



Approved by Great Plains Health
Planning and Strategy Committee

October 25, 2022

Approved by Great Plains Health Board

October 27, 2022

Great Plains Health Community Health Needs Assessment and Implementation Plan
Community Hospital Consulting

2023-2025 Community Health Needs Assessment

Implementation Plan

A comprehensive, six-step community health needs assessment (“CHNA”) was conducted for Great Plains Health by Community Hospital Consulting (CHC Consulting). This CHNA utilizes relevant health data and stakeholder input to identify the significant community health needs in Lincoln County, Nebraska.

The CHNA Team, consisting of leadership from Great Plains Health, met with staff from CHC Consulting in May 2022 to review the research findings and prioritize the community health needs. Five significant community health needs were identified by assessing the prevalence of the issues identified from the health data findings combined with the frequency and severity of mentions in community input.

The CHNA Team participated in a prioritization ballot process using a structured matrix to rank the community health needs based on three characteristics: size and prevalence of the issue, effectiveness of interventions and the hospital’s capacity to address the need. Once this prioritization process was complete, the hospital leadership voted on what needs to address and decided to address all five of the prioritized needs in various capacities through a hospital specific implementation plan.

The five most significant needs, as discussed during the May 31st prioritization meeting, are listed below:

1. Recruit and Retain Quality Healthcare Professionals
2. Increase Access to Mental and Behavioral Health Care
3. Improve Access to Medical and Dental Care
4. Increase Prevention, Education to Reduce the Prevalence of Chronic Diseases, Preventable Conditions, Readmissions and High Mortality Rates
5. Increase Access to Safe and Affordable Housing

Great Plains Health leadership has developed an implementation plan to identify specific activities and services which directly address the identified priorities. The objectives were identified by studying the prioritized health needs, within the context of the hospital’s overall strategic plan and the availability of finite resources. The plan includes a rationale for each priority, followed by strategic objective alignments, specific implementation goals and initiatives, measurement, responsible leaders and annual progress/key results (as appropriate).

The 2022 Community Health Needs Assessment was approved by the Planning and Strategy Committee on October 25, 2022 and the GPHealth Hospital Board on October 27, 2022.

Priority #1: Recruit and Retain Quality Healthcare Professionals

Rationale

Lincoln County has a lower rate of primary care providers per 100,000 population than the state. Lincoln County has a higher rate of preventable hospitalizations than the state.

Interviewees acknowledged and appreciated efforts made by the hospital to increase accessibility to and recruitment of providers in the area. Interviewees discussed the long wait times to see a provider due to healthcare staffing issues and that certain staffing shortages are leading to potential closures of nursing homes and/or assisted living facilities. One interviewee stated: “We are suffering some staffing issues like the rest of country. I tried to get a hematologist appointment and I couldn't get in till June. That call was almost a month ago. They said it was because of staffing and that was for the local hematologist.” Another interviewee stated: “You hear one after another of [assisted nursing facilities and nursing homes] closing or facing closure because they can't recruit people. It's going to put increasing pressure on the North Platte world. That is becoming a real issue and you hear about it all the time. It is becoming a rapidly growing issue.”

Aging providers in the community were brought up as leading to additional staffing issues. One interviewee stated: “We've had a lot of doctors retire. Everyone wants to be an employed physician.” A few interviewees discussed the potential increase in the population and how that could cause an increase in the demand of healthcare services. One interviewee stated: “We're about to have an explosion of growth in North Platte. Along with a huge explosion, all of your other services are going to become strained. For our primary care providers and emergent care, this could cause growing pains. This is going to be a middle class issue. We already have a shortage right now and we haven't started to grow yet.”

