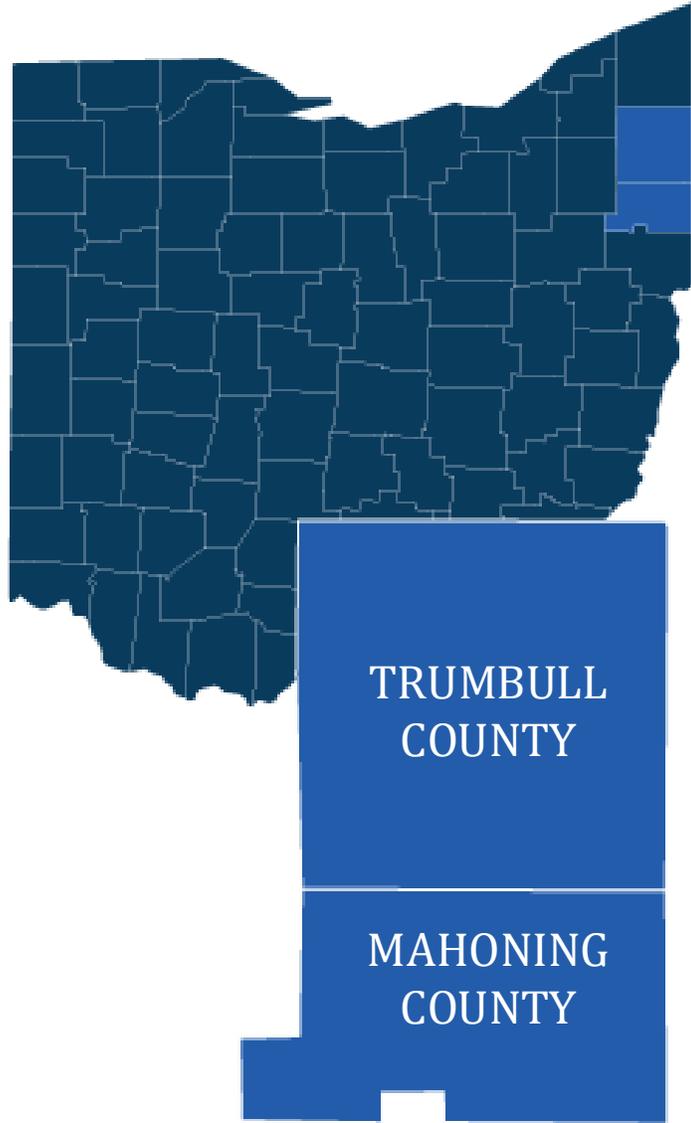


DELIVERED BY:



2025 MAHONING TRUMBULL COMMUNITY HEALTH PARTNERS (MTCHP) COMMUNITY HEALTH IMPROVEMENT PLAN

PUBLISHED NOVEMBER 2025



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A NOTE FROM MAHONING TRUMBULL COMMUNITY HEALTH PARTNERS



Mahoning Trumbull Community Health Partners (MTCHP) strives to bring together people and organizations to improve community wellness. The Community Health Assessment process is one way we can live out our mission. To fulfill this mission, we must be intentional about understanding the health issues that impact residents and work together to create a healthy community.

A primary component of creating a healthy community is assessing the needs and prioritizing those needs for impact. In 2025, MTCHP partnered to conduct a comprehensive Community Health Assessment (CHA) of their area to identify primary health issues, current health status, and other health needs. The results from the assessment provide critical information to those in a position to make a positive impact on the health of the service area's residents. The results also enable the community to measure impact and strategically establish priorities in order to develop interventions and align resources. These findings were then used to develop a Community Health Improvement Plan (CHIP) to describe the response to the needs identified in the CHNA report.

The 2026-2028 MTCHP CHIP would not have been possible without the help of numerous Mahoning and Trumbull County organizations, acknowledged on the following pages. It is vital that assessments such as this continue, so partners know where to direct resources and how to use them in the most advantageous ways.

The goals of public health can only be accomplished through community members' commitment to themselves and to each other. MTCHP believes that together, Mahoning and Trumbull Counties can be thriving communities of health and well-being at home, work, school, and play.

Importantly, this report could not exist without the contributions of individuals in the community who participated in interviews and completed the community member survey. MTCHP is grateful for those individuals who are committed to the health of the community and took the time to share their health concerns, needs, behaviors, praises, and suggestions for future improvement.

Sincerely,

Dr. Ruth Quarles

Dr. Ruth Quarles, MD
Health Commissioner
Warren City Health Department

John May

John May, BS
Deputy Health Commissioner
Warren City Health Department

Ryan Tekac

Ryan Tekac, MPH, REHS
Health Commissioner
Mahoning County Public Health

Frank Migliozi

Frank Migliozi, MPH, REHS
Health Commissioner
Trumbull County Combined Health District

Erin Bishop

Erin M. Bishop, MPH
Health Commissioner
Youngstown City Health District

ACKNOWLEDGMENTS



This Community Health Improvement Plan (CHIP) was made possible thanks to the collaborative efforts of Mahoning Trumbull Community Health Partners (MTCHP), local stakeholders, community partners, non-profit partners, and community residents. Their contributions, expertise, time, and resources played a critical part in the completion of this plan.

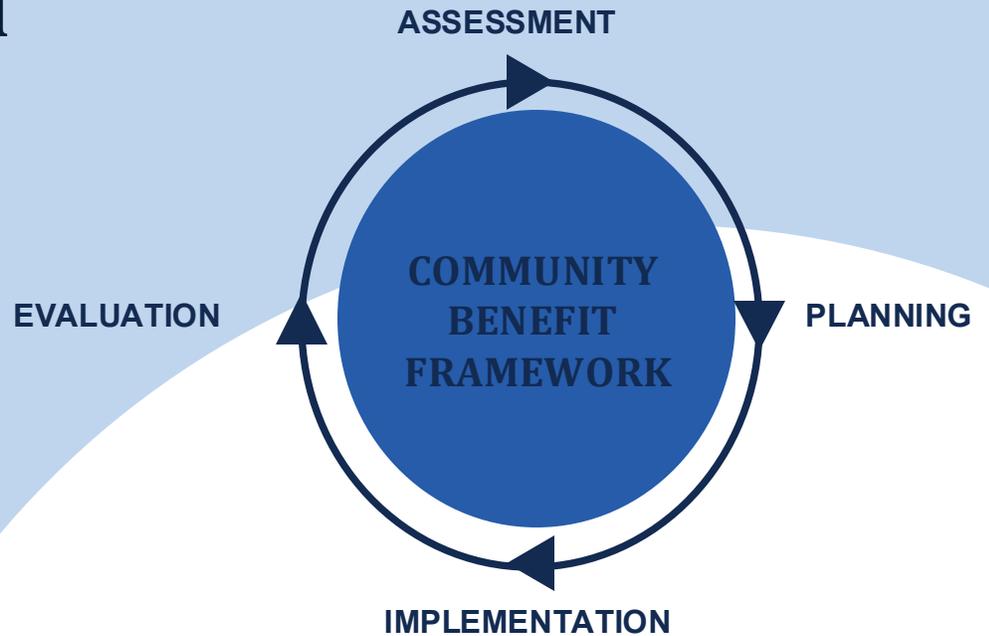
MTCHP WOULD LIKE TO RECOGNIZE THE FOLLOWING ORGANIZATIONS FOR THEIR CONTRIBUTIONS TO THIS REPORT:

