

PARKVIEW

COMMUNITY HEALTH IMPROVEMENT



2026 Implementation Strategy Parkview Wabash Hospital



PARKVIEW
HEALTH

Table of Contents

About This Report.....	1
Parkview Health.....	2
Community Served.....	2
2025 CHNA Prioritization and Methodology.....	3
Prioritization Process.....	4
Implementation Strategy Process.....	5
Mental Health and Substance Use.....	6
Cancers.....	8
Chronic Disease.....	9
Affordable and Healthy Food.....	12
Identified Needs Not Addressed.....	13
Board Approval.....	14

About This Report

To grow and ensure the continued quality of Parkview Health's commitment to improving the health of our community, each of our licensed hospitals prepares a Community Health Needs Assessment (CHNA) and subsequent implementation strategy on a triennial basis. Using the knowledge gained from the 2025 CHNA results, this report will define Parkview Wabash Hospital's community health implementation strategy for the 2025–28 assessment cycle as federally required by the Affordable Care Act. In doing so, this report will accomplish the following:

- Define the community we serve
- Summarize the 2025 CHNA and implementation strategy processes
- Summarize how top health needs were prioritized
- Describe how the hospital is addressing these community needs
- Describe unmet needs that were identified by 2025 CHNA

IRS Mandate

The contents of this report were formed in compliance with the requirements of Internal Revenue Code 501(r)(3)(A) set forth by the Internal Revenue Service for tax-exempt health systems and hospitals, defined within the Patient Protection and Affordable Care Act.

About Parkview Health

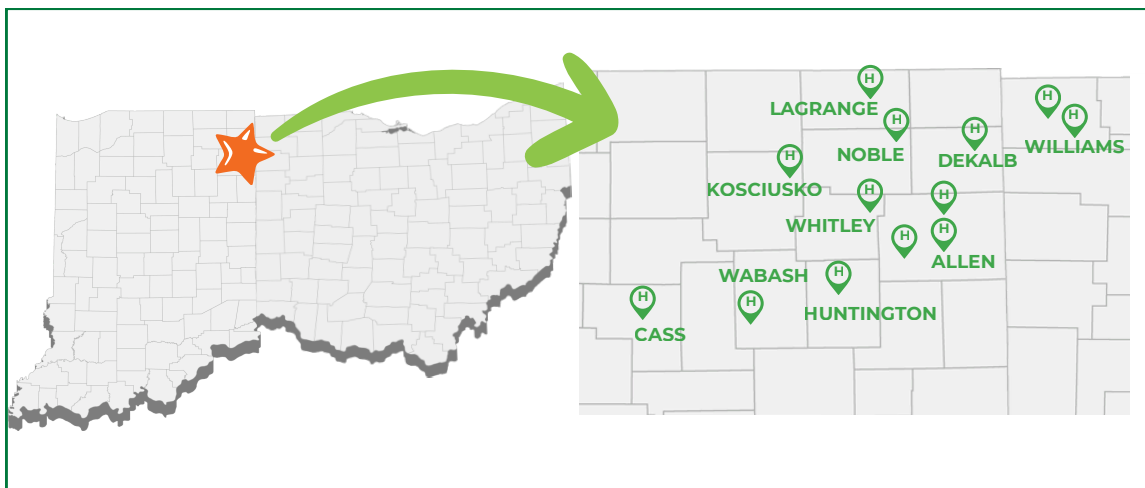
Parkview is a not-for-profit, community-based health system. It serves a population of more than 1.3 million in Indiana and northwest Ohio. With more than 17,500 employees, Parkview is the region's largest employer. Parkview started as Fort Wayne City Hospital and has been serving the community since 1878. Parkview Health formed in 1995, and the heritage of care and compassion continues today with 15 hospitals and over 300 outpatient centers and physician offices.

Parkview has a mission to improve health and inspire well-being in the communities we serve.

Community Served

For the purposes of this implementation strategy, the Parkview Health service area consists of the counties where a full-service Parkview hospital is located. This includes Allen, Cass, DeKalb, Huntington, Kosciusko, LaGrange, Noble, Wabash, and Whitley Counties in Indiana and Williams County in Ohio. Within this broader service area, the "Community Served" for this implementation strategy is defined specifically as Wabash County, Indiana.