Priority #1: Recruit and Retain Quality Healthcare Professionals

Strategic objective alignment:

- 1.) *Ensure access to quality care*
- 3.) *Grow services to exceed our region's needs*
- 4.) *Live our mission, vision and values*
- 5.) *Maintain the independence of healthcare within our region*

| Goals and Initiatives | Measurement | Responsible Leader | Progress/Key Results | | |
|--|---|----------------------------------|----------------------|---------|---------|
| | | | FY 2023 | FY 2024 | FY 2025 |
| 1.1. Actively recruit healthcare professionals to the community | | | | | |
| a. GPHealth will work toward filling the physician needs prioritized in the medical staff needs assessment. | Net three of the listed providers per year. | VP of Physician Services | | | |
| b. GPHealth will continue to participate in physician retention strategies defined in the GPHealth Strategic plan and develop and implement a provider engagement plan. | Physician turnover rate less than the national average. | VP of Physician Services | | | |
| 1.2. Deploy retention strategies to retain providers | | | | | |
| a. GPHealth will continue clinical integration, which strengthens communication among providers and patients, achieves better outcomes, allows for a greater focus on quality initiatives and consistency in best practice, and strategically develops a regional primary care plan. | Service available | GPHIN Executive Director | | | |
| b. GPHealth will deploy strategies to help providers optimize the Epic electronic medical record. | Physician turnover rate less than the national average. | Chief Information Officer | | | |
| c. Continue regular physician rounding. | Reach 100% of medical staff each year. | Chief Executive Officer | | | |
| 1.3. Engage in community development | | | | | |

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| <p>a. GPHealth will continue to place leadership representatives on the North Platte Wellness & Recreation Alliance and the North Platte Recreation Foundation to continue the pursuit of added recreational amenities (a new or remodeled recreation center in North Platte) and enhance wellness opportunities in the community.</p> | <p>At least one executive participating</p> | <p>Chief Development Officer</p> | | | |
| <p>b. GPHealth will continue to place leadership on community development and economic development committees to help build a community conducive to competitive professional recruitment.</p> | <p>At least one executive participating</p> | <p>Chief Executive Officer</p> | | | |
| <p>1.4. Seek to grow and develop professionals with the community</p> | | | | | |
| <p>a. GPHealth will continue its nurse fellowship and preceptor programs.</p> | <p>Programs conducted as curriculum defines</p> | <p>Chief Nursing Officer</p> | | | |
| <p>b. GPHealth will continue to implement a PA residency program through Kansas State University. Students will be accepted starting in 2023.</p> | <p>Program launched by 2023</p> | <p>Senior Director of Human Resources</p> | | | |
| <p>c. GPHealth will continue to expand the RN-to-BSN cohort program in North Platte, a partnership between GPHealth, University of Nebraska Medical Center and MidPlains Community College.</p> | <p>At least three students enrolled each year</p> | <p>Sr. Director of Human Resources</p> | | | |
| <p>d. In conjunction with Southeast Community College and Mid Plains Community College, GPHealth will continue to offer a surgical technician program, with clinic space provided in the GPHealth Education Department.</p> | <p>Program offered</p> | <p>Chief Nursing Officer</p> | | | |
| <p>e. GPHealth will actively engage with local students interested in pursuing medical careers as a means to grow medical staff looking to return "home" to practice.</p> | <p>At least two school engagements per year</p> | <p>Sr. Director of Human Resources, Chief Development Officer</p> | | | |
| <p>f. GPHealth will continue the JV Ambassador program, which engages youth volunteers in the practice of medicine.</p> | <p>Achieve 10 active students per year</p> | <p>Chief Development Officer</p> | | | |

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| <p>g. Starting January 2023, GPHealth will offer an accelerated RN program for any interested bachelors students to pursue.</p> | <p>At least two students in program</p> | <p>Chief Nursing Officer</p> | | | |
| <p>h. GPHealth will continue to offer housing for residents, those on rotations and students within the accelerated RN program to help provide safe, affordable housing options.</p> | <p>Service available</p> | <p>Chief Nursing Officer</p> | | | |

Priority #2: Increase Access to Mental and Behavioral Health Care

Rationale

Data suggests that residents in Lincoln County do not have adequate access to mental and behavioral health care services and providers. Lincoln County has a lower rate of mental health care providers per 100,000 than the state. Additionally, Lincoln County has a Health Professional Shortage Area designation for mental health as defined by the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA).