Akron Children's Hospital	Rescue Mission of Mahoning Valley
City of Youngstown	SCOPE Senior Center
Direction Home of Eastern Ohio	The D5 Group
Eastgate Regional Council of Governments	Trumbull County Combined Health District
Healthy Community Partnership, Community Foundation of the Mahoning Valley	Trumbull County Mental Health and Recovery Board
Holy Trinity Baptist Church	Trumbull Neighborhood Partnership
J.E. Washington Funeral Home	Warren City
Mahoning Youngstown Community Action Partnership (MYCAP)	Warren City Health District
Mahoning County Mental Health & Recovery Board	Warren City Schools
Mahoning County Public Health	Warren Family Mission
Mercy Health	Youngstown City Health District
Mercy Health Foundation Mahoning Valley	Youngstown City Schools
Midlothian Free Clinic	Youngstown Foundation
Moxley Public Health, LLC	Youngstown Neighborhood Development Corporation
Ohio Farm Bureau	Youngstown State University
Ohio State University Extension Office	
Raymond John Wean Foundation	



INTRODUCTION

WHAT IS A COMMUNITY HEALTH IMPROVEMENT PLAN?



A **Community Health Improvement Plan (CHIP)** is part of a framework that is used to guide community health improvement activities, policy, advocacy, and program-planning efforts. For health departments, the Community Health Improvement Plan (CHIP) fulfills the mandates of the Public Health Accreditation Board (PHAB).

OVERVIEW OF THE PROCESS



To develop the Community Health Improvement Plan (CHIP), Mahoning Trumbull Community Health Partners (MTCHP) followed a process that included the following steps:

STEP 1: Plan and prepare for the Community Health Improvement Plan (CHIP).

STEP 2: Select priority health needs to address using the data from the CHA.

STEP 3: Consider approaches/strategies to address priority health needs, health disparities, and social determinants of health.

STEP 4: Select approaches/strategies with community partners to address priority health needs, health disparities, and social determinants of health.

STEP 5: Integrate and implement CHIP with community partners, health department, and hospital plans.

STEP 6: Develop a written CHIP.

STEP 7: Adopt the CHIP.

STEP 8: Update and sustain the CHIP.

Within each step of this process, the guidelines and requirements of both the state and federal governments are followed precisely and systematically.

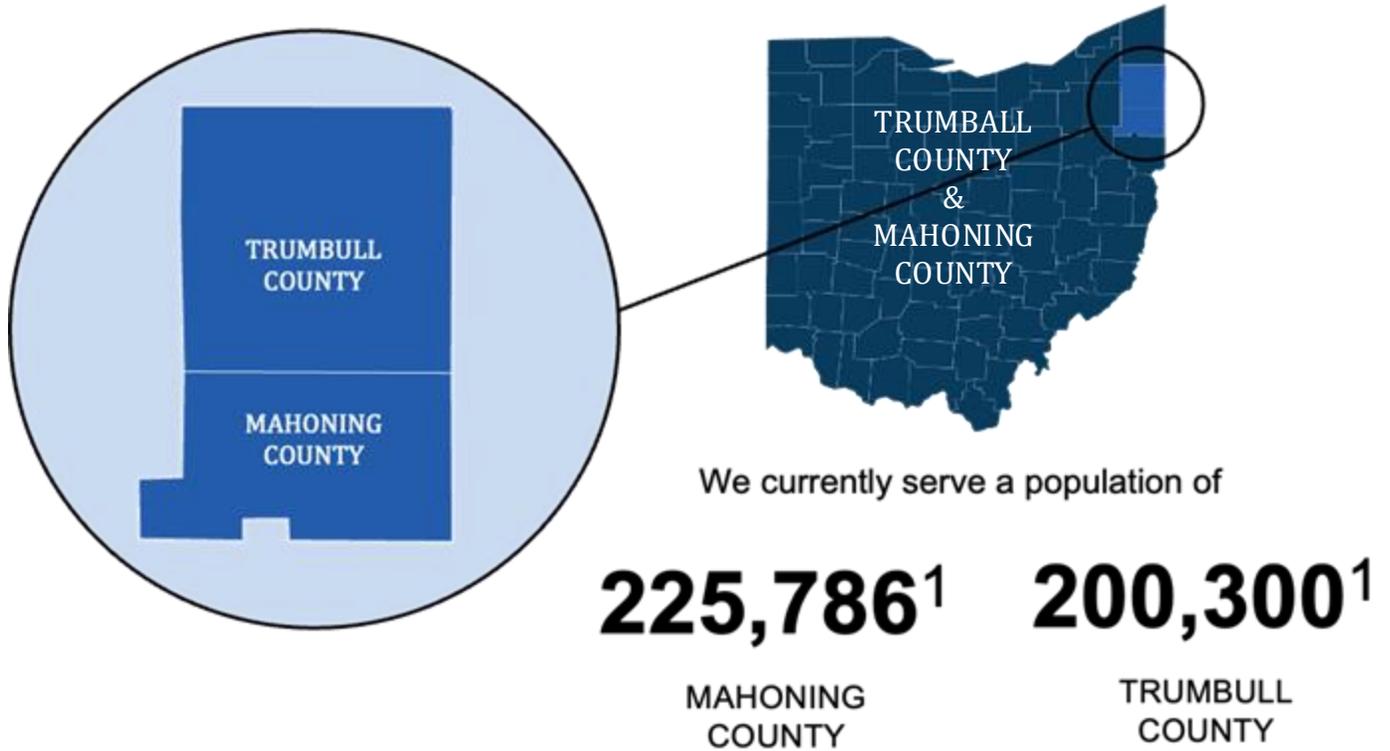
THE 2026-2028 MTCHP CHIP MEETS ALL PUBLIC HEALTH ACCREDITATION BOARD (PHAB) REGULATIONS.