Wabash County, home to Parkview Wabash Hospital, serves a population of 30,901 residents, according to the 2025 Parkview Wabash Hospital CHNA. The county's median household income is approximately \$68,414, with 10.8 percent of households living below the federal poverty level. Additionally, 6.8 percent of residents are uninsured. More detailed demographic and health data for each county within the Parkview Health service area is available on the [Community Data Hub](#).



2025 CHNA Process and Methodology

The CHNA is conducted every three years to identify and address the most pressing health needs in the Parkview Health service area. The 2025 CHNA was led by Parkview Health and the Health Services and Informatics Research (HSIR) team at Parkview’s Mirro Center for Research and Innovation. By using various data sources, we identified the top health needs in the community. We compared needs at the county level with those of the Parkview Health service area and the entire state. Findings were shared with the community and hospital partners to determine which health needs were most pressing.

Primary Data

Primary data for the 2025 CHNA was gathered by using surveys and focus groups. Surveys were conducted between September 2024 and December 2024, engaging 5,030 residents and 960 key informants through online and paper formats in five languages. These surveys assessed demographics, health concerns, healthcare access, mental health, and digital access. Focus groups were held from March 2025 to May 2025, with 34 sessions across the service area, each involving 5 to 15 participants from diverse backgrounds. These discussions explored health needs, barriers, and available resources.

Secondary Data

The Metopio platform was instrumental in gathering data from multiple sources, which, when combined with survey and focus group findings, provided a comprehensive view of each community’s health landscape. This secondary data offered valuable insights into health behaviors, outcomes, and social factors, using the most recent five-year averages or single-year data. Once all data was analyzed, the findings were shared with community and hospital partners, leading to the identification of priority health needs for 2025–28. The overall process focused on understanding community needs, prioritizing the most pressing issues, and identifying available resources and gaps to guide strategic planning and improve health outcomes.

Top Five Identified Health Needs

Wabash County’s Top Five Health Concerns

- Cancers
- Diabetes
- Heart Disease and Stroke
- Mental Health and Mental Disorders
- Substance Use Disorders



Prioritization Process

Prioritization Overview

After gathering and analyzing the data, the HSIR team used a structured process to pinpoint the community's most urgent health needs. This process was meant to be inclusive and data driven, ensuring that the chosen priorities represented both community members' experiences and health trends. The process involved meetings with community stakeholders and final selection of top health needs by hospital leaders.

Community Prioritization Sessions

- Sessions were carried out between March 2025 and May 2025 for each hospital.
- Attendees were professionals who provide a wide range of services to community members from diverse backgrounds.
- Ahead of the meeting, attendees were sent a printed scorecard with the top health needs identified for their county and related data.
- A presentation at the meeting covered data trends on the top health needs.
- Attendees participated in a discussion with a focus on benefits and challenges to addressing the health needs.
- Attendees voted to rank the top health needs based on significance, severity, relation to social drivers of health, and suitability for intervention.

Selected Health Priorities

The list of top health needs from each session was shared with hospital leadership in June 2025. With consideration given to resources, prevalence of the health need, and suitability to address the health need, hospital leaders reached consensus on the final following top health priorities:

Selected Priorities for Parkview Health–Wabash County

- Cancer
- Chronic Disease
- Mental Health and Substance Use



Implementation Strategy Process

In addressing each prioritized health issue identified, Parkview Wabash Hospital created the following implementation strategy to define how the hospital intends to address each top health need, in addition to our ongoing commitment to improving access to care. This collaborative planning process includes senior leadership, the hospital board, Community Health Improvement staff, program leads, community nurses, community health workers, and partner organizations working alongside the results of the 2025 CHNA. Through this process, we work diligently to align the top health needs of our community with hospital resources and capabilities to create our implementation strategy in compliance with the requirements set by the Internal Revenue Service for tax-exempt health systems and hospitals.

Parkview Wabash Hospital's board, made up of hospital leadership and community stakeholders, reviewed and adopted the implementation strategy on May 12, 2026.