Many interviewees appreciated the improvements made in access to mental and behavioral providers, particularly access to psychiatrists. One interviewee stated: “Our hospital has done a great job in getting more psychiatrists. The hospital has an inpatient facility but there aren’t enough beds. If people leave the county for care, it would be Kearney for psychiatric. For therapy, it’s Gothenburg or Ogallala.” There were several misconceptions about available providers for the youth population. One interviewee stated: “There is not a social worker/counselor who goes to the school district.” Another interviewee stated: “The school has hired a few social workers.” It was mentioned that there is limited availability of local providers for the youth population which is leading to outmigration to Kearney, Lincoln, Grand Island, Omaha, and Scotts Bluff.

A few individuals mentioned the need for a detox center or a longer term inpatient behavioral health facility for treatment. One interviewee stated: “We don’t have a place for long term [behavioral] care. We have the Lincoln Regional Center. They are so backlogged. They [end up] in the jail until placement. For acute patients, we transport them to Lincoln, Omaha or Scotts Bluff.” It was also specifically noted that there was concern for the vulnerable populations in the community, like the indigent and those with risky lifestyle behaviors for their mental health needs. One interviewee stated: “There needs to be some kind of centralized service. The concern is for the indigent and ones who have issues that lead to alcoholism, drug abuse, and criminal activity.”

The aging population were brought up specifically as having greater challenges in regards to their mental and behavioral health conditions, including: the limited availability of providers who specialize in appropriate medications; lack of facilities accepting seniors with mental health conditions and outmigration to other communities for mental and behavioral health care services. One interviewee stated: “We don’t have a lot of assisted living or nursing homes who will take residents with mental health issues. If they need inpatient care, they travel to Colorado.”

Priority #2: Increase Access to Mental and Behavioral Health Care

Strategic objective alignment:

- 1.) Ensure access to quality care
- 4.) Live our mission, vision and values

| Goals and Initiatives | Measurement | Responsible Leader | Progress/Key Results | | |
|--|--|---------------------------|----------------------|---------|---------|
| | | | FY 2023 | FY 2024 | FY 2025 |
| 2.1. Provide points of access for mental and behavioral health services in the community | | | | | |
| a. GPHealth will continue to provide an inpatient facility and outpatient clinic for mental and behavioral health patients. | Service available | Chief Nursing Officer | | | |
| b. GPHealth will participate in community discussions about the expansion of detox services in the local community. | Participation in region II monthly meeting discussions | Chief Nursing Officer | | | |
| c. GPHealth continuously evaluates the recruitment of additional psychiatrists to the area as appropriate. | Recruitment | VP of Physician Services | | | |
| d. GPHealth will continue to staff a Sexual Assault Nurse Examiner (SANE) and Sexual Assault Response Team (SART) who are trained specifically to treat sexually assaulted patients. | Service available | Chief Quality Officer | | | |
| e. GPHealth will continue to provide a full-time Behavioral Health Case Manager, RN, who assists outpatient clinic behavioral health patients with their needs and follow up post care. Additionally, the manager will link the patient to other needed mental health services as opportunities arise. | Service available | Chief Nursing Officer | | | |
| f. GPHealth will continue to expand Autism services in the community. | Program expansion by 2025 | Chief Development Officer | | | |
| 2.2. Utilize technology to improve access to mental and behavioral health partnerships | | | | | |
| a. GPHealth will continue to utilize tele-psychiatry in local organizations, including but not limited to the local jail, Centennial and Linden Court Nursing Homes and will continue to explore additional opportunities as appropriate. | Service available | Chief Development Officer | | | |

| 2.3. Generate community awareness and education about suicide and other mental health conditions | | | | | |
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| a. GPHealth continues to promote suicide prevention resources and services through social media channels and through the hospital's website. GPHealth's BHS unit will continue to handle calls made through the crisis line. | Service available | Chief Development Officer | | | |
| b. GPHealth will lead a community suicide task force whose charge is to generate awareness about the signs of suicide and encourage early intervention. | Participation in quarterly meetings | Chief Development Officer | | | |
| 2.4. Create partnerships with local schools and agencies to reach the adolescent population | | | | | |
| a. The GPHealth psychiatrist will host teacher- and counselor-directed education to train those working with teens how to identify mental and behavioral health issues and what to do when the conditions are detected. | Training provided by PRN | Chief Development Officer | | | |
| b. GPHealth will collaborate with local middle and high schools to promote adolescent mental or behavioral health education and services to its students. | Participation in school programs PRN | Chief Development Officer | | | |
| 2.5. As the second largest employer in Lincoln County, develop mental health support systems for employees of Great Plains Health | | | | | |
| a. As the second largest employer, GPHealth will continue to offer the Employee Assistance Program (EAP) to help employees navigate various life challenges. | Service available | Sr. Director of Human Resources | | | |
| 2.6. Offer support services and clinical guidelines designed to assist area providers and Lincoln County residents with the diagnosis of mental or behavioral health | | | | | |
| a. GPHealth will continue to standardize its depression screening services. | Service available | Senior Director of Provider Network | | | |