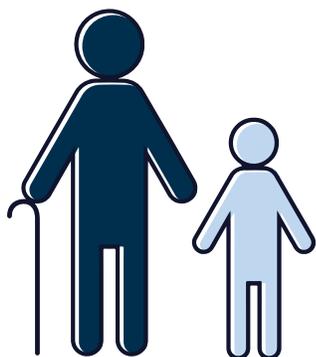
DEFINING THE MAHONING TRUMBULL COMMUNITY HEALTH PARTNERS SERVICE AREA



For the purposes of this report, Mahoning Trumbull Community Health Partners (MTCHP) defines their primary service area as being made up of Mahoning and Trumbull Counties, Ohio.



MAHONING AND TRUMBULL COUNTIES AT-A-GLANCE



Mahoning County (**43.3**) and Trumbull County (**43.3**) both have **older** median ages than Ohio (**39.9**).¹

43.3

MAHONING
COUNTY
MEDIAN AGE

43.3

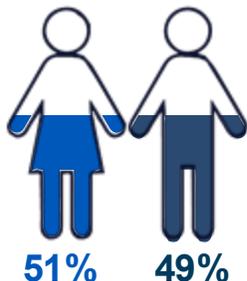
TRUMBULL
COUNTY
MEDIAN AGE

39.9

OHIO
MEDIAN AGE

23% of Mahoning and Trumbull County residents are **ages 65+**, compared to **19%** for Ohio.¹

51% of Mahoning County, Trumbull County, and Ohio residents are **women**.¹



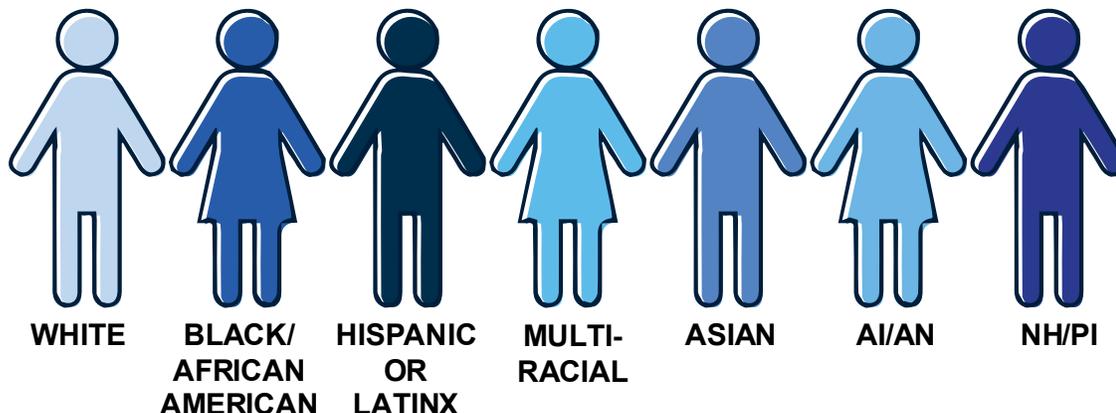
7% of Trumbull, **6%** of Mahoning County, and **5%** of Ohio residents are **veterans**.¹

2% of Mahoning County, **1%** of Trumbull, and **5%** of Ohio residents are **foreign-born**.



6% of Mahoning County, **5%** of Trumbull County, and **8%** of Ohio residents **do not speak English as their first language**. The top three languages spoken in the counties were Spanish, Italian, and Greek.¹

There is a **slightly lower proportion of White residents** and a **higher proportion of Black residents** in Mahoning County than in the state of Ohio, while the opposite is true for Trumbull County.¹



MAHONING	80%	16%	7%	3%	1%	0.3%	0.1%
TRUMBULL	88%	9%	2%	4%	0.6%	0.3%	0%

PRIORITY HEALTH NEEDS FOR MAHONING AND TRUMBULL COUNTIES



1 ACCESS TO HEALTHCARE



- **23%** of Mahoning County and **24%** of Trumbull County residents **did not have a routine checkup** in the prior year.²
- **45%** of community survey respondents say that access to healthcare is a priority need.

2 COMMUNITY SAFETY



- **31%** of survey respondents said that **crime and violence** are top concerns in the community.
- Trumbull County (**4.2**) has a slightly higher rate of sustained child abuse reports per 1,000 children than the state of Ohio (**4.1**). The rate for Mahoning County (**3.7**) is lower than the state.³

3 BEHAVIORAL HEALTH



- **26%** of survey respondents say **mental healthcare access is lacking** in the community.
- **28%** of Trumbull County and **26%** of Mahoning County have been diagnosed with **depression**.⁴

4 CHRONIC DISEASE



- **85%** of community survey respondents chose chronic diseases as a top community health need.
- **13%** of Mahoning and Trumbull County adults have **diabetes**.⁵
- **7%** of Mahoning County and **8%** of Trumbull County adults report being told they have **coronary heart disease**.⁵

5 MATERNAL, INFANT AND CHILD HEALTH



- **53%** of community survey respondents say that addressing **maternal and child health** is a top concern.
- Mahoning County has a **low-birth-weight rate** of **11%**, vs. **9%** for Trumbull County.⁶

STEP 1

PLAN AND PREPARE FOR THE COMMUNITY HEALTH IMPROVEMENT PLAN



IN THIS STEP, MAHONING TRUMBULL COMMUNITY HEALTH PARTNERS:

- ✓ DETERMINED WHO WOULD PARTICIPATE IN THE DEVELOPMENT OF THE CHIP
- ✓ ENGAGED BOARD AND EXECUTIVE LEADERSHIP
- ✓ REVIEWED THE COMMUNITY HEALTH ASSESSMENT



PLAN AND PREPARE

Secondary and primary data were collected to complete the 2025 MTCHP Community Health Assessment (https://youngstownohio.gov/sites/default/files/forms/MTCHP_2025_CHA_FINAL%20.pdf). Secondary data were collected from a variety of local, county, and state sources to present community demographics, social determinants of health, healthcare access, birth characteristics, leading causes of death, chronic disease, health behaviors, mental health, substance use, and preventive practices. The analysis of secondary data yielded a preliminary list of significant health needs, which then informed primary data collection.

