

Silverton Hospital

DBA

Legacy Silverton Medical Center

Community Health Needs Assessment

FY 2020



Mission

Our legacy is good health for our people, our patients, our communities, our world

Vision

To be essential to the health of the region

Values

Respect • Service • Quality • Excellence

Responsibility • Innovation • Leadership





CONTENTS

Community Health Needs Assessment

Introduction
About Legacy Silverton Medical Center
About this report
What we learned from our community health needs assessment 7 By the numbers: A data snapshot of the community we serve
What Legacy Silverton is doing to address these issues
Conclusion
References

Legacy Silverton Medical Center

COMMUNITY HEALTH NEEDS ASSESSMENT

Introduction

About Legacy Silverton Medical Center

Legacy Silverton Medical Center (LSMC) is a nonprofit regional hospital located in Silverton, Oregon, in the heart of the Willamette Valley, about an hour south of Portland and 20 minutes east-northeast of Salem, the state capital. Founded in 1917, the 48-bed facility moved to its current location in 1938.

Silverton joined Legacy Health on June 1, 2016, and has been reported on Legacy's financial summary beginning in fiscal year 2017, making it the newest member of the six-hospital health system established in 1989 by the merger of two nonprofit systems in the four-county metropolitan Portland, Oregon area. The system's mission is:

Our legacy is good health for our people, our patients, our communities, our world.

A full-service community hospital, Legacy Silverton offers a comprehensive mix of services, many of which are not typically found in a hospital of this size. These services include a Level IV trauma center, a 24-hour emergency department, family birth center, diagnostic imaging, orthopedics/sports medicine, nutrition services, and wound care and infusion services.

In addition, Legacy is part of a collaborative providing psychiatric emergency services — Unity Center for Behavioral Health. Unity Center is a joint effort of Adventist Health, Kaiser Permanente, Oregon Health & Science University, and Legacy Health. It is the first collaborative medical initiative of its kind in the Pacific Northwest.

About the area we serve

Legacy Silverton Medical Center defines service area based on actual patient origin (zip codes) and geographic location. Legacy Silverton sits in the Willamette Valley, located in Marion County, Oregon's fifth most populous county. Marion County represents the majority of the Legacy Silverton primary service area and covers about 1,200 square miles with a certified population estimate of 341,286 according to 2017 population data — an increase of 8 percent since 2010. The primary service area includes the cities/towns of Silverton, Woodburn, Mt. Angel, Scotts Mills, Gervais, Molalla and Salem. ZIP codes include 97071, 97381, 97301, 97302, 97303, 97305, 97306, 97362, 97038, 97317, 97373, 97026 and 97375.

By ethnicity and race, Marion County has a lower percent of White residents, and a higher percent of residents that identify as Hispanic, American Indian/ Alaskan Native and Native Hawaiian/Pacific Islander than Oregon overall. The three main languages spoken in Marion County are English, Spanish, and Asian Pacific Islander languages.

Notably, because Marion County is a region known for its agriculture, many of its communities see a seasonal influx of migrant farm workers, with the Latino population the majority population in two of the communities (Woodburn and Gervais)¹ and continuing to grow.

Young Latinos represent the fastest-growing segment of Legacy Silverton's primary service area population. According to the Portland State University population forecast study, the average Marion County mother has 2.37 children, while the average Marion County Hispanic mother has 3.51 children.² Further, according to the Oregon Department of Education, the majority of Marion County kindergarten classes have more than 50 percent of students identifying as Hispanic.

By age, Marion County has a younger population than Oregon as a whole, with a large percentage of residents under age 25 than the state. The median age in Marion County is 36.4 years, while the Oregon median age is 39.2 years.

Socioeconomically, Marion County residents have a lower median household income than Oregon residents in general (\$50,775 versus \$53,270). Marion County also has a larger percent of its population living below the federal poverty level when compared to the state.

