IMPLEMENTATION PLAN 2019-2021

Top health needs in the previous cycle included mental health, substance abuse, adolescent suicide, and frequent chronic diseases. Considering this data, and the desire to address root causes of community health issues, a singular focus was determined: the prevention, management, and healing of adverse childhood experiences (ACEs). ACEs are childhood events that cause lasting trauma. Research shows that the more trauma that one experiences in childhood, the more likely it is for an individual to experience poor mental health and physical health outcomes, including depression and diabetes, as well as engage in risky health behaviors, like using tobacco and illegal substances.

These are health issues that don't resolve quickly, especially under the circumstances of a pandemic. Franciscan Health was able to educate thousands of professionals, parents and caregivers of all types, and internal staff on childhood trauma. In addition, coalitions in each community began to work on strengthening support networks. This work will not only continue into 2022-2024, but serve as an important foundation for new initiatives.

SELECTING PRIORITY HEALTH NEEDS

The list of top health needs presented in this report is quite extensive due to the presentation of social needs, poor health behaviors, and poor health outcomes. However, this presentation is vital to understand root causes, multi-pronged issues, and the impact on morbidity and mortality. Appropriate interventions can be executed when the needs are viewed in this way.

There are few health needs that are eliminated when viewing the top health needs in clusters and from the perspective of root cause. Mental health, physical health, and social well-being are intertwined and with the right interventions, pairs of domains can be addressed. The interventions selected for the 2022-2024 Community Health Improvement Plan seek to do just that.

In general, these are the health and social needs eliminated:

• Poverty, Sufficient Income, Economic Development: Franciscan Health has adjusted wages for coworkers and supports development as an anchor institution in communities. However, resources to address this are beyond the scope of the implementation plan.

• Access to Mental Health or Substance Abuse Treatment: The implementation plan does include supportive services for the prevention and healing of conditions. However, it is beyond the scope of the plan to provide additional providers.

• Housing and Related Quality Issues: Resources to invest in housing are not available at this time.

• Cancer, Cardiovascular Diseases, and Other Specific Diseases: General healthy lifestyle needs are addressed, including activities that are key to prevention and management. Because of the focus on this, specific diseases are not listed.

• Tobacco: Franciscan Health communities have high tobacco use rates. To address this, the health system will engage in new activities that include clinical treatment. Since this work is collective and doesn't always meet the qualifiers of community benefit, it is not included in this plan.

•Unsafe Sex, STIs, and Teen Pregnancy Prevention: Various community based organizations provide many of these services.

INTRODUCTION: COMMUNITY HEALTH IMPROVEMENT PLAN 2022-2024

Healthy Bodies, Healthy Connections, Healthy Minds

Physical health, mental wellness, and social well-being domains are a focus of this CHIP. This theme allows Franciscan Health to maximize resources as a system, but tailor approaches to the unique needs of each community served. Every effort is made to serve those with the highest disparities or to build community capacity to eliminate such disparities.

Healthy Bodies

Incorporating improvement in access to healthy food, education on physical activity and nutrition, and opportunities for community members to participate in physical activity assists in reducing obesity and chronic diseases. In addition, research shows physical activity and nutrition can build resilience and reduce the impact of childhood trauma. Franciscan Health will be partnering with community partners to expand reach, resources, and the creation of sustainable infrastructures.

Healthy Connections

Building strong community safety nets, encouraging social cohesion, and developing infrastructure to better support families are vital to mental wellness and social wellbeing. The interventions in this area have the potential to reduce poor mental health, encourage positive community engagement, and serve as a foundation for healthier choices. Connections to meet social needs and improve social determinants of health are featured.

Healthy Minds

Mental wellbeing continues to be a top concern in the communities served by Franciscan Health. Prevention and resilience intervention, like trauma informed care practices and mindfulness, are featured in the plan. Unfortunately, suicide and other harmful behaviors have increased in may communities. To address this, the plan also includes training and actions to prevent such drastic measures.

….And Healthy Communities, too.

Each community has its own unique initiative that Franciscan Health is proud to participate. In some communities, additional resources or opportunities may exist. In this section, you'll find reference to some of these actions.