Primary data was collected through key informant interviews with **25** experts from various organizations serving Mahoning and Trumbull Counties, and included leaders and representatives of medically underserved, low-income, and minority populations, or local health or other departments or agencies. A community member survey was distributed via a QR code and link, with **1,434** responses. The survey responses (from community members) were used to prioritize the health needs, answer in-depth questions about the health needs in the county, and to identify health disparities present in the community. Finally, there were **10** focus groups held across Mahoning and Trumbull Counties, representing a total of **136** community members from priority populations. The primary data collection process was designed to validate secondary data findings, identify additional community issues, solicit information on disparities among subpopulations, ascertain community assets potentially available to address needs, and prioritize health needs. More details on the methodology can be found in the 2025 Mahoning Trumbull Community Health Partners Community Health Assessment.

“

A community health assessment and improvement planning process involves an ongoing collaborative, community-wide effort to identify, analyze, and address health problems.

- *Public Health Accreditation Board (PHAB)*

”

STEP 2

SELECT PRIORITY HEALTH NEEDS TO ADDRESS USING THE DATA FROM THE CHA



IN THIS STEP, MAHONING TRUMBULL COMMUNITY HEALTH PARTNERS:

- ✓ SELECT HEALTH NEED AREAS TO ADDRESS USING DATA FROM THE CHA
- ✓ SELECTED INDICATORS TO ACHIEVE GOALS



OVERVIEW OF THE PROCESS (CONTINUED)

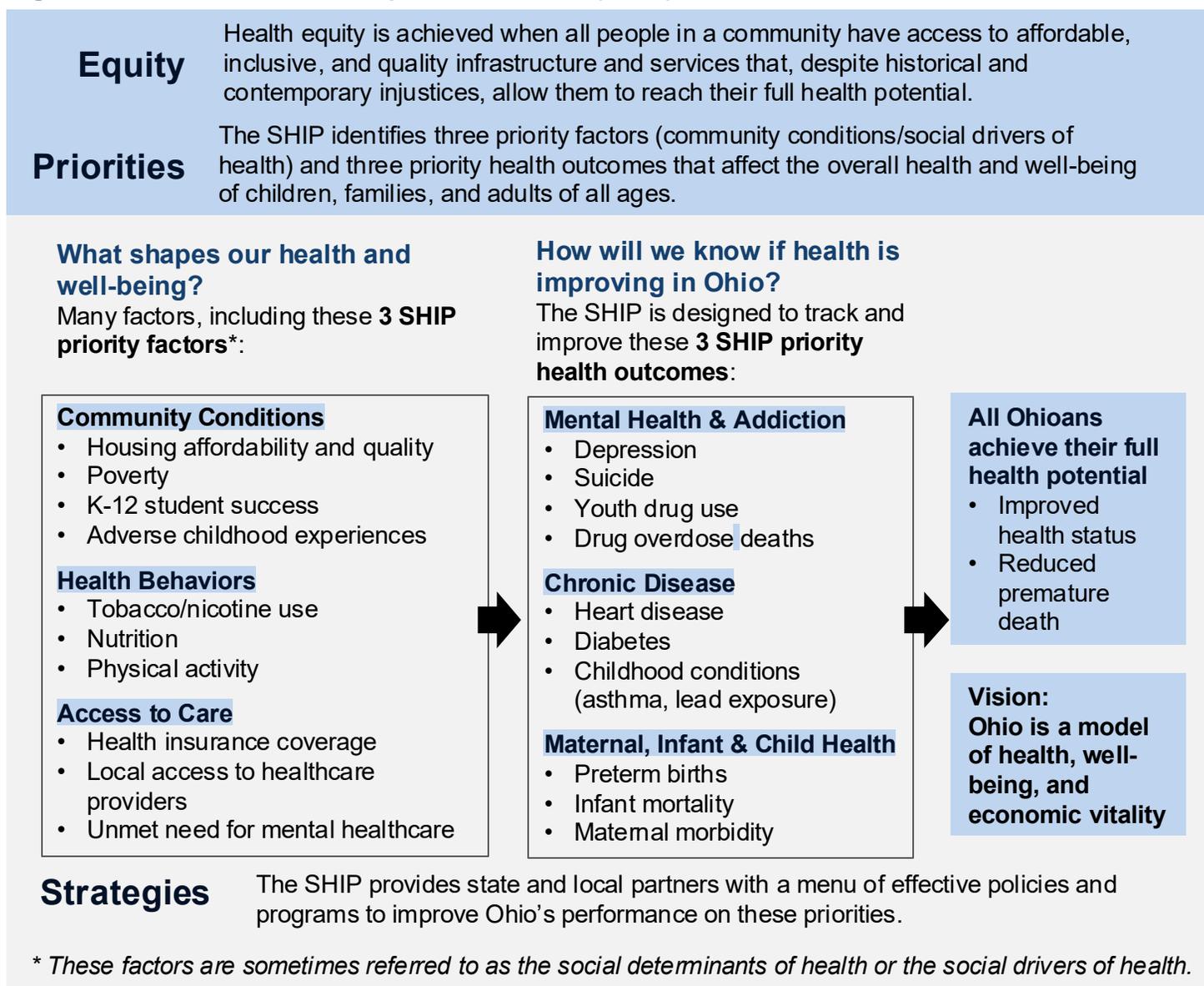
Ohio Department of Health (ODH) Requirements

The following image shows the framework from ODH that this report followed while also adhering to federal requirements and the community's needs.

Mahoning Trumbull Community Health Partners (MTCHP) desired to align with the priorities and indicators of the Ohio Department of Health (ODH). To do this, they used the following guidelines when prioritizing the health needs of their community.

First, MTCHP used the same language as the state of Ohio when assessing the factors and health outcomes of their community in the 2025 MTCHP Community Health Assessment (CHA).

Figure 1: Ohio State Health Improvement Plan (SHIP) Framework



Next, with the data findings from the community health assessment process, Mahoning Trumbull Community Health Partners used the following guidelines/worksheet to choose priority social determinants of health and priority health outcomes (worksheet/guidelines continued to next page).