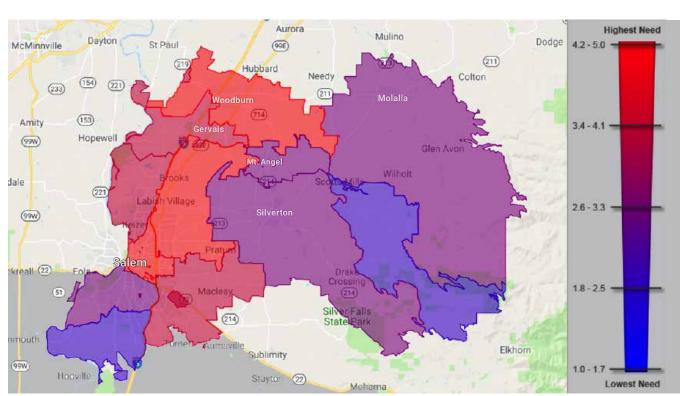
Other noteworthy facts about the population Legacy Silverton Serves:

- Marion County has a smaller percentage of residents who are veterans than the state does.
- Marion County has a larger percentage of singleparent households than the state does, and many more are headed by women than men.
- Marion County has a higher percentage of residents who did not complete high school, and a lower percentage of residents with a college degree or higher, than Oregon overall.

• A smaller percentage of Marion County third graders are considered proficient readers than are Oregon third graders.

In addition, the most recent count of the homeless community in Marion and Polk counties revealed:

- 59 percent were male
- 84 percent were White
- 29 percent of homeless community members reported that they were chronically homeless.
- The four most common responses given as a reason for homelessness were that individuals were "Unemployed" (41 percent), "Could not afford rent" (23 percent), "Homeless by choice" (17 percent), and "Mental or emotional disorder" (16 percent).
- The two primary factors respondents believe would improve their current situation were affordable housing and a job/income source.



The Dignity Health and Truven Health Community Needs Index (CNI) is accepted as the national standard in identifying communities with health disparities and comparing relative need. CNI for the Legacy Silverton primary service area shows (on a scale of 1 = low need to 5 = high need) several highest-need communities adjacent to Legacy Silverton.

About this report

The purpose of this report

The Patient Protection and Affordable Care Act (ACA), IRS Section 501(r)(3), requires tax-exempt hospital facilities like ours to conduct a Community Health Needs Assessment (CHNA) at least once every three years. This report is approved by the Legacy Silverton Board of Directors and made available to the public in compliance with the IRS requirements.

The purpose of the CHNA is to:

- Determine the priority factors influencing the health of the community we serve
- Identify the needs and gaps affecting the health status of various populations within this community
- Identify how our organization's resources and expertise can help address these issues

This report summarizes the findings of a joint community health assessment conducted by the Marion and Polk county health departments. This report contains demographic, socioeconomic and health data reported in the Community Health Assessment for Marion County, Oregon, 2019 (see Appendix A, page 11).

A collaborative approach to assessing our community's needs

In the summer of 2014, driven by shared data needs, the health departments of Marion and Polk counties began to discuss a joint community health assessment and improvement plan. The adjacent counties work with similar health care provider partners — many of which are required to conduct community health needs assessments every few years. These assessments represented a significant duplication of efforts and resources since the organizations were, for the most part, serving (and assessing) the same communities.

Driven by these shared data needs, Marion and Polk counties joined forces with their mutual partners and stakeholders and established the Marion Polk Community Health Assessment Steering Committee and Core Group.

In January 2018, Marion County Health & Human Services, Polk County Health Department, Willamette Valley Community Health (WVCH), local health professionals, and community partners began a new MAPP (Mobilizing for Action through Planning and Partnerships) cycle to assess and improve the health of the community. MAPP is a flexible, evidence-based framework, created by the National Association of County Health Officials (NACCHO).

This report draws on the joint CHNA findings specifically for Marion County, which includes the primary service area for Legacy Silverton Medical Center.

How information was gathered

The Steering Committee identified community health needs through a comprehensive study of population, state, county, and community data, including:

- Surveying community partners working in social, health, community and educational settings and the community at large
- An assessment of the Marion County public health system
- Compiling data from national and state surveillance systems such as the Centers for Disease Control and Oregon Health Authority Behavioral Risk Factor Surveillance Survey, as well as state and local data from birth and death records
- Community forums in Woodburn, Salem, Stayton and Independence

More detailed information on these sources of information can be found beginning on page 245 of the Marion County Community Health Assessment report (see Appendix A, page 11).