2026 Implementation Strategy

This section will report the strategies and program initiatives the hospital will implement, fund, or pursue in collaboration with community partners to address priority health needs over the next three years.

All planned activities align with the hospital’s mission, priorities, and operational capacity. The plan is intended to be flexible and may be revised as circumstances evolve, including changes in community needs or available resources.

Mental Health and Substance Use

Program/Initiative: IRIS Family Support Services–Child Safety Matters

Goal: Our goal is to empower Wabash County students to keep themselves and those around them safe, leading to increased mental health outcomes.

Objectives

- Provide sessions of this evidence-based curriculum and work with school counselors to ensure that both our staff and the school counselors are ready to support students in processing their experiences or accessing resources based on the knowledge gained during these trainings.
- Offer training for educators to understand their responsibilities of child safety and mandates to prevent child abuse and neglect in Indiana.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • 90 percent of youth who participate in full sessions will understand body safety, recognize potential abusive or exploitative behaviors, and advocate for their safety as evidenced through pre- and post-tests • 100 percent of youth and families identified as “at-risk” for abuse/neglect/exploitation will receive referrals to prevention services as evidenced through program tracking measures • 90 percent of parents who participate in full sessions will recognize indicators of child abuse/neglect and grooming behaviors and know how to protect and advocate for their child’s safety, as evidenced through pre- and post-tests 	<ul style="list-style-type: none"> • Provide evidence-based trainings and maintain fidelity • Educate on body safety, indicators of abuse and neglect, cyber safety, bullying, gun safety, and other vital topics for today’s youth; these presentations will be offered free of charge • Distribute bookmarks and handouts to increase recall of core training topics 	<ul style="list-style-type: none"> • Students learn about core safety principles in a way that is easily retained and actionable • The community sees a reduction in child abuse and neglect, leading to an overall decrease in trauma and mental health crisis moments, creating generational change of healthy families 	<ul style="list-style-type: none"> • School systems • School principals, teachers, and counselors • Students • Parkview Wabash Hospital • Community Foundation of Wabash County

Mental Health and Substance Use

Program/Initiative: Youth for Christ–Campus Life Mentorship Outreach

Goal: To Improve teens’ mental, spiritual, and social well-being through membership, small groups, and community engagement.

Objectives:

- Connect with at least 500 teens on a first-time basis through outreach activities and events.
- Establish ongoing, consistent mentoring relationships with at least 350 teens through deeper conversational engagement and small group participation.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • Number of first-time teen connections • Number of ongoing mentor relationships • Attendance at small groups/events • Self-reported well-being surveys 	<ul style="list-style-type: none"> • Weekly small group meetings • One-on-one mentorship conversations • School-based outreach events • Community service projects • Leadership development opportunities • Safe, structured after-school engagement activities 	<ul style="list-style-type: none"> • Increased sense of belonging and connectedness • Improved emotional resilience • Decreased feelings of isolation • Strengthen coping and communication skills • Increased positive adult relationships • Connection to mental health resources 	<ul style="list-style-type: none"> • Local middle/high schools • Youth-serving organizations • Faith-based organizations • Community mental health providers • Parents/guardians • Volunteers and trained mentors

Cancer

Program/Initiative: Cancer Services of Northeast Indiana–Client Advocate Program for Wabash County

Goal: The Client Advocate Program is run by Cancer Services of Northeast Indiana with a goal to increase access to healthcare, improve financial stability for at-risk families, and provide mental health and wellness opportunities for local families devastated by cancer.

