

IMPLEMENTATION STRATEGY

2021 Community Health Needs Assessment





Indiana Regional Medical Center (IRMC), part of the Pennsylvania Mountains Health Care Network (PMCN), offers its Community Health Needs Assessment (CHNA) Implementation Strategy for 2021-2024. The implementation strategy is the result of the hospital's CHNA adopted by the IRMC Board of Directors in June, 2021. The IRMC CHNA identified twenty-four (24) Areas of Opportunity. These areas were determined after consideration of various criteria, including: standing in comparison with benchmark data (particularly national data); the preponderance of significant findings within topic areas; the magnitude of the issue in terms of the number of persons affected; and the potential health impact of a given issue. Complete details are available within the IRMC 2021 CHNA, which may be viewed at https://res.cloudinary.com/dpmykpsih/image/upload/irmc-site-339/media/5d3dfedc0853414b837a3840fd35a72a/irmc_chna_77-final.pdf

PRIORITIZATION CRITERIA

Key informants and hospital senior leadership ranked the identified needs based on four criteria:

- 1. Accountable Organization the extend to which the issue is an important priority to address in this planning effort for the hospital or community
- 2. Magnitude of Problem the degree to which the problem leads to death, disability, or impaired quality of life and/or could be an epidemic based on the rate or % of the population that is impacted by the issue
- 3. Impact on Other Health Outcomes the extent to which the issue impacts health outcomes and/or is a driver of other conditions
- 4. Capacity this would include the capacity to and ease of implementing evidence-based solutions

OUTCOMES AND IMPACT WILL BE MEASURED BY:

- Events and educational outreach programs and services provided
- Participation in wellness and screening events and challenges
- Referrals for services, interventions, or higher levels of care based on screening outcomes
- Increase in community's knowledge base and intent to change behavior
- Creation of protocols for certain programs
- Collaboration with community agencies

PRIORITIZATION OF RESULTS

- Mental Health
- Cardiovascular Disease
- Diabetes
- Chronic Disease
- High Blood Pressure
- Cerebrovascular Disease
- Colorectal Cancer



KEY DATA FINDINGS: COMPARISONS TO BENCHMARK DATA

	Indiana County	vs. PA	vs. US	vs. HP 2030
Cancer				
Colorectal Cancer (Age-Adjusted Death Rate) per 100,000	11.3	13.0	13.5	8.9
Colorectal Cancer Incidence per 100,000	42.0	37.3	36.8	
Diabetes				
Diabetes Mellitus (Age-Adjusted Death Rate) per 100,000	16.3	20.4	21.6	
% Ever Told Diabetes	15.0%	11.0%	10.8%	
Heart Disease & Stroke				
Cardiovascular Disease Mortality (Age-Adjusted Death Rate), per 100,000	206.4	220.4		
Cerebrovascular Disease Mortality (Age-Adjusted Death Rate), per 100,000	41.2	35.3	46.7	33.4
Substance Use & Substance Use Disorders				
% Reported Binge Drinking	15.0%	17.0%	16.8%	
Drug Induced Mortality (Age-Adjusted Death Rate), per 100,000	51.1	36.2	21.5	20.7
% Community Survey Respondents Identify Alcohol Abuse as Problem	98.0%			
% Community Survey Respondents Identify Drug Abuse as Problem	98.5%			
% Community Survey Respondents Identify Access to Drug and Alcohol Treatment	92.2%			
Services as Problem				
Mental Health & Mental Disorders				
Mental and Behavioral Disorders Mortality (Age-Adjusted Death Rate), per 100,000	65.7	42.8		
% Community Survey Respondents Identify Access to Mental Health Care Services	90.8%			
as Problem				
% Mental Health Not Good 1+ Days, Past Month	37.0%	39.0%	38.7%	
Physical Activity & Weight				
% Community Survey Respondents Identify Lack of Physical Activity as Problem	98.9%			
% Overweight (BMI 25+)	72.0%	67.0%	34.6%	
% Obese (BMI 30+)	39.0%	32.0%	32.4%	
% No Leisure-Time Physical Activity	29.0%	25.0%	26.4%	

IMPLEMENTATION STRATEGY ACTION PLAN

Indiana Regional Medical Center (IRMC) completed its community health needs assessment in collaboration with community, government and other social service partners serving those communities. This Implementation Strategy Action Plan has been formulated based on the findings and priorities established by the needs assessments. The Action Plan delineates the focus of IRMC's community outreach and health improvement efforts over the next three years. With a commitment to achieving the "triple aim" – improved health through better quality of care at lower costs with positive patient and family experiences – IRMC will focus on addressing the highest priority issues identified in the needs assessment. Appropriate resources will be allocated to achieve health improvement goals related to the priority issues.

Goal 1: Improve Health Status by Increasing Participation in Education and Wellness, Focusing on Overweight/Obesity

- 1. Continue to offer Wellness Program to IRMC employees and community partners
- 2. Promote health and wellness to the community at-large

Goal 2: Increase Access to Mental Health Services and Supports

- 1. Serve community need by implementing a BH Outreach Program to connect emergency department BH patients with outpatient
- 2. Provide education and outreach
- 3. Increase awareness of available services
- 4. Online resources made available through the hospital's webpage

Goal 3: Decrease drug and alcohol use in Indiana County by collaborating with the Armstrong-Indiana-Clarion Drug & Alcohol Commission on prevention, education, intervention, and treatment strategies

- Continue to partner with the Armstrong-Indiana-Clarion Drug and Alcohol Commission and ARMOT (Addiction Recovery Mobile Outreach Team), Overdose Task Force and Drug Free Community Coalition
- 2. Increase referrals of patients who present in ED to ARMOT and other community agencies
- 3. Educate staff, providers, and the broader community in an effort to reduce the stigma around substance use
- 4. Increase access to inpatient rehab
- 5. Increase awareness of available services
- 6. Online resources made available through the hospital's webpage