ALIGNMENT WITH PRIORITIES & INDICATORS

STEP 1: Identify priority social determinants of health and priority health outcome(s).

PRIORITY SOCIAL DETERMINANTS OF HEALTH	PRIORITY HEALTH OUTCOMES
<input checked="" type="checkbox"/> Community Conditions	<input checked="" type="checkbox"/> Mental Health & Addiction
<input checked="" type="checkbox"/> Health Behaviors	<input checked="" type="checkbox"/> Chronic Disease
<input checked="" type="checkbox"/> Access to Care	<input checked="" type="checkbox"/> Maternal & Infant Health

STEP 2: Select at least one (1) indicator for each identified priority social determinant of health.

PRIORITY SOCIAL DETERMINANTS OF HEALTH	
COMMUNITY CONDITIONS	
TOPIC	INDICATOR NAME
Housing Affordability & Quality	<input checked="" type="checkbox"/> Affordable & Available Housing
Poverty	<input type="checkbox"/> Child Poverty
	<input type="checkbox"/> Adult Poverty
K-12 Student Success	<input type="checkbox"/> Chronic Absenteeism (K-12 students)
	<input type="checkbox"/> Kindergarten Readiness
Adverse Childhood Experiences	<input type="checkbox"/> Adverse Childhood Experiences (ACEs)
	<input type="checkbox"/> Child Abuse & Neglect
Food Insecurity	<input checked="" type="checkbox"/> Food Insecurity
Environmental Conditions	<input checked="" type="checkbox"/> Air Quality
	<input checked="" type="checkbox"/> Water Quality
HEALTH BEHAVIORS	
TOPIC	INDICATOR NAME
Tobacco & Nicotine Use	<input type="checkbox"/> Adult Smoking
	<input type="checkbox"/> Youth All-Tobacco/Nicotine Use
Nutrition	<input checked="" type="checkbox"/> Fruit Consumption
	<input checked="" type="checkbox"/> Vegetable Consumption
Physical Activity	<input checked="" type="checkbox"/> Child Physical Activity
	<input checked="" type="checkbox"/> Adult Physical Activity
ACCESS TO CARE	
TOPIC	INDICATOR NAME
Health Insurance Coverage	<input checked="" type="checkbox"/> Uninsured Adults
	<input checked="" type="checkbox"/> Uninsured Children
Local Access to Healthcare	<input checked="" type="checkbox"/> Primary Care Health Professional Shortage Areas
	<input checked="" type="checkbox"/> Mental Health Professional Shortage Areas
Unmet Need for Mental Healthcare	<input checked="" type="checkbox"/> Youth Depression Treatment Unmet Need
	<input checked="" type="checkbox"/> Adult Mental Healthcare Unmet Need

ALIGNMENT WITH PRIORITIES & INDICATORS

STEP 3: Select at least one (1) indicator for each identified priority health outcome.

PRIORITY HEALTH OUTCOMES	
MENTAL HEALTH & ADDICTION	
TOPIC	INDICATOR NAME
Depression	<input checked="" type="checkbox"/> Youth Depression
	<input checked="" type="checkbox"/> Adult Depression
Suicide Deaths	<input checked="" type="checkbox"/> Youth Suicide Deaths
	<input checked="" type="checkbox"/> Adult Suicide Deaths
Youth Drug Use	<input type="checkbox"/> Youth Alcohol Use
	<input type="checkbox"/> Youth Marijuana Use
Drug Overdose Deaths	<input type="checkbox"/> Unintentional Drug Overdose Deaths
CHRONIC DISEASE	
TOPIC	INDICATOR NAME
Heart Disease	<input checked="" type="checkbox"/> Coronary Heart Disease
	<input type="checkbox"/> Premature Death – Heart Disease
	<input checked="" type="checkbox"/> Hypertension
Diabetes	<input checked="" type="checkbox"/> Diabetes
Harmful Childhood Conditions	<input checked="" type="checkbox"/> Child Asthma Morbidity
	<input checked="" type="checkbox"/> Child Lead Poisoning
MATERNAL & INFANT HEALTH	
TOPIC	INDICATOR NAME
Preterm Births	<input checked="" type="checkbox"/> Preterm Births
Infant Mortality	<input checked="" type="checkbox"/> Infant Mortality
Maternal Morbidity/Mortality	<input checked="" type="checkbox"/> Severe Maternal Morbidity/Mortality

PRIMARY DATA COLLECTION

COMMUNITY MEMBER SURVEY



The 2025 Community Health Assessment (CHA) identified the following significant health needs from an extensive review of the primary (community survey, key informant interviews, and focus groups) and secondary data (existing data). The significant health needs were ranked as follows through the community member survey (1,434) responses from community members.

COMMUNITY CONDITIONS RANKING FROM COMMUNITY MEMBER SURVEY	
#1 Access to primary healthcare	43%
#2 Income/poverty and employment	36%
#3 Crime and violence	30%
#4 Food insecurity	28%
#5 Nutrition and physical health/exercise	22%
#6 Substance misuse	22%
#7 Housing and homelessness	21%
#8 Adverse childhood experiences	18%
#9 Transportation	17%
#10 Education	13%
#11 Access to childcare	12%
#12 Preventive care and practices	12%
#13 Environmental conditions	8%
#14 Internet/Wi-Fi access	5%
#15 Tobacco and nicotine use/smoking/vaping	4%

HEALTH OUTCOMES RANKING FROM COMMUNITY MEMBER SURVEY	
#1 Mental Health	91%
#2 Chronic Diseases	83%
#3 Maternal, infant, and child health	54%
#4 Injuries	20%
#5 HIV/AIDS and Sexually Transmitted Infections (STIs)	6%



ADDRESSING THE HEALTH NEEDS



From the significant health needs, Mahoning Trumbull Community Health Partners chose health needs that considered the health department and community partners' capacity to address community needs, the strength of community partnerships, and those needs that correspond with the health department and community partners' priorities.

