



PARKVIEW

COMMUNITY HEALTH IMPROVEMENT



2026 Implementation Strategy

Park Center



PARKVIEW
HEALTH

Table of Contents

About This Report.....	1
Parkview Health.....	2
Community Served.....	2
2025 CHNA Process and Methodology.....	3
Prioritization Process.....	4
Implementation Strategy Process.....	5
Access to Mental Health and Addiction Services.....	6
Mental Health and Substance Use.....	8
Identified Needs Not Addressed.....	10
Board Approval.....	11

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 Park Center'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.

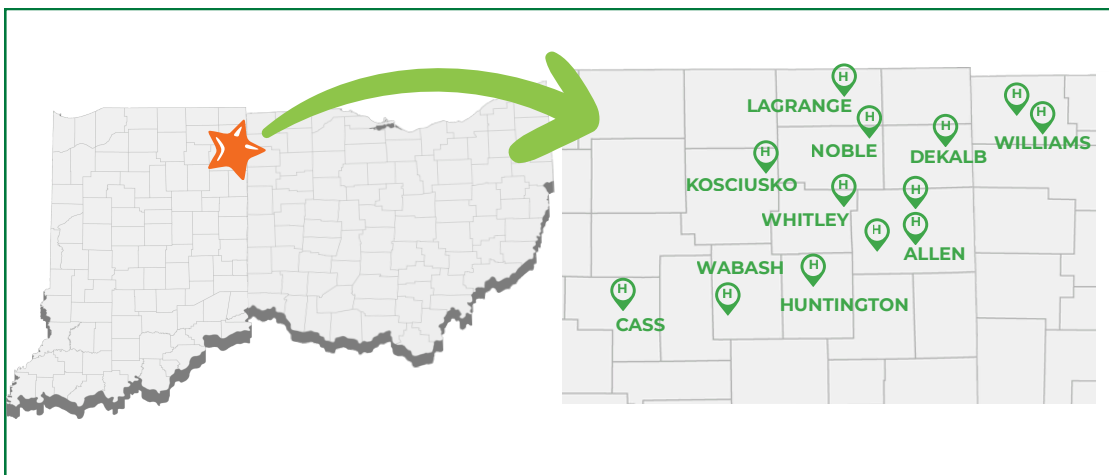
Parkview has a mission to improve health and inspire well-being in the communities we serve.

Park Center, an affiliate to Parkview Health, is a private, not-for-profit community mental health center in northeast Indiana. The center offers comprehensive mental health care services designed for all age groups. As a community mental health center, Park Center offers community-based and office-based mental health services focusing on prevention, treatment and rehabilitation.

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 Adams, Allen, Huntington and Wells Counties in Indiana.

Park Center serves a population of 489,804 residents, according to the 2025 Park Center CHNA. The population's median household income is approximately \$68,010, with 11.8 percent of households living below the federal poverty level. Additionally, 9.1 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

Park Center’s Top Five Health Concerns

- Access to Mental Healthcare and Addiction Services
- Housing Affordability
- Insurance for Health Care
- Mental Health and Mental Disorders
- Substance Use Disorders



Prioritization

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 Park Center

- Access to Mental Healthcare and Addiction Services
- Mental Health and Substance Use



Implementation Strategy Process

In addressing each prioritized health issue identified, Park Center 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.

Park Center's board, made up of hospital board members, hospital leadership, and community stakeholders, reviewed and adopted the implementation strategy on April 22, 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.

Access to Mental Healthcare and Addiction Services

Program/Initiative: Reduce Wait Times

Goal: Reduce wait time to access mental health and substance use services.

Objective: Individuals who seek help will receive it at the right time and right place.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> Amount of time (days, hours) between inquiry and service delivery Number of FTEs for therapists Number of students with behavioral health placements 	<ul style="list-style-type: none"> Posted positions to increase the number of therapist FTEs Expanded our Behavioral Health Academy slots in 2026 to increase the number of students who receive placement in behavioral health internships Revamped our access model in December 2025 to increase access to services Implemented a triage model in January 2026 to drive access at the appropriate time 	<ul style="list-style-type: none"> Reduced wait time to services compared to baseline data for first two quarters of 2025, which will allow community partners and patients to consistently have quick access to services Individuals seeking services will be able to access those services quickly, leading to potential reduction of crises and the need for escalation to higher levels of care Both community referral partners and self-referred patients will be able to consistently access initial and clinical services quickly 	<ul style="list-style-type: none"> Human Resources Talent Acquisition PBHI Operational Program Leaders (e.g., Assessment Center, Medication Services, PBH/Park Center Inpatient, Addictions Residential, Crisis Services) DCS Criminal justice Hospitals