Objectives

- Clients—particularly low-income, at-risk, and vulnerable individuals—will access financial and transportation assistance, along with advocacy support, to reduce barriers to healthcare services.
- Clients will also receive affordable mental health counseling and emotional support to develop coping strategies that strengthen mental well-being and reduce stress.
- Clients will participate in wellness and educational programs, such as nutrition workshops and exercise classes, to build the knowledge and skills needed to manage chronic conditions and lead healthier lives.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • Number of clients served and number of client advocate service interactions • Healthcare supplies distributed and durable medical equipment loans • Financial assistance and transportation assistance provided • Participation in wellness activity or educational opportunities and Mental health counseling sessions provided 	<ul style="list-style-type: none"> • Each client is connected to a client advocate who assesses the clients' support needs and ensures the client has a mental health screening • Client advocate helps client access practical services such as supplies, financial assistance, or transportation aid to increase access to health care • Client advocate connects client to mental health support services and mental health counseling 	<ul style="list-style-type: none"> • Increased access to mental health support and services • Increased access to healthcare • At risk clients will have access to health affordable mental health counseling • An Increased number of vulnerable people will be able to access care services 	<ul style="list-style-type: none"> • Program staff, therapist, and client advocates • The medical community and other mental healthcare providers

Chronic Disease

Program/Initiative: Living Well–Wabash County Transit

Goal: Allow fares to remain affordable for 100 percent of current riders over the next 12 months and meet the needs of 85 percent or more of those who need transportation in Wabash County.

Objective: Hire additional drivers, reduce number of trip denials, and restore service to five days a week, Monday through Friday.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • Number of trip denials • Number of riders • New drivers hired 	<ul style="list-style-type: none"> • Retain current drivers • Prevent driver burnout • Increased starting hourly wage for drivers from \$12 to \$15/hour • Advertise for drivers on radio, social media, and pizza boxes • Expand applicant pool by lowering driver age requirement and allowing for seasonal drivers 	<ul style="list-style-type: none"> • Increase total number of rides provided • Restore ride days to Monday through Friday • Increase access to medical appointments • Improve predictability of service 	<ul style="list-style-type: none"> • Council on Aging • Wabash County Commissioners • Transportation Action Coalition • Parkview Wabash Hospital

Program/Initiative: Wabash County Youth Tobacco Prevention

Goal: To reduce the percentage of youth initiating any form of tobacco use by 20 percent within five years and decrease their risk of developing serious tobacco-related diseases, including cancer and heart disease, through targeted prevention efforts.

Objectives

- Mobilize staff and volunteers to do everything possible to keep youth tobacco-free.
- Prevent nicotine addiction.
- Counteract tobacco industry deception through education and community engagement.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • Youth tobacco uses frequency, initiation rates, frequency, and intensity of use measured by students referred to the tobacco awareness class • Exposure to tobacco marketing • Awareness, and attitudes about tobacco • Quit attempts • Cessation rates 	<ul style="list-style-type: none"> • Prevention assemblies for second- and fifth-grade classes to inform what they can do to lessen the chance of getting cancer • Classes for those who use any tobacco product to tell what can happen if continue to use tobacco • Provide resources/help to quit and become free from the addiction of nicotine 	<ul style="list-style-type: none"> • Fewer youth start using tobacco and more quit to enter adulthood with a healthy lifestyle and cancer-free • Youth become advocates to their peers • Youth are more alert and healthier due to not experiencing the tobacco effects to the body 	<ul style="list-style-type: none"> • Parkview Wabash Hospital • Bowen Health • United Fund • Wabash City Schools • Manchester Community Schools • MSD Wabash • AACTION LCC

Chronic Disease

Program/Initiative: YMCA Memberships

Goal: Improve fitness levels and overall health of Wabash County residents.

Objective: Cover 90 percent of the membership fees for qualified individuals, thereby removing the financial barrier of a membership.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • Number of new members who qualify for the program • Number of visits • Before and after In-Body Analysis 	<ul style="list-style-type: none"> • Monthly communications • Group classes • Individual challenges (eg Walk Across America, Million Pound Challenge, etc.) • Social media posts • Nonmember email blasts 	<ul style="list-style-type: none"> • Improved fitness level • Improved socialization and sense of community • Lowered weight • Lowered BMI 	<ul style="list-style-type: none"> • Parkview Wabash Hospital • Community donors • Ford Meter Box Foundation

Chronic Disease

Program/Initiative: VeggieRx

Goal: Improve access and provide education to members of Wabash County who are experiencing food insecurity and are managing a diet-related chronic condition.