The five Priority Health Needs that will be addressed in the 2026-2028 Community Health Improvement Plan (CHIP) are:



PRIORITY AREA 1
**ACCESS TO
HEALTHCARE**



PRIORITY AREA 2
**COMMUNITY
SAFETY**



PRIORITY AREA 3
**BEHAVIORAL
HEALTH**



PRIORITY AREA 4
**CHRONIC
DISEASE**



PRIORITY AREA 5
**MATERNAL,
INFANT, AND
CHILD HEALTH**

STEPS 3, 4 & 5

CONSIDER, SELECT, AND IMPLEMENT APPROACHES/STRATEGIES TO ADDRESS PRIORITY HEALTH NEEDS, HEALTH DISPARITIES, AND SOCIAL DETERMINANTS OF HEALTH WITH COMMUNITY PARTNERS



IN THIS STEP, MAHONING TRUMBULL COMMUNITY HEALTH PARTNERS:

- ✓ SELECTED APPROACHES/ STRATEGIES TO ADDRESS THE MTCHP PRIORITIZED HEALTH NEEDS, HEALTH DISPARITIES, AND SOCIAL DETERMINANTS OF HEALTH
- ✓ DEVELOPED A WRITTEN COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP) REPORT

#1 Priority Area: ACCESS TO HEALTHCARE

Include access to hospitals, specialists, medical appointments, dental, vision and maternal care



STRATEGIES

Increase access to dental and medical services and raise awareness of social services throughout Trumbull and Mahoning Counties.

Increase physician services throughout Trumbull and Mahoning Counties.

PARTNERS

Mercy Health, Goodwill, Community Foundation of Mahoning Valley, Assembly for Workforce Solutions Transportation Subcommittee, Dental Society, Northeast Ohio University Medicine, Medical Association, Trumbull Combined Health District

Medical Association (Dr.Reed), Northeast Ohio Medical University, Trumbull Combined Health District

PRIORITY POPULATIONS

Older adults, lower income individuals, individuals without insurance or barriers, families navigating multiple care systems

Elderly population and families living under the poverty line, uninsured individuals or families



DESIRED OUTCOMES OF STRATEGIES

 Delayed care
  Increase access and utilization of non-emergency healthcare services and existing healthcare resources
  Education and access to healthcare resources



OVERALL IMPACT OF STRATEGIES

 Access to primary care
  Quality of life
  Physical health
  Chronic disease
  Unmet care needs
  Premature mortality



**ALL MTCHP SERVICE AREA RESIDENTS ACHIEVE
THEIR FULL HEALTH POTENTIAL**

#2 Priority Area: COMMUNITY SAFETY



Includes awareness of and access to community resources, housing, and transportation

STRATEGIES

Increase the scale of home repair services and create low interest housing fund for housing development.

Increase student, caregiver and educator awareness of youth programming available in Mahoning and Trumbull Counties.

Law enforcement investment in community-based reduction strategies.

PARTNERS

Youngstown Neighborhood Development Corporation, Mercy Health Foundation, Mahoning Trumbull County Land banks, County Commissioners, Nonprofit Housing Developers, Trumbull Combined Health District

Mahoning and Trumbull Public Schools, Educational Service Center, Libraries, City of Warren, and City of Youngstown, Trumbull Combined Health District

Lead Abatement Mahoning, Healthy Community Partnership, City of Youngstown and Warren, Youngstown Neighborhood Development Corporation, Youngstown State University (John Bralich), Trumbull Combined Health District

PRIORITY POPULATIONS

Low to moderate income homeowners, homeowners and renters earning 120% or less of the Area Median Income

School aged youth ages 5-12

All populations



DESIRED OUTCOMES OF STRATEGIES



Youth education and awareness



Unsafe homes



Housing opportunities



OVERALL IMPACT OF STRATEGIES



Student success



Quality of life



Community trust



Homelessness



Premature mortality



**ALL MTCHP SERVICE AREA RESIDENTS ACHIEVE
THEIR FULL HEALTH POTENTIAL**

#3 Priority Area: BEHAVIORAL HEALTH

Includes substance misuse and mental health



STRATEGIES

Increase education, marketing, and advocacy for stigma, resource availability, and employee recruitment.

Increase suicide prevention trainings in the community (QPR, Sources of Strength).

Begin offering Teen Mental First Aid Training for grades 9-12 or ages 14-18.

PARTNERS

Mahoning and Trumbull County Mental Health and Recovery Boards (Brenda Heidinger), Mahoning County Public Health, Farm Bureau, Healthy Community Partnership, Trumbull Combined Health District

Mahoning and Trumbull County Mental Health and Recovery Boards (Brenda Heidinger), Healthy Community Partnership, Educational Service Centers, Alta Behavioral Health, Trumbull Combined Health District

Mahoning and Trumbull County Mental Health and Recovery Boards (Brenda Heidinger), Healthy Community Partnership, Educational Service Centers, ESC, Alta Behavioral Health, Trumbull Combined Health District

PRIORITY POPULATIONS

Rural/farmers, Middle-aged males, Postpartum moms, Youth, General population

Youth, Youth educators

Youth ages 14-18



DESIRED OUTCOMES OF STRATEGIES

↑ Education and awareness on mental health

↓ Mental health stigma

↑ Access to mental health and substance abuse care



OVERALL IMPACT OF STRATEGIES

↑ Mental Health

↑ Quality of life

↓ Substance abuse

↓ Mental health and substance abuse ER visits

↓ Overdose deaths

↓ Death by suicide



**ALL MTCHP SERVICE AREA RESIDENTS ACHIEVE
THEIR FULL HEALTH POTENTIAL**

#4 Priority Area: CHRONIC DISEASE

Includes food insecurity, obesity, physical activity, prevention and risk factors



STRATEGIES

Enhancement of open spaces/parks for the benefit of local ecology to improve human health and provide safe places for active recreation.

Increase support for improving traffic, active transportation safety (walking & biking), and school transportation safety.

Expand Asthma Math program to include Mahoning and Trumbull Counties and pass Asthma triggers Legislation.

Expand neighborhood food access efforts and increase number of locations offering nutritious food.