Access to Mental Healthcare and Addiction Services

Program/Initiative: Standardize Triage Process

Goal: To create a standardized triage tool

Objective: To ensure that those most in need are given priority access.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • Identification of patients as emergent, urgent, or routine to drive scheduling • In 2027, ensure that triage results match scheduling patterns by measuring the amount of time to intake for each triage level • In 2028, improve matching of scheduling to triage results, if needed 	<ul style="list-style-type: none"> • Creation of a standardized triage tool across all doors to Park Center • Implementation of standardized triage tool in 2026 • Monitor triage results to ensure that they match scheduling patterns in 2027 	<ul style="list-style-type: none"> • Measurement of emergent, urgent, routine patients getting services within appropriate clinical timeframes to allow individuals in need of services to be seen based on level of acuity • This process ensures that those who reach out to us with concerns are addressed in the most appropriate timeframe based on their presenting issue • Patients will be able to access services at the right time based on their level of acuity • This process will also ensure access is fully available as triaging incorrectly could prevent individuals from getting seen in appropriate time frames 	<ul style="list-style-type: none"> • PBHI Helpline • PBHI Access Center • PBHI Front Desk • PBHI Liaisons • PBHI Crisis Services • PBHI Clinical Programs

Mental Health and Substance Use

Program/Initiative: Park Center Outreach and Community Education

Goal: Provide education to the community on managing behavioral health symptoms.

Objective: Introduce healthier ways to cope with individual distress and that of others.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • Number of outreach activities, including community events, blogs, videos, social media posts • Number of community members/individuals reached with online posts 	<ul style="list-style-type: none"> • Creation of a schedule for blog posts, social media posts, videos, etc. • Scheduling times to attend events, conferences, seminars, etc. • Increased presence in the community • Increased use of social media 	<ul style="list-style-type: none"> • We expect to see an increased awareness in the community of service availability and coping skills that can be utilized • Outreach provided at community events and through community-focused online education (e.g., blog posts, social media, recorded videos) will be focused on both mental health and substance-use disorders • Awareness of services available and coping skills can assist in reducing stigma • Creating awareness in the community will allow for better management of behavioral health symptoms 	<ul style="list-style-type: none"> • Youth and Adult Mental Health Taskforce organizations • Media • Marketing • Park Center programs • Fort Wayne sports teams

Mental Health and Substance Use

Program/Initiative: Park Center Crisis Services

Goal: Increase the availability of crisis intervention to the community.

Objective: Assist in managing symptoms related to behavioral health needs through timely crisis intervention.

Indicator	Interventions	Anticipated Impact	Internal/External Partners
<ul style="list-style-type: none"> • Number of mobile crisis runs • Number of crisis stabilization visits • Median response time for mobile crisis runs • Percentage of individuals stabilized without needing a higher level of care or emergency department intervention 	<ul style="list-style-type: none"> • Peer support specialists are certified to support transitions and reduce the likelihood of repeat crises • Strengthen coordination with hospitals, EMS, law enforcement, and other community partners to create clear warm-handoff pathways into behavioral health crisis services • Strengthen integration between crisis services and outpatient behavioral health programs to assist with follow-up care after a crisis 	<ul style="list-style-type: none"> • Reduction in clients utilizing higher levels of care (e.g., ED) for behavioral health concerns that can be resolved in the community • An increase in the availability of crisis services will allow patients to have behavioral health crises addressed promptly before challenges escalate • By offering timely intervention, these services reduce unnecessary hospitalizations and law-enforcement involvement, creating a safer and more responsive system for everyone • Ultimately, crisis services promote stability, improve long-term wellness outcomes, and help build a healthier, more resilient community 	<ul style="list-style-type: none"> • Park Center Clinical departments, specifically the SOS and Crisis Stabilization teams • Law Enforcement • Schools • Other community partner organizations

Identified Health Needs Not Addressed

While prioritizing Park Center'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. Based on these points, we chose to not directly address the following needs identified by our 2025 CHNA:

- Housing Affordability
- Insurance for Health Care

For More Information

Parkview would like to extend gratitude towards its community partners for their collaboration with the 2025 CHNA and 2026 Implementation strategy process that addresses the health needs of Adams, Allen, Huntington, and Wells Counties. For additional information about Park Center's 2025 CHNA or 2026 Implementation Plan, please contact us at community.health@parkview.com.

Board Approval

Approved by the Park Centers Board of Directors on April 22, 2026