What we learned from our community health needs assessment

By the numbers: A data snapshot of the community we serve

Here are some of the notable findings about the community Legacy Silverton serves — and its health status — revealed by the CHNA data compiled by the Marion Polk Community Health Assessment Core Group (and other sources, if applicable):

Population

- Marion County's certified population estimate as of 2017 was 341,286, an 8 percent increase since 2010.
- Marion County is the fifth most populous of Oregon's 36 counties.³
- The five largest cities in Marion County Salem, Keizer, Woodburn, Silverton and Stayton — are home to 66 percent of the country's total population. The remaining population lives in one of the smaller 15 cities or on unincorporated land.

Race and ethnicity

Although the racial and ethnic population of Marion County is predominantly White, non-Hispanic/Latino, the county has a lower percentage of White residents than the state as a whole, and the demographics of the county continue to diversify:

- Because Marion County is an agricultural region, many of its communities experience a seasonal influx of migrant farm workers; the Latino population today is the majority population in two communities (Woodburn and Gervais)¹ and continues to grow.
- Young Latinos represent the fastest-growing segment of Legacy Silverton's primary service area population, with the majority of Marion County kindergarten classes having more than 50 percent of students identifying as Hispanic.²
- Marion County has a larger percentage of residents who speak a language other than English at home than the state as a whole; Spanish and Asian and Pacific Islander languages are the main languages spoken in the county (after English).

Social determinants of health

While our health is influenced by our biology, genetics, and individual behavior, external factors are also important, such as our income/economic stability, where we live, how much education we have, and our access to health care/the availability of providers. These factors are called "social determinants of health." In Marion County, the CHNA revealed:

- Marion County residents have a lower median household income (\$50,775) than Oregon residents in general (\$53,270).
- Marion County has a larger percentage of single parent households than Oregon as a whole; of these, more are headed by women.
- Marion County has a larger percentage of its population living below the federal poverty level when compared to the state.
- One in 10 community members are considered food insecure, which is lower than the state. The proportion of the total population who are food insecure has been decreasing in recent years.
- Three out of four workers drive alone to work in the community, which is higher than the state. Roughly 25 percent of communities drive alone for more than 30 minutes to get to work, compared to 28 percent in the state.
- A higher percentage of Marion County residents have public insurance or no insurance than in Oregon as a whole.
- Marion County has a higher percentage of residents who did not complete high school than the state as a whole, and a lower percentage of residents with a college degree or higher when compared to the state.
- A smaller percentage of Marion County third-graders are considered proficient readers than Oregon thirdgraders overall.
- Adult community members below the Federal Poverty Level are less likely to see a dentist in the last year than those above it.

Chronic health conditions

Key findings from the community health assessment regarding chronic disease in Marion County include:

- The most common chronic conditions for adults in the community are depression, disability, arthritis, asthma, and diabetes.
- The top five most common causes of chronic disease hospitalization in the community are heart disease, arthritis, stroke, diabetes, and chronic obstructive pulmonary disease (COPD).
- Marion County has a higher percentage of adults with diabetes. 10 percent of community members have been diagnosed with diabetes, compared to 9 percent in the state.³
- According to the Medicaid Behavioral Risk Factor Surveillance System in 2014, the Medicaid population of Marion County had a depression prevalence almost 10 percent higher than the state's.
- Chronic obstructive pulmonary disease (COPD) was the fifth leading cause of death and chronic disease hospitalization in the community. Males, African-Americans/Blacks, American Indians/Alaska Natives, and White, non-Hispanics have higher COD mortality rates than their peers.