Healthy Bodies		
Goal:	Families will improve their physical health and prevent chronic disease	
Objective:	Improve engagement with nutrition and physical activity by increasing participation community-based programming.	
	Target Population:	Families
	Secondary Population:	N/A
Strategy 1:	In Partnership with Purdue Extension Services, provide Eat Smart, Move More; a minimum of two times a year, targeting 20 households in each session	
Tactics:	Year 1:	Identify target population and geographic area to serve vulnerable families
		Develop shared strategy for course implementation
		Implement two sessions
	Year 2:	Adjust target population as needed
		Add community based partners to expand reach and education
		Implement two sessions
	Year 3:	Adjust target population as needed
		Build sustainability infrastructure for Year 4
		Implement two sessions
Investment:		$500-1,2000 per program
Leading Indicators:	Number People/Number Programs:	20 represented families per session
	Assessment Type:	Pre-test, post-test scores
Lagging Indicators:	Expected Outcomes:	"Understand basic nutritional content of food and beverages Examine food safety guidelines Review food resources and making healthy selections"
	Benefits Period:	18 months
	Post Program Evaluation:	Six month post-program evaluation
Strategy 2:	Develop and distribute educational materials to food pantries with information on healthier eating using commodities	
Tactics:	Year 1:	N/A
	Year 2:	Research and develop fresh produce education topics
		Create infographics and flyer
		Print and deliver to local food pantry
	Year 3:	Review and evaluate use with pantry staff and clients.
Inputs:	Investment:	$200 per pantry
Leading Indicators:	Number People/Number Programs:	1,000 people per year
	Assessment Type:	N/A
Lagging Indicators:	Expected Outcomes:	Increased knowledge on selecting food commodities
	Benefits Period:	3 months
	Post Program Evaluation:	Three month post-program evaluation
Inputs:	Investment:	$800 per session
Leading Indicators:	Number People/Number Programs:	
	Assessment Type:	Pre-program, post-program cardiovascular change; program evaluation
Lagging Indicators:	Expected Outcomes:	"Increase in minutes of movement per week Understand key concepts to maintaining healthy physical activities"
	Benefits Period:	Six months
	Post Program Evaluation:	Three month post-program evaluation

Healthy Connections		
Goal:	Community safety nets, services, and resources will improve for vulnerable communities	
Objective:	Improve wrap around care for pregnant women and new families leading to a decrease in infant and maternal mortality	
	Target Population:	Infants, pregnant women, and new mothers
	Secondary Population:	Families and professionals
Strategy 1:	Develop supportive services in communities without Safety Pin funded programming (LA, CR, IN, MV)	
Tactics:	Year 1:	Conduct community assessment to determine additional services needed in the community to Project Swaddle
		Develop infrastucture for a diaper bank in the Lafayette community
		Promote virtual infant and maternal health related education classes
	Year 2:	Secure funding and resources to implement services needed based on community assessment
		Begin diaper bank operations
		Promote virtual infant and maternal health related education classes
	Year 3:	Implement services from community assessment findings
		Continue diaper bank operations
		Promote virtual infant and maternal health related education classes
Inputs:	Investment:	TBD
Leading Indicators:	Number People/Number Programs:	TBD
	Assessment Type:	Pre-program, post-program cardiovascular change; program evaluation
Lagging Indicators:	Expected Outcomes:	Improved infant and maternal mortality rates
	Benefits Period:	TBD
	Post Program Evaluation:	TBD

Healthy Connections		
Goal:	Community safety nets, services, and resources will improve for vulnerable communities	
Objective:	Strengthen social service networks with community resource sharing and collaborative trauma informed practices	
	Target Population:	Professionals
	Secondary Population:	Families and professionals
Strategy 1:	Provide We Can, We Care training and toolkit to 75% of social service organizations within the community	
Tactics:	Year 1:	Develop tool kit and curriculum
		Test materials with partner organizations
		Create a community plan for engaging social service organizations in the program
	Year 2:	Host a minimum of two trainings with follow up networking opportunities
	Year 3:	Host a minimum of two trainings with follow up networking opportunities
		Develop a sustainability plan for Year 4
Investment:		$1,000 per class
Leading Indicators:	Number People/Number Programs:	2 trainings per year
	Assessment Type:	Pre and post test, program evaluation
Lagging Indicators:	Expected Outcomes:	Development and implementation of trauma informed practices
	Benefits Period:	2 years
	Post Program Evaluation:	Six month post-program evaluation
Strategy 2:	Strengthen Resilience Coalitions to include referral networks and collaborative space to resolve system issues unique to the community	
Tactics:	Year 1:	Begin education based on Building Resilient Communities
		Recruit additional member organizations
		Determine gaps in the safety net that need to be addressed
	Year 2:	Investigate and implement solutions to gaps
		Recruit additional member organizations
		Facilitate networking and sharing of resources
	Year 3:	Recruit additional member organizations
		Determine additional gaps and organizational 'warm hand-offs' needed
		Create new resource guide for the community
Investment:		$100 per meeting
Leading Indicators:	Number People/Number Programs:	Six meetings per year
	Assessment Type:	Regular evaluation
Lagging Indicators:	Expected Outcomes:	Development and implementation of safety net processes
	Benefits Period:	2 years
	Post Program Evaluation:	N/A