Priority #3: Improve Access to Medical and Dental Care

Rationale

Lincoln County has a lower rate of dentists per 100,000 population and a higher percentage of those who do not own a motor vehicle than the state. Additionally, Lincoln County has a higher than average cost of living for health expenses as compared to the state.

Interviewees discussed the need for additional internal medicine as well as nursing staff in general. One interviewee stated: “We have a lot of family practice providers but not a lot of internal medicine.” Several individuals mentioned issues with affording primary care due to cost and the need for additional low income primary care clinics. One interviewee stated: “We have a big need for some sort of low income clinic for the un/underinsured.” Many interviewees brought up transportation as a barrier to accessing healthcare for individuals, particularly those who are on Medicaid. One interviewee stated: “Sometimes transportation [is an issue]. There are taxis but they are more expensive. We have buses and the only day we don't have it is on Sunday.”

Appreciation for telehealth for primary care services during the pandemic were mentioned by a few individuals, but internet access remains an issue for some individuals in the community. One interviewee stated: “Accessibility to primary care providers has been excellent. During COVID we had to resort to telehealth but we didn't miss a beat.” Another interviewee stated: “There's some telemedicine use. [Some] of our clients have internet access issues.” Limited accessibility and options for care due to cost across all healthcare services were mentioned by many interviewees and how it's affecting the un/underinsured, low income, those on Medicaid and those with a high deductible health plan. One interviewee stated: “Un/underinsured don't necessarily have access to medical care. There are some doctors that are accepting Medicaid if you are an established patient but they aren't for new patients. It's a concern if you find an issue during a routine check and you might not be able to afford it. [This applies to] those who have insurance but have a higher deductible.”

Several interviewees discussed the language and translation barriers for minority populations leading to difficulty accessing and understanding care. Additionally, a few individuals brought up ‘middle income’ patients and how they might have potential access issues. One interviewee stated: “Cost right now is a barrier for people without insurance. The biggest gap is if you have Medicaid. If you are in the middle that can be difficult because it's like they are pricing them out. For families that don't have coverage, they aren't going [to get care].” Certain groups in the community like the un/underinsured and low income were mentioned as inappropriately using the emergency room due to lack of payment upfront, not having a personal doctor and the lack of preventable measures being taken to stay active and/or healthy. One interviewee stated: “In some situations there isn't a primary care provider period so they aren't doing preventative measures. The [Medicaid population] aren't [taking] preventative measures so they [end] up in the emergency room.” The youth population specifically were brought up as using the urgent care as their primary care. One interviewee stated: “The younger generation is used to having access all the time. They use the urgent care as their primary care.”

For specialty care, individuals appreciated the hospital's involvement in recruiting specialists to the area however there was concern for the growing population and the demand for specialty care services like orthopedics. One interviewee stated: “The amount of specialties and the diversity of specialists is pretty remarkable. It's pretty rare that they can't handle things here. As a result of the great medical care facility we have, it's easier to recruit providers.” Another interviewee stated: “We have a pretty good base [of] orthopedics but as we continue to expand and provide more services that will be a huge need for our population.” The shortage of local specialty care services is leading to long wait times and outmigration of patients to Kearney or Lincoln.

Specific specialties mentioned as needed include Orthopedics, Cardiology, Endocrinology, Dermatology, Geriatric Psychiatry, Gastroenterology (full time provider), Rheumatology, Urology, Neuro-Psychology, Pediatric Psychiatry; Pediatric ENT and Pediatric Pulmonology.