Emergency department admissions

People without health insurance tend to rely on the hospital emergency department for care, including for conditions that could have been treated by a primary care provider. Through this assessment, it was learned:

- While a higher percentage of the Marion County population is uninsured than the Oregon population, Marion County has a larger percentage of its population using public health insurance than in Oregon overall.
- Between 2011 and 2015, a larger percentage of Marion County residents reported going to the doctor's office and/or the free clinic when they needed health care, while a smaller percentage of Marion County residents reported going to urgent or emergency care.³

Morbidity and mortality

Based on epidemiological data, these are some of the key health issues affecting residents of Marion County:

- The top five leading causes of death in Marion County are cancer, heart disease, unintentional injuries, stroke and chronic lower respiratory diseases.
- While the incidence of lung cancer mortality has been stable, lung cancer remains the leading cause of cancer death among men and women.
- Marion County residents die of colon cancer at a higher rate than Oregon residents. Colon cancer is the fourth leading cause of cancer death and had the fourth highest incidence rate of all types of cancer.
- Breast cancer is the third most common cause of cancer death and had the highest incidence rate of all types of cancer.
- Marion County men die of heart disease at a higher rate than women, and both Marion County men and women die at a higher rate from heart disease than Oregon men and women.
- Marion County has seen an increase in the ageadjusted mortality rates for falls among older adults.
- The stroke mortality rate has been increasing in recent years in the community. Marion County residents experience a higher stroke mortality rate than the state.
- Marion County adult females have a higher prevalence of asthma than adult males.
- The chronic obstructive pulmonary disease (COPD) mortality rate has been increasing in Marion County, but is similar to the state.

What the community identifies as their health needs

The voice of the community was captured through local forums and a community wide online survey. Community members were asked, what in their communities helped them to be healthy and what things in their community prevented them from being healthy. They reported:

Top five things that help them be healthy:

- Green space (neighborhood parks, hiking trails)
- Community organizations (YMCA, libraries)
- Physical activity (recreational sports teams, gyms)
- Local fruits and vegetables (farmers markets)
- Neighborhood support (neighborhood organizations, neighborhood events)

Top five things that prevent them from being healthy:

- Lack of public transportation
- Lack of access to health care services.
- Lack of affordable housing
- Fast food restaurants
- Lack of continuous sidewalks

Top five things that need to change for them to be healthy:

- Increased access to affordable housing
- Increased access to public transportation (buses, ride share)
- Increased access to healthy foods
- Increased communication about available services
- More walking routes

In the community survey, respondents were asked to report overall community health, quality of life, neighborhood health, health care access, the most important health problems in the community, the health behaviors that affect the community most, and demographics. They reported:

The most important health issues facing the community are:

- Mental health problems
- Alcohol/drug abuse
- Housing needs (unsafe housing/unaffordable housing)
- Homelessness
- Obesity

The health behaviors most affecting the community are:

- Drug abuse
- Poor eating habits
- Alcohol abuse
- Lack of exercise
- Dropping out of school

The priority health issues facing the community we serve

When all the data from the various assessment approaches is reviewed, some specific issues and common themes emerge as the priority health issues facing the community that Legacy Silverton serves:

- Access to health care
- Behavioral health support
- Economic stability
- Education
- Food environment/food Insecurity
- Housina
- Substance use

What Legacy Silverton is doing to address these issues

Priorities: Where Legacy Silverton focuses its community benefit resources

Each year, Legacy Silverton invests a significant amount of goods, services, and funds to benefit the health of the community we serve, particularly health services for the low income and uninsured.

Consistent with our mission of good health for our community, in FY19 Legacy Health's community benefit totaled \$466.1 million, of this total, unreimbursed costs were \$440.6 million. Legacy's financial reporting to include Legacy Silverton Medical Center began in fiscal year 2017.

Our aim in making community benefits investments is fourfold:

- To influence the things we can, such as health behaviors and social determinants of health
- To prevent and/or treat specific health problems
- To support existing programs and initiatives in the community that are effective in addressing specific health needs
- To help build programs and services that achieve our shared vision for a healthy community

Based on the findings of the Marion Polk Community Health Assessment, and how we can best apply our resources and expertise to help address these needs, Legacy Silverton is focusing its efforts on these priority issues:

Access to care

Improving residents' ability to get the health care services they need, with an emphasis on primary/preventive care and management of chronic conditions such as obesity, diabetes and hypertension in adults.