PARTNERS

Healthy Community Partnership, Mahoning Valley Tree Corps, Mahoning Valley Outside 365, Mercy Health Stepping Out, Youngstown State University, Trumbull Combined Health District, Trumbull Neighborhood Partnership

Healthy Community Partnership, Western Reserve Transit Authority, Youngstown State University, Thrive Mahoning Valley Safe Streets, Safe Routes to School, Eastgate Regional Council of Governments, Youngstown Neighborhood Development Corporation, Trumbull Combined Health District

Healthy Homes/Healthy Families, Mahoning County Public Health, Trumbull County Combined Health District, Akron Children's Hospital, Trumbull Combined Health District

Healthy Community Partnership, Glenwood Fresh Market, OSU Diabetes Education, OSU Extension Office, Produce Perks Midwest, Mercy Health, Plant it YOU, Akron Children's, Youngstown State University, Trumbull Combined Health District

PRIORITY POPULATIONS

Adults, Children, Low to moderate income, Persons with disabilities, Older adults, Those without transportation

Adults, Children, Low to moderate income blocks, Persons with disabilities, Older adults, Those without transportation

All populations/ individuals with Asthma diagnosis

Residents in Zip codes with High Social Vulnerability Index, Mahoning and Trumbull County Residents, Youngstown State Students



DESIRED OUTCOMES OF STRATEGIES

↑ Education on chronic diseases & risk factors

↓ Chronic disease prevention through screening and management

↓ Sedentary youth & adults



OVERALL IMPACT OF STRATEGIES

↑ Access to primary care

↑ Quality of life

↑ Physical health

↓ Overweight and obesity

↓ Premature mortality

↓ Chronic disease



**ALL MTCHP SERVICE AREA RESIDENTS ACHIEVE
THEIR FULL HEALTH POTENTIAL**

#5 Priority Area: MATERNAL, INFANT, AND CHILD HEALTH



Includes pre- and postnatal care, child passenger safety, vaccinations and safe sleep

STRATEGIES

Research what community resources are available in Mahoning and Trumbull County and educate the community on the resources.

Research best practices to incentivize/recognize/align physicians' offices to work with community stakeholders.

PARTNERS

Mercy Health, Resource Mothers, Mahoning Valley Pathways HUB (Cathy H.), Maternal Infant Vitality Initiative, and My Baby's First Coalition

Mercy Health, Resource Mothers, Mahoning Valley Pathways HUB (Cathy H.), and Maternal Infant Vitality Initiative

PRIORITY POPULATIONS

Community Partners, Faith Organizations, WIC, Local Schools, Trumbull Combined Health District

Women/teens of childbearing age and Trumbull Combined Health District



DESIRED OUTCOMES OF STRATEGIES

↑ Access to primary care, screenings, checkups

↓ Decrease child injury and fatalities

↑ Access to pre- and post-natal care



OVERALL IMPACT OF STRATEGIES

↑ Health status

↑ Quality of life

↓ Unmet care needs

↓ Low-birth weight pre-term birth

↓ Maternal mortality and morbidity

↓ Infant mortality



**ALL MTCHP SERVICE AREA RESIDENTS ACHIEVE
THEIR FULL HEALTH POTENTIAL**

CURRENT RESOURCES

ADDRESSING PRIORITY HEALTH NEEDS

MAHONING AND TRUMBULL COUNTY



Information was gathered on assets and resources that currently exist in the community. This was done using feedback from the community and an overall assessment of the service area. While this list strives to be comprehensive, it may not be complete.

Access to Healthcare

Akron Children's Hospital
 Midlothian Free Clinic
 Mahoning County Mental Health and Recovery Board
 Mercy Health Youngstown
 Meridian Healthcare
 Trumbull County Mental Health and Recovery Board
 Mahoning County Public Health
 Trumbull County Combined Health District
 Warren City Health District
 Youngstown City Health District
 The Ohio Farm Bureau
 Community Foundation of the Mahoning Valley
 Youngstown State University
 Youngstown Foundation
 Mahoning Youngstown Community Action Partnership
 Auglaize County

Adverse Childhood Experiences (ACEs)

Mahoning County Mental Health and Recovery Board
 Mahoning County Public Health
 Trumbull County Combined Health District
 Warren City Health District
 Youngstown City Health District
 Mahoning County Job and Family Services
 Youngstown City Schools

Crime & Violence

Youngstown Police Department
 Mahoning County Sheriff's Department

Chronic Diseases

Midlothian Free Clinic
 Mercy Health Youngstown
 Mahoning County Public Health
 Trumbull County Combined Health District
 Warren City Health District
 Youngstown City Health District
 Community Foundation of the Mahoning Valley
 Youngstown Foundation

Disability Services

Board of Developmental Disabilities (Mahoning County)
 Youngstown Foundation

Education

Mahoning County Public Health
 Trumbull County Combined Health District
 Warren City Health District
 Youngstown City Health District
 Ohio State University Extension
 Youngstown City Schools
 The Public Library of Youngstown and Mahoning County
 Youngstown State University
 Mahoning Youngstown Community Action Partnership
 Wean Foundation

Environmental Services

Mahoning County Public Health
 Trumbull County Combined Health District
 Warren City Health District
 Youngstown City Health District
 Eastgate Regional Council of Governments
 Youngstown Parks and Recreation Department

Food Insecurity

Catholic Charities Regional Agency
 Mahoning County Public Health
 Trumbull County Combined Health District
 Warren City Health District
 Youngstown City Health District
 Mahoning County Job and Family Services
 Youngstown City Schools
 Warren Family Mission
 Community Foundation of the Mahoning Valley
 Second Harvest Food Bank of the Mahoning Valley
 The Sacred Commons Church
 Youngstown State University

Housing, Poverty, & Employment

Youngstown Neighborhood Development Corporation
 Mahoning County Job and Family Services
 Warren Family Mission
 Community Foundation of the Mahoning Valley
 Wean Foundation
 Mahoning Youngstown Community Action Partnership
 The Sacred Commons Church

Injuries

Rescue Mission of Mahoning Valley
 Mahoning County Public Health
 Trumbull County Combined Health District
 Warren City Health District
 Youngstown City Health District

Internet & Wi-Fi Access

Spectrum
 Oakhill Collaborative
 The Public Library of Youngstown and Mahoning County

STEPS 6-8

DEVELOP, ADOPT, AND UPDATE COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)



IN THIS STEP, MAHONING TRUMBULL COMMUNITY HEALTH PARTNERS WILL:

- DEVELOP & INTEGRATE CHIP WITH COMMUNITY PARTNER AND HEALTH DEPARTMENT PLANS
- ADOPT THE CHIP
- UPDATE AND SUSTAIN THE CHIP

MAHONING TRUMBULL COMMUNITY HEALTH PARTNERS

NEXT STEPS

The Community Health Assessment (CHA) and the resulting Community Health Improvement Plan (CHIP) identify and address significant community health needs. This CHIP explains how Mahoning Trumbull Community Health Partners (MTCHP) plans to address the selected priority health needs identified by the CHA.