Telemedicine was discussed by interviewees and how they appreciated it for specialty care services but internet access remains an issue for some in the community, particularly the senior and low income populations. One interviewee stated: “Telemedicine is a great option but there needs to be coverage for the senior and low income populations who don't own a lot of technology.”

With regards to dental care, interviewees discussed the challenges with local dental practices being out of network. One interviewee stated: “The health department does some basic cleaning on a rare basis. The majority of dental practices are out of network. Even insured people have difficulties [seeing someone].” Limited accessibility of local dental care is leading to outmigration to cities like Lincoln and Omaha, particularly for certain patients like Medicare/Medicaid, the low income and the elderly. One interviewee stated: “There are issues finding a dentist who will accept Medicaid. A lot of our senior population travels 3-5 hours to find a dentist.”

A few interviewees mentioned the age limitations for a local dental clinic which is leading to access issues. One interviewee stated: “There's a clinic that [provides care for Medicaid patients] but they don't see people over 12yrs old.” The minority populations in the community were discussed as having potential language barriers when trying to access dental services. Lastly, several individuals discussed the need for dental providers who take Blue Cross Blue Shield (BCBS) insurance. One interviewee stated: “There isn't a dentist in town that takes BCBS. That's a big barrier for some employees. They have to go somewhere else or rely on their spouse's insurance.”

Priority #3: Improve Access to Medical and Dental Care

Strategic objective alignment:

- 1.) *Ensure access to quality care*
- 2.) *Deploy innovation to improve organizational outcomes*
- 3.) *Grow services to exceed our region's needs*
- 4.) *Live our mission, vision and values*
- 5.) *Maintain the independence of healthcare within our region*

| Goals and Initiatives | Measurement | Responsible Leader | Progress/Key Results | | |
|---|--|----------------------------------|----------------------|---------|---------|
| | | | FY 2023 | FY 2024 | FY 2025 |
| 3.1. Utilize technology to improve access to medical care | | | | | |
| a. GPHealth will continue to explore ways to integrate and optimize the Epic electronic medical record throughout the region so that patients and their providers have greater access to needed health information in a more efficient way. | One project per year | Chief Information Officer | | | |
| b. GPHealth will expand both its inbound and outbound tele-health program. Additionally, GPHealth will continue to recruit sub-specialties to reduce the need for patients to travel to far-away communities for follow-up care. | Two new programs per year | Chief Development Officer | | | |
| c. GPHealth will grow utilization of the MyChart patient portal so that patients have more convenient and timely access to their health information. | 5% year over year increase for patient base | Chief Information Officer | | | |
| 3.2. Incite productive dialogue around access to low-income dental care in Lincoln County | | | | | |
| a. GPHealth will organize a task force that will identify barriers to providing indigent dental care and implement solutions that will create greater access. | Implementation | Chief Executive Officer | | | |
| 3.3. Engage in programs that serve those unable to pay for healthcare services | | | | | |
| a. GPHealth will continue to offer financial support through the Great Plains Medication Assistance Program to help those who cannot afford their long-term medications to take advantage of low-cost and no-cost prescription programs. | Medication Assistance Program remains in existence all three reporting years | Chief Financial Officer | | | |

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| <p>b. GPHealth will continue to offer a generous financial assistance program for those unable to pay for emergency medical and non-elective services who meet required eligibility guidelines. GPHealth employs staff to assist patients in obtaining financial assistance through public financial aid. Patients who do not meet required public benefit aid eligibility guidelines may be considered for GPHealth financial assistance and/or charity care program. Additionally, GPHealth assists people in signing up for Medicaid coverage.</p> | <p>Reports in payment plans and charity care</p> | <p>Chief Financial Officer, Senior Director of Revenue Cycle</p> | | | |
| <p>3.4. Enhance physical structure of treatment areas to create greater access to care</p> | | | | | |
| <p>a. GPHealth will continue to conduct a campus plan every 3 years to identify and address access issues. Facility projects throughout the campus will be evaluated and conducted to improve access as opportunities arise.</p> | <p>Pursuing opportunities as necessary</p> | <p>Chief Operating Officer</p> | <p><i>Current Examples include: increase number of exam rooms available for primary care</i></p> | | |
| <p>3.5. Expand local healthcare services so that patients can stay as close to home as possible for medical care</p> | | | | | |
| <p>a. GPHealth will seek opportunities to place GPHealth medical services in the PSA and SSA.</p> | <p>One program per year</p> | <p>Chief Development Officer</p> | | | |