Behavioral health

Expanding the availability of and access to behavioral and mental health services for youth and adults to help address such conditions as substance-use disorder, depression, suicide and PTSD.

Social determinants of health

Addressing the need for policies, systems, services and environments that support healthy behaviors, which means advancing solutions for such issues as homelessness and affordable housing for the underserved, food scarcity and, once again, access to health care. Education, meaningful employment, and removing barriers to culturally competent services are key to improving the health of the community.

Details on the specific initiatives Legacy Silverton is undertaking to address these priority issues can be found in our Community Health Improvement Plan (CHIP).

Building on success: Progress since last CHNA

An important piece of the CHNA process is revisiting the progress made on priority health topics set forth in the preceding CHNA. By reviewing the actions taken to address a priority health issue, and evaluating impact on the community, it aids in better targeting of resources and efforts for the following CHNA cycle.

The following list (see table below) is not exhaustive of Legacy Health community benefit funded programs, but highlights what we've achieved in the most recent years based on the previous CHNA cycle.

Here are some highlights of what we've achieved

Organization	Program supported	Outcomes
Project Access Network	Specialty Care	Donated specialty care services provided to uninsured low-income adults referred by their primary care provider, hospital or emergency department
Farmworker Housing Development Corporation	Promotores Resident Leadership Program	Development of a resident leadership program designed to empower leaders in identified properties to refer and connect residents to community resource
Liberty House	Youth/Child Support Services	Funding support for mental health therapist for children who have experienced child abuse
Health Literacy Conference	Health Literacy	Over 500 individuals reached annually from over 120 community and health organizations
Silverton Area Community Aid	Food programs	Legacy Health's contributions through cash in-kind dollars supported various types of emergency aid, and the launch of a new school-based backpack program
Salud Medical Center	Primary Care	Outreach and enrollment of low-income, uninsured patients to the Oregon Health Plan (OHP)

Additionally, in 1998 the Legacy Health Board of Directors approved a \$10 million dollar fund from operating revenue to address major community health issues. Our focus from the beginning has been the significant health disparities within racial and ethnic communities and addressing the social determinants of health. Community Health Fund grants are aligned with a community health needs focus.

Health care services for the low-income and uninsured

While the Affordable Care Act has significantly lowered the uninsured rate in Oregon, longstanding income disparities in the Legacy Silverton service area underscore the ongoing need for safety-net services, which are detailed in the FY20 CHIP.

Conclusion

As you'll see in the FY20 Community Health Improvement Plan (CHIP) report, going forward we plan to sustain our efforts in addressing many of the priority issues to which we have devoted resources in the past because these needs still exist — as affirmed by the findings of our latest CHNA.

At Legacy Silverton Medical Center, our top priority has been — and continues to be — a focus on the issues which have the greatest impact on the health of our community.

If you have any questions or comments, or if you would like to obtain a copy of this needs assessment, please email us at **CommunityBenefit@lhs.org**.

Appendix A

Community Health Assessment, Marion County, Oregon, 2019

The Marion County Community Health Assessment can be found at: https://www.co.marion.or.us/HLT/communityassessments/Documents/Marion_Polk_CHA_2019_Final_Copy.pdf

References

¹Zip Atlas: Cities with the Highest Percentage of Hispanics in Oregon. (2017) http://www.zipatlas.com/us/or/city-comparison/percentage-hispanic-population.htm

²Portland State University: Population Forecasts for Marion County, its Cities and Unincorporated Area 2010–2030. (2008) https://pdxscholar.library.pdx.edu/populationreports/1/

³Marion County Community Health Assessment. (2015) https://www.co.marion.or.us/HLT/BoardsCoalitionsCommittees/HAB/Documents/2017CHAUpdate.pdf http://cni.chw-interactive.org/

⁴Dignity Health: Community Need Index. http://cni.chw-interactive.org/

Legacy Health

1919 N.W. Lovejoy St. • Portland, OR 97209 www.legacyhealth.org



MAC-5052-SILV-0320 ©2020