Objective: Provide eligible patients who struggle with food insecurity, among other social determinants of health, the opportunity to receive financial and educational assistance to improve clinical outcomes and encourage lifelong sustainable change through improvement in diet and lifestyle.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • Number of community members experiencing food insecurity • Number of eligible patients identified in Wabash County PPG locations • Voucher redemption rate • Number of patients expressing the need for assistance to PPG provider • The amount of active engagement from participants in program • Decreased patient-reported low consumption of fresh produce • Clinical indicator of high levels of A1c, blood pressure, BMI, heart disease diagnoses, and number of at-risk pregnancies in the community • Number of community members on government food assistance programs 	<ul style="list-style-type: none"> • Partner with local farmers markets and produce growers to increase access • Screen patients for food insecurity using the Hunger Vital signs screening tool • Provide VeggieRx to patients who can benefit • Provide dietitian-led nutrition education • Work with local food banks to provide resources to patients who might need them 	<ul style="list-style-type: none"> • Decrease in food insecurity • Increased consumption of both fruits and vegetables • Decrease in hospitalizations, readmissions, and ED visits • Decrease in healthcare utilization costs. • Decrease in hemoglobin A1c, BMI, blood pressure values, and heart disease • Improved management of diet-related chronic conditions • Long-term changes in poor lifestyle habits • Local economic impact 	<ul style="list-style-type: none"> • Wabash County PPG clinical providers • Patient encounter locations (Medsurg, Lab, LifeBridge, ED) • Parkview Registered Dietitians • Nutrition Services • Community Health Improvement Leaders • Local grocery stores, produce stands and farms, and farmers markets • Community food pantries • Wabash Public Library • Local food security coalitions • Community outreach programs (Health Department) • Bowen Health and American Health network • Lighthouse Mission

Affordable and Healthy Food

While affordable and healthy food was not selected as a top three priority for Parkview Wabash Hospital, Wabash County will continue to incorporate this priority into its strategy.

Program/Initiative: Bash Bags Weekend Food

Goal: Provide food to students grades pre-K through six who are on free and reduced lunches. It is offered each weekend during the academic school year to reduce food insecurity in our community.

Objective: Ensure consistent food delivery to 100 percent of students on free and reduced lunches who opt into the program and achieve 95 percent or higher satisfaction rate of our program from school personnel.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • Food delivery is measured weekly • Program satisfaction is measured yearly 	<ul style="list-style-type: none"> • Weekly packings • Communicate schedules in advance to insure teams will be there to pack • Committee identifies resources should a packing group be unable to fulfill a commitment to pack • Backup drivers are identified to assist in event primary driver cannot make a delivery • Volunteer coordinators maintain these schedules • Surveys are administered annually in the spring through counselors • Anonymous survey of families via a paper survey in the bags near the end of the year that can be returned to the teachers • Facebook fundraisers to cover utility and tote expenses 	<ul style="list-style-type: none"> • Increase community engagement and understanding of food insecurity to ensure a sustainable program supporting Wabash County children • Increase access to food for students experiencing food insecurity by providing weekend meals each week • Children receive consistent weekend nourishment, which reduces hunger-related stress and anxiety • Raising awareness builds empathy and engagement, encouraging more volunteers and donors 	<ul style="list-style-type: none"> • Wabash City Schools, Metropolitan School District of Wabash County • Emmanuel Christian School and St. Bernard Elementary school guidance counselors and teachers • Wabash County families • Trinity Lutheran Church

Identified Health Needs Not Addressed

While prioritizing the hospital's top three health concerns with internal and external stakeholders, we consider the data, health-needs significance, severity, our capacity to impact, suitability, resources available, and health disparity related to social determinants of health. Parkview Wabash Hospital is addressing all identified health needs.

For More Information

Parkview would like to extend gratitude toward its community partners for their collaboration with the 2025 CHNA and 2026 implementation strategy process that addresses the health needs of Wabash County. For additional information about Parkview Wabash Hospital's 2025 CHNA or 2026 Implementation Plan, please contact us at community.health@parkview.com.

Board Approval

Approved by Parkview Wabash Hospital's Board of Directors on
May 12, 2026