Priority #4: Increase Prevention Education to Reduce the Prevalence of Chronic Diseases, Preventable Conditions, Readmissions and High Mortality Rates

Rationale

Data suggests that higher rates of specific mortality causes and unhealthy behaviors warrants a need for increased preventive education and services to improve the health of the community. Cancer and heart disease are the two leading causes of death in Lincoln County and the state. Lincoln County has higher mortality rates than Nebraska for the following causes of death: cancer; chronic lower respiratory diseases; accidents (unintentional injuries); diabetes mellitus; COVID-19; essential hypertension and hypertensive renal disease; intentional self-harm (suicide); breast cancer (female); and colon and rectum cancer.

Lincoln County has higher prevalence rates of chronic conditions such as diabetes for adults and Medicare beneficiaries, obesity, and high blood pressure for adults and Medicare beneficiaries than the state. Lincoln County has higher percentages of residents participating in unhealthy lifestyle behaviors such as physical inactivity and smoking than the state. With regards to maternal and child health, specifically, Lincoln County has higher low birth weight births, higher teen (age 0-19 years) birth rates, and a higher percentage of those mothers who received inadequate prenatal care than the state. Additionally, data suggests that Lincoln County residents are not appropriately seeking preventive care services, such as timely mammography screenings or pap tests. For communicable diseases, Lincoln County has one of the highest rates of chlamydia infections in the state as compared to all other counties. In 2009-2018, Lincoln County saw an overall increase in chlamydia and gonorrhea infection rates. 55.63% (age 18+) of the population in West Central District Health Department is fully vaccinated with the COVID-19 vaccine (information as of August 1, 2022).

Several interviewees appreciated the local recreation center's affordability as well as the scholarship opportunities for kids. They also appreciated the recreation center's marketing efforts of their services to the community. However, there is limited awareness of healthy lifestyle resources in the community. One interviewee stated: "The recreation center does a good job at marketing [their services]. I don't see a lot of advertisements for healthy lifestyles. It's hard to find out about elementary school age sports." A few individuals discussed the need for some updates to the recreation center so it can better meet the needs of the community. Additionally, it was mentioned that there needs to be additional community programs that focus on minority populations and the potential population growth in the community. There were also mentions that there are available programs but they are limited due to cost barriers and age/disability restrictions. One interviewee stated: "We need a community program geared specifically for minorities. North Platte will see its minority population and general population expand. There's a limited amount of senior programming but not enough to be beneficial." Another interviewee stated: "We have both food banks and meals on wheels in the area. The meals on wheels is restricted to the elderly or those bound in their homes."

Interviewees discussed the lack of education surrounding nutrition resources in the community. Higher rates of smoking, obesity, drug and alcohol abuse were mentioned specifically by interviewees and how these are leading to chronic conditions and potential effects on family members. One interviewee stated: "We have a pretty high rate of smoking and obesity. Some of it could be poverty but a lot of it's lack of self will. Then the drug and alcohol abuse leads to family issues and children being put into bad situations." Lastly, there is a desire for increased emphasis on routine screenings for the community.

Priority #4: Increase Prevention, Education to Reduce the Prevalence of Chronic Diseases, Preventable Conditions, Readmissions and High Mortality Rates

Strategic objective alignment:

- 1.) *Ensure access to quality care*
- 4.) *Live our mission, vision and values*
- 5.) *Maintain the independence of healthcare within our region*

| Goals and Initiatives | Measurement | Responsible Leader | Progress/Key Results | | |
|---|--|----------------------------------|----------------------|---------|---------|
| | | | FY 2023 | FY 2024 | FY 2025 |
| 4.1. Offer community events designed to improve health and wellness | | | | | |
| a. GPHealth will continue to host free monthly prepared childbirth classes designed for first-time parents to learn what to expect on delivery day as appropriate. Great Plains also provides a "Breastfeeding 101" class at no cost for new and soon-to-be parents to learn the basics of breastfeeding. | Classes PRN | Chief Nursing Officer | | | |
| b. GPHealth will continue to offer Friends & Family CPR classes to the community at no cost as opportunities arise. | Course offered two times per year | Chief Development Officer | | | |
| c. GPHealth will continue to host employee and community blood drives for the American Red Cross as opportunities arise. | Hosted PRN | Executive Admin | | | |
| 4.2. Partner with local organizations who work to improve wellness in the community | | | | | |
| a. Continue to ensure active GPHealth leadership on the North Platte Area Wellness and Recreation Alliance. | GPHealth will offer the time of at least two senior leaders to this initiative | Chief Development Officer | | | |
| b. GPHealth will continue to inspire health by supporting local organizations by giving through its GPHealth Gives committee or through providing volunteers. | Give more than \$100,00 per year contributed | Marketing Manager | | | |
| c. GPHealth will continue to be the lead sponsor of the Platte River Fitness Series. | Sponsorship each year | Marketing Manager | | | |
| d. GPHealth will continue to provide donations to area post-prom parties with the mission to engage teens in a drug-free, parent-supervised, post-prom activity. | At least five schools per year | Marketing Manager | | | |

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| e. GPHealth will continue to host an annual fundraising drive for the MidPlains United Way. | One employee fundraiser per year | Chief Financial Officer | | | |
| f. GPHealth diabetes educators are partnering with Bryan LGH to develop a diabetes program. | Develop program | Senior Director Compliance | | | |
| 4.3. Enhance the GPFit! initiative to improve community wellness | | | | | |
| a. GPHealth will continue to provide lung screenings through CT scans at the GPHealth Imaging Center with an out-of-pocket cost to patients at a highly reduced rate. | Service available | Chief Operating Officer | | | |
| b. GPHealth will continue to offer low-cost heart screenings to employees and the community on a bi-weekly basis. As part of the prevention and early identification program, participants pay a significantly reduced amount for a heart screening. The screenings test a person's blood pressure, body mass index, cholesterol level, blood glucose level and calcium score to indicate if he or she is at risk for heart disease. | Service available | Chief Operating Officer | | | |
| c. Host screening events of chronic health conditions yearly. | At least 25 people per screenings per year | Marketing Manager | | | |
| d. Continue to partner with Building Healthy Families, a family-based obesity treatment program for children and their families, in partnership with the Platte River Fitness Series, the University of Nebraska Medical Center and the University of Nebraska at Kearney. The 12-week evidence-based program is targeted for children with a BMI in the 95th percentile or higher and is designed to eliminate obesity one family at a time. | Continued participation | Chief Development Officer | | | |
| 4.4. Provide community education designed to improve the health of the community | | | | | |
| a. GPHealth, in conjunction with the Nebraska Tobacco Coalition, will continue to offer a tobacco quit line The Nebraska Tobacco Quitline, 1-800-QUIT-NOW (1-800-784-8669), gives Nebraska residents free and confidential, 24/7 access to counseling and support services. Quitline services are available in 170 | Service available | Chief Development Officer | | | |

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| <p>languages. The Nebraska Tobacco Quitline offers a FREE two-week supply of over-the-counter nicotine replacement therapy. GPHealth promotes this line to both inpatients and outpatients.</p> | | | | | |
| <p>b. GPHealth will continue to offer three hours of EMS education credit quarterly. We partner with MPCC to offer the Flatrock EMS conference and facilitate their keynote speaker each year. Free of charge.</p> | <p>Classes offered each year throughout the region to area first responders</p> | <p>Chief Development Officer</p> | | | |
| <p>4.5. Provide community resources to improve health and wellness</p> | | | | | |
| <p>a. GPHealth will continue to provide speakers and information when requested at community events and other educational opportunities.</p> | <p>Fill at least 80% of all request made to the marketing manager</p> | <p>Marketing Manager</p> | | | |
| <p>b. GPHealth will continue to offer free sports medicine services to more than 15 schools to help promote the proper treatment of sports-related injuries and to keep young athletes safe. In addition to attending sporting events, GPHealth will offer a coaches clinic, a program designed to teach coaches and players proper prevention techniques to help avoid injury during conditioning and training. There is no charge to schools for this program.</p> | <p>Service available</p> | <p>Chief Operating Officer</p> | | | |
| <p>c. GPHealth offers a lactation consult to assist new mothers and babies in breast feeding.</p> | <p>Service available</p> | <p>Chief Nursing Officer</p> | | | |
| <p>d. Establish a condition management program for diabetes patients.</p> | <p>Service available</p> | <p>GPHIN Executive Director</p> | | | |
| <p>4.7. Promote prevention education and messaging throughout the community</p> | | | | | |
| <p>a. GPHealth will continue to provide a social media chronic disease prevention campaign to educate the public on risk factors and preventable conditions.</p> | <p>One campaign per year</p> | <p>Marketing Manager</p> | | | |