Healthy Connections		
Goal:	Community safety nets, services, and resources will improve for vulnerable communities	
Objective:	Provide resources to families related to social determinants of health	
	Target Population:	Families
	Secondary Population:	Professionals
Strategy 1:	Continue to empower local social service agencies to expand capacity by providing funds through the Social Impact Partnership Program (SIPP)	
Tactics:	Year 1:	Promote SIPP process to community organizations
		Assist in evaluating proposals
		Work with grantees on technical assistance, networking, and resource development
	Year 2:	Promote SIPP process to community organizations
		Assist in evaluating proposals
		Work with grantees on technical assistance, networking, and resource development
	Year 3:	Promote SIPP process to community organizations
		Assist in evaluating proposals
		Work with grantees on technical assistance, networking, and resource development
Investment:		Limited
Leading Indicators:	Number People/Number Programs:	Up to 10 community partners
	Assessment Type:	6 month, 1 year follow up
Lagging Indicators:	Expected Outcomes:	"Development of individual networks of resources Provision of resources"
	Benefits Period:	1 year
	Post Program Evaluation:	N/A
Strategy 2:	Initiate direct parent education through Reach Out and Read and Parent Cafes	
Tactics:	Year 1:	Recruit one physican practice to implement the Reach Out and Read program
		Work with at least one community based partner to implement Parent Cafes
		Provide technical support to physician practices and community organizations on these programs
	Year 2:	Recruit one physican practice to implement the Reach Out and Read program
		Work with at least one community based partner to implement Parent Cafes
		Provide technical support to physician practices and community organizations on these programs
	Year 3:	Recruit one physican practice to implement the Reach Out and Read program
		Work with at least one community based partner to implement Parent Cafes
		Provide technical support to physician practices and community organizations on these programs
Inputs:	Investment:	$500 per program, additional grant funds
Leading Indicators:	Number People/Number Programs:	400 families per year
	Assessment Type:	Post program evaluation
Lagging Indicators:	Expected Outcomes:	"Improved home environments Improved family relationships Improved early childhood learning"
	Benefits Period:	Two years
	Post Program Evaluation:	TBD

Healthy Minds		
Goal:	Youth and adults will have access to the resources needed for mental well-being.	
Objective:	Franciscan Health will increase the number of individuals trained to respond to suicidal behaviors and promote mental wellness.	
	Target Population:	Professionals, adults, and teens in high risk communities
	Secondary Population:	Those with suicidal ideation
Strategy 1:	QPR, ASIST, Mental Health First Aid, and Safe Talk will be delivered	
Tactics:	Year 1:	Confirm a minimum of one trained facilitator able to serve the community
		Provide a minimum of two trainings in the community
	Year 2:	Recruit additional facilitators
		Provide a minimum of six trainings in the community
	Year 3:	Recruit additional facilitators
		Provide a minimum of eight trainings in the community
Investment:		$500 per course
Leading Indicators:	Number People/Number Programs:	25 participants per course
	Assessment Type:	Post event evaluation
Lagging Indicators:	Expected Outcomes:	Confidence in responding to individuals in crisis
	Benefits Period:	One year
Strategy 2:	Develop and implement resilience tools and education as an addition to existing community activities.	
Tactics:	Year 1:	Develop tools and resources as add on activities to existing programming
		Develop specific curriculum to train the public on mindfulness and resilience
		Pilot one course
	Year 2:	Add additional tools for existing programming
		Implement two courses to train the public on mindfulness and resilience
		Implement one course to train professionals on mindfulness and resilience
	Year 3:	Implement two courses to train the public on mindfulness and resilience
		Implement two courses to train professionals on mindfulness and resilience
Investment:		$200 per course
Leading Indicators:	Number People/Number Programs:	20 people per course
	Assessment Type:	Post event evaluation
Lagging Indicators:	Expected Outcomes:	Participants will demonstrate appropriate coping skills
	Benefits Period:	One year

Be sure to check https://www.franciscanhealth.org/communityhealth for more ideas and resources.

To become involved in Franciscan Health's work, please contact your local coordinator:

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