

# Healthy People



## OUTCOME TEAM ROSTER

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## VISION

Everyone makes choices—for themselves or for those entrusted to their care—which promote better health. Everyone gets the information and support they need to avoid preventable health problems. Both physical and mental wellness are valued. Everyone has access to an adequate level of health care, including prenatal care, from birth through death.

## HEALTHY PEOPLE OUTCOME TEAM REPORT

The Healthy People Outcome Team continues to advance efforts in Montgomery County that promote comprehensive wellness for all residents. Initiatives begun by the Team in 2006 have progressed and related accomplishments are highlighted in this report.

### ACCESS TO HEALTHCARE

In an effort to understand how Montgomery County residents access the necessary healthcare to obtain and maintain optimal health, the Family and Children First Council approved financing to engage consultants in developing a comprehensive scan of the community's health environment. As a result, the Montgomery County Healthcare Safety Net Task Force was appointed in September 2006 by the Montgomery County Board of County Commissioners. The Task Force was charged with recommending an innovative vision and achievable set of strategies to improve and finance the healthcare safety net for vulnerable populations in Montgomery County.

The Task Force, comprised of 19 members representing government, business, community and hospital leaders, met over the course of 14 months to assess the safety net environment and recommend possible strategies for providing and financing healthcare services for vulnerable populations. With leadership from Mike Ervin, MD, and Kathy Hollingsworth, CEO of Innovative Interchange, the Task Force members were provided with vital information about Montgomery County, the current healthcare safety net structure and financing, and alternatives and lessons from other communities at the local, state, and national levels.



The Lewin Group of Washington, D.C. was retained to complete an environmental scan documenting the extent of uncompensated care in Montgomery County and to outline key factors facing the community. During their review, they looked at the county's demographics, economic trends, health status, characteristics of its vulnerable populations, service delivery capacity, and safety net capacity and use. The scan included an analysis of public information, emergency department utilization and inpatient statistics, and results from 30 semi-structured interviews.

The Task Force examined coverage and service models from other parts of the country. With local initiatives in place and many state initiatives beginning, there has been a significant opportunity to learn from other communities. With knowledge of specific community plans, they also reviewed various resources from the Health Policy Institute of Ohio. The Montgomery County Healthcare Safety Net Task Force agreed to forward potential strategies to the Montgomery County Board of County Commissioners for further consideration.

An initial step in the process of creating a safety net for vulnerable populations consisted of developing Federally Qualified Health Centers (FQHCs) in

Montgomery County. An FQHC is a type of provider defined by the Medicare and Medicaid statutes. It includes all organizations receiving grants under Section 330 of the Public Health Service Act which defines federal grant funding opportunities for organizations to provide care to underserved populations.

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FQHCs must provide services for a minimum of 32 hours per week and have professional call coverage when the practice is closed, either directly or through an after-hours care system. These centers must use a sliding fee scale with discounts based on patient family size and income in accordance with federal poverty guidelines and must be open to all, regardless of ability to pay. Other benefits include:

- enhanced Medicare and Medicaid reimbursement;
- medical malpractice coverage through the Federal Tort Claims Act;
- eligibility to purchase prescription and non-prescription medications for outpatients at reduced cost through the 340B Drug Pricing Program;

- access to National Health Service Corps;
- access to the Vaccine for Children program; and
- eligibility for various other federal grants and programs.

The Community Health Centers of Greater Dayton (CHCGD) is a new non-profit organization that has been incorporated in order to establish an FQHC in the Dayton metropolitan area, the only metropolitan area in Ohio without an FQHC. Primary healthcare services will be delivered through three clinic sites which are being folded into CHCGD: East Dayton Health Center, Corwin Nixon Health Center, and Charles Drew Health Center. CHCGD has submitted a \$650,000 grant application for Community Health Center funding from the Department of Health and Human Services. This will enable CHCGD to serve an additional 4,000 patients in the Dayton metropolitan area.

Early in 2008, the Task Force will present its finalized recommendations to the Family and Children First Council and the Montgomery County Board of County Commissioners.

## LOW BIRTH WEIGHT REGISTRY

Babies born at low birth weight (LBW), defined as having a birth weight of less than 2,500 grams (5 lbs. 8 oz.), begin life with the cards stacked against them. These babies are at increased risk of serious health problems as newborns, including lasting disabilities such as mental retardation, learning problems, cerebral palsy, vision and hearing loss, and even death.

Since the FCFC began tracking the number of babies born at low birth weight, Montgomery County's rate has been higher than those of both the state and the nation almost every year. (See page 7 for the most recent data.) To respond to this community issue, the Family and Children First Council approved funding for a two-year period to support the collaborative efforts of the Greater Dayton Area Hospital Association and Help Me Grow/Brighter Futures in the creation and development of a Low Birth Weight Registry. The Registry started operating in early 2007. Through this effort, interventions with the potential to reduce the incidence of babies born at low birth weight can be identified.

The Low Birth Weight Registry collects data on LBW infants born to Montgomery County residents. The goal is to collect data elements not captured on the birth certificate in order to analyze risk factors that contribute to low birth weight. Data are currently being collected on mothers who give birth at Miami Valley Hospital since the majority of

Montgomery County low birth weight infants (63% in 2006) are born there.

In 2008, the Low Birth Weight Registry anticipates adding 6-8 infants per week to the database and will consider the feasibility of expanding to other birthing units in Montgomery County including Good Samaritan Hospital, Kettering Medical Center, and Southview Hospital. Other deliverables include developing a standard report card to present to the Regional Perinatal Data Use Consortium (Low Birth Weight Task Force) on a regular basis. Groups of stakeholders will also be convened to determine what data should be used for an even more comprehensive picture of the LBW issue.

## OBESITY PREVENTION

According to *F as in Fat*:

*How Obesity Policies are Failing in America*, 2005, Ohio ranked 13th highest in the U.S. in the rate of adult obesity at 24.4 percent. Even more shocking – the percentage of overweight children in the United States tripled between 1980 and 2002 (Ohio Department of Health – Division of Family and Community Health Services, 2005). Children between the ages of 2 and 18 years old are considered overweight if their body mass indexes (BMIs) are equal to or greater than the 95th percentile specific to their age and gender as developed by the Centers for Disease Control and Prevention.

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for in-depth  
analysis



Many researchers and clinicians are calling this trend an epidemic, noting the potentially devastating health consequences which include high blood pressure and increased levels of cholesterol, lipid, and insulin. Furthermore, overweight children have the potential to develop into lifelong afflictions by increasing their risk for developing major diseases, including type 2 diabetes, heart disease, stroke, and some forms of cancer. Montgomery County children are not immune to this epidemic. According to *Healthy Ohioans: A Report on Body Mass Index of Ohio's Third Graders 2004-2005*, 24.9% of Montgomery County's 3rd grade children are overweight, higher than the State's average of 20.6%. Another 16.6% are at risk of becoming overweight, with a BMI between the 85th – 95th percentile (Ohio Department of Health, 2005).

To address this public health problem, the Healthy People Outcome Team set a goal in 2007 to establish a county-wide initiative focusing on preventing children from becoming overweight. This effort will gather information regarding current programs targeted at combating obesity, identify needs in the community, and develop a plan for a comprehensive prevention program. In 2008, funds will be sought to launch this critical effort, establish a committee that will focus its time and efforts on this issue, and initiate a strategic plan geared towards encouraging Montgomery County residents to adopt healthy lifestyles that will ultimately spare our children the health burdens stemming from obesity.