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| b. GPHealth will utilize its social media channels to educate the public about the importance of screening that aids in prevention, and early detection. | One campaign per year | Marketing Manager | | | |
| c. GPHealth will continue to distribute community education on disease prevention. | One per year | Marketing Manager | | | |
| 4.8. Create wrap-around services designed to enhance the success of patients with chronic disease | | | | | |
| a. GPHealth will grow its comprehensive care coordination program, which is designed to improve outcomes and reduce readmissions for high-risk patients. The non-reimbursed program ensures safe and effective transitioning from acute care to home through access to a nurse practitioner who can intensively follow their at-home care. | Increase number of active patients enrolled by 5% each year | GPHIN Executive Director | | | |
| b. GPHealth will explore the addition of more patient navigators in the health system. | On going | Chief Operation Officer | | | |

Priority #5: Increase Access to Safe and Affordable Housing

Rationale

Data indicates that safe, affordable housing is a need in Lincoln County. Over 38.0% of the population in Lincoln County census tracts 9597, 9598, 9599, 9605 and 9606 live within rented units. Additionally, Lincoln County has a higher percentage of adults age 55-64 and 75-84 years old that live in renter-occupied units than the state.

Interviewees mentioned how the lack of housing in the community is causing recruitment barriers. One interviewee stated: “The hospital has done a phenomenal job recruiting providers to the area. Our greatest deterrent is lack of housing. We don’t have enough nursing specialists.” A few interviewees discussed the potential increase in the population and how that could cause issues with the availability and affordability of housing. One interviewee stated: “The North Platte area is looking at some potential large employers. There has been a housing shortage. They are anticipating that we’ll have a large influx of people from other cultures.” Another interviewee stated: We’re about to have an explosion of growth in North Platte. We have a huge housing issue that is about to happen.”

Priority #5: Increase Access to Safe and Affordable Housing

Strategic objective alignment:

- 2.) *Deploy innovation to improve organizational outcomes*
- 3.) *Grow services to exceed our region's needs*
- 4.) *Live our mission, vision and values*
- 5.) *Maintain the independence of healthcare within our region*

| Goals and Initiatives | Measurement | Responsible Leader | Progress/Key Results | | |
|---|--|--|----------------------|---------|---------|
| | | | FY 2023 | FY 2024 | FY 2025 |
| 5.1. Increase access to safe and affordable housing options in the community | | | | | |
| a. GPHealth will continue be active participants in the housing task force and ensure an active GPHealth leadership team member is on the local housing task force. | At least one member of Senior Leadership attending | Chief Executive Officer | | | |
| b. GPHealth will continue to assist with housing down payments for healthcare workers employed at GPHealth. | At least one employee supported per year | Sr. Director of Human Resources | | | |
| c. GPHealth will continue to work with local hotels to offer patients receiving care and their families discounted rates. | Ongoing | Marketing Manager | | | |
| d. GPHealth will continue to be actively engaged in initiatives to grow housing. | Ongoing | Chief Operating Officer | | | |

Feedback, Questions or Comments?

Please address any written comments on the CHNA and Implementation Plan and/or requests for a copy of the CHNA and Implementation Plan to:

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Please find the most up to date contact information on the Great Plains Health website under “About us: Community Impact”:

<https://www.gphealth.org/about-us/community-impact/>





Thank you!

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