This Community Health Improvement Plan (CHIP) report was adopted by MTCHP leadership in October 2025. The CHIP can be viewed on the websites listed below, and written comments on this report are welcomed and can be made by emailing the listed email addresses:

Mahoning County Public Health:

Website: <https://www.mahoninghealth.org/community-health-assessment-and-planning/>

Contact: RTekac@mahoninghealth.org

Trumbull County Combined Health District:

Website: www.tcchd.org

Contact: dbonack@co.trumbull.oh.us

Warren City Health Department:

Website: https://warren.org/health_department/index.php

Contact: clinic@warren.org or jmay@warren.org

Youngstown City Health District:

Website: www.youngstownohio.gov

Contact: ebishop@YoungstownOhio.gov

EVALUATION OF IMPACT

MTCHP will monitor and evaluate the programs and actions outlined above. We anticipate the actions taken to address significant health needs will improve health knowledge, behaviors, and status, increase access to care, and overall help support good health. MTCHP is committed to monitoring key indicators to assess impact. Our reporting process includes the collection and documentation of tracking measures, such as the number of people reached/served and collaborative efforts to address health needs. A review of the impact of MTCHP's actions to address these significant health needs will be reported in the next scheduled CHA.

ADDITIONAL HEALTH NEEDS NOT DIRECTLY ADDRESSED

Since MTCHP cannot directly address all the health needs present in the community, we will concentrate our resources on those health needs where we can effectively impact our region, given our areas of focus and expertise. Taking existing organization and community resources into consideration, MTCHP will not directly address the remaining health needs identified in the CHA, including but not limited to income/poverty and employment, adverse childhood experiences, internet/Wi-Fi access, injuries, tobacco and nicotine use, access to childcare, education, and HIV/AIDS and STIs. We will continue to look for opportunities to address community needs where we can make a meaningful contribution. Community partnerships may support other initiatives that MTCHP cannot independently lead in order to address the other health needs identified in the 2025 CHA.

APPENDIX A **PUBLIC HEALTH ACCREDITATION BOARD (PHAB) CHECKLIST: IMPROVEMENT PLAN (CHIP)**



MEETING THE PHAB REQUIREMENTS FOR THE CHIP

The PHAB Standards & Measures serve as the official guidance for PHAB national public health department accreditation and include requirements for the completion of Community Health Assessments (CHAs) and CHIPs for local health departments. The following page demonstrates how this CHIP meets the PHAB requirements.

APPENDIX A: PHAB COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP) REQUIREMENTS CHECKLIST

PUBLIC HEALTH ACCREDITATION BOARD (PHAB) REQUIREMENTS FOR CHIPs			
YES	PAGE #	PHAB REQUIREMENTS CHECKLIST	NOTES/ RECOMMENDATIONS
✓	4	<p>MEASURE 5.2.1 A: Engage partners and members of the community in a community health improvement process.</p> <p>1. A collaborative process for developing the community health improvement plan (CHIP), which includes:</p> <ul style="list-style-type: none"> a. A list of participating partners involved in the CHIP process. Participation must include: i. At least 2 organizations representing sectors other than public health. ii. At least 2 community members or organizations that represent populations that are disproportionately affected by conditions that contribute to health risks or poorer health outcomes. 	
✓	7-17	<ul style="list-style-type: none"> b. Review of information from the community health assessment. 	
✓	7-24	<ul style="list-style-type: none"> c. Review of the causes of disproportionate health risks or health outcomes of specific populations. 	
✓	12-17	<ul style="list-style-type: none"> d. Process used by participants to select priorities. <p>The CHIP process must address the jurisdiction as described in the description of Standard 5.2.</p>	
✓	18-23	<p>MEASURE 5.2.2 A: Adopt a community health improvement plan.</p> <p>1. A community health improvement plan (CHIP), which includes all of the following:</p> <ul style="list-style-type: none"> a. At least two health priorities. 	<p>A detailed work plan (living document) has been developed that included strategies, SMART objectives, annual activities, indicators, partners, and priority populations.</p>
✓	18-23	<ul style="list-style-type: none"> b. Measurable objective(s) for each priority. 	
✓	18-23	<ul style="list-style-type: none"> c. Improvement strategy(ies) or activity(ies) for each priority. i. Each activity or strategy must include a timeframe and a designation of organizations or individuals that have accepted responsibility for implementing it. ii. At least two of the strategies or activities must include a policy recommendation, one of which must be aimed at alleviating causes of health inequities. 	
✓	24	<ul style="list-style-type: none"> d. Identification of the assets or resources that will be used to address at least one of the specific priority areas. 	
✓	26	<ul style="list-style-type: none"> e. Description of the process used to track the status of the effort or results of the actions taken to implement CHIP strategies or activities. <p>The CHIP must address the jurisdiction as described in the description of Standard 5.2.</p>	

APPENDIX B
REFERENCES

APPENDIX B

REFERENCES

¹U.S. Census Bureau. (2024). Census Quick Facts. Retrieved from <https://www.census.gov/quickfacts/>

²Ohio Department of Health, 2021. Ohio BRFSS Annual Report. <https://odh.ohio.gov/know-our-programs/behavioral-risk-factor-surveillance-system/data-and-publications>

³Ohio Department of Jobs & Family Services, Child Abuse and Neglect Referrals and Outcomes Dashboard. (2023).

[Htpps://Data.Jfs.Ohio.Gov/Dashboards/Foster-Care-AndAdult-Protective-Services/Child-Abuse-And-NeglectReferrals-And-Outcomes](https://Data.Jfs.Ohio.Gov/Dashboards/Foster-Care-AndAdult-Protective-Services/Child-Abuse-And-NeglectReferrals-And-Outcomes)

⁴Board Mahoning County Report, 2022-2023.

<https://youthsurveys.ohio.gov/reports-and-insights/ohyes-reports/01-ohyes-reports>

⁵Ohio Department of Health, 2022. Ohio BRFSS Annual Report.

<https://odh.ohio.gov/know-our-programs/behavioral-risk-factor-surveillance-system/data-and-publications>

⁶County Health Rankings, 2025,

<http://www.countyhealthrankings.org>



www.moxleypublichealth.com
stephanie@moxleypublichealth.com