

Community Health Needs Assessment

# Implementation Plan

Period: 2016-2018

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# Introduction

# **Mary Rutan Hospital**

Mary Rutan Hospital is the sole community, not-for-profit hospital in Logan County, with the mission of providing progressive, quality health care with a personal touch to the communities in which it serves.

To assist Mary Rutan Hospital in providing the community with quality health care programs and services, it held a lead role in partnering with numerous community agencies and organization to develop a county-wide Health Improvement Plan (CHIP) based on the 2015 Community Health Needs Assessment (CHNA). Members of the hospital team actively participate in the four community coalitions and a member of the hospital's senior leadership team serves on the counties newly formed Coalition Advisory Board (CAB) to work with community partners, in a unified, collaborative effort to address and impact Logan County's identified areas of risk and need.

In addition, Mary Rutan Hospital developed an internal implementation plan that identifies the specific steps that Mary Rutan Hospital will take to maintain and improve the health of the Logan County.

# Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP)

Mary Rutan Hospital was a lead organization in facilitating and funding the communities second formal Community Health Needs Assessment, partnering with the Logan County Health District and the Mental Health, Drug and Alcohol Board of Logan and Champaign Counties, as well as 15 other community agencies and organizations. This collaboration allowed community partners to come together in a unified front to create a comprehensive assessment and plan to assist all agencies and organization in fulfilling their mission and to impact the health and well-being of the community and residents of Logan County.

In June of 2015, community members were publicly invited to review the findings of the assessment and provide comment to Mary Rutan Hospital or the Logan County Health District, as well as participate in a Community Call-To-Action at the conclusion of the 30-day comment period. No comments were submitted, however, extensive input was obtained from over 70 community leaders and residents while reviewing the findings of the CHNA during the Community Call-To-Action held on July 27, 2015. During this meeting community partners identified the areas of concern within Logan County, establish priority areas of Healthy Living (obesity, nutrition, and chronic disease), Drug Abuse, Mental Health and Access, Awareness & Resources and further define action items for the community coalitions addressing in each of these areas.

Mary Rutan Hospital wishes to thank the many organizations and individuals that participated in the community process and who continue to dedicate themselves to creating one of the healthiest counties in Ohio.

# **Implementation Plan**

Mary Rutan Hospital's Implementation Plan addresses each of the community health needs identified in the 2015 CHNA and CHIP. A workgroup including the Medical Director, Vice President of Community Relations/Foundation COO, Director of Cardiovascular Services, Director of Education, Patient Center Medical Home Internal Medicine and Pediatrics Practice Managers, Chief Registered Dietitian and the Community Relations Health and Wellness Coordinator developed the Implementation Plan. The plan has been tailored to Mary Rutan Hospital, taking into account the organizations specific programs, resources and priorities. The Implementation Plan was presented to the Board of Directors of Mary Rutan Hospital and approved at their meeting on October 26, 2015.

#### Resources

The Implementation Plan was developed by a workgroup consisting of organizational leaders with the ability to make recommendations for staff and resources to be budgeted for their work toward improving the targeted health needs.

#### **Feedback Mechanism**

The Community Health Needs Assessments (CHNA) and Community Health Improvement Plan (CHIP) for Logan County and Mary Rutan Hospital Implantation Plan are available to the public on the hospital's website at <a href="www.maryrutan.org">www.maryrutan.org</a>. A printed copy and feedback of the community needs assessment and implementation plan may be requested or submitted at <a href="publicrelations@maryrutan.org">publicrelations@maryrutan.org</a> or by calling Mary Rutan Community Relations Department at (937)599-7003.

### **Evaluation Plan**

The implementation plan will be used as a baseline for performance and used to guide the evaluation process and future strategy development. The actions and anticipated impacts included in this document will be evaluated against the data collected for the identified measures. The leaders will ensure that the applicable information is reported and assessed annually as a part of the Community Benefit reporting process through Mary Rutan Hospital's Community Relations Department. An annual written report will be presented to the Board of Directors and available on the hospital's website.

#### PRIORITIZED HEALTH NEEDS

The workgroup was presented and reviewed the findings of the 2015 Logan County CHNA and CHIP and were asked to select what they considered to be the highest priority issues using the criteria and questions listed below:

- 1. Consequential Will it make a difference if we address this as a priority? What will be the consequence of not addressing it?
- 2. Community Support Are there sufficient resources that could be dedicated to this priority by community partners and Mary Rutan Hospital?
- 3. Pragmatic Can we do something to address this priority?

After much review and discussion, a two-step voting process was utilized to gain consensus of priorities. The priorities mirrored those identified by community partners and were identified as:

- 1. Healthy Living to Prevent Obesity & Chronic Disease
- 2. Drug Abuse (Opiate and Heroin)
- 3. Mental Health
- 4. Access/Awareness/Resources

The workgroup then reviewed existing programs and services, rating what programs and services were working, needed modified or improved or discontinued. New programs, services and outreach items were presented to the group for discussion. Work plans were designed to assist in preparing the implementation plan and for tracking during the 3-year plan period.

# **KEY FINDING #1:**

#### **HEALTH LIVING TO PREVENT OBESITY & CHRONIC DISEASE**

Data from the 2015 Logan County Community Needs Assessment survey shows that there is room for improvement in Logan County in terms of getting people to make healthier choices. For example, the survey showed that:

- Only about one-fourth (28.6%) of the respondents indicated that they exercised for 30 minutes at least five times per week, which is the current recommendation of health experts.
- Calculations based on the heights and weights reported by the respondents revealed that more than two-thirds (69.2%) were either overweight or obese.
- More than one in four (26.5%) adults reported having been diagnosed with diabetes; that's much higher than the state and national averages (10.9% and 10.1%)
- The diabetes rate was high even among young adults' ages 18-34 years at nearly 15%.
- More than half (53.1%) of respondents reported having been diagnosed with high blood pressure.
- Nearly on half (47.6%) of respondent reported having been diagnosed with high cholesterol.
- Coronary heart disease was reported by 10.2% of respondents, higher than state and national levels at 4.3%.

# **IMPROVEMENT TARGETS**

Priority 1 Improvement Targets – Healthy living to prevent obesity and chronic disease GOAL – Equip and motivate Logan County residents to make healthier choices **Measurable Objectives Data Source** Frequency of (How we will know we are making progress) Measurement 1.1 Increase the percentage of residents that exercise at **CHA Survey** least 5 times each week to 30% by 2018 through the 3 years promotion of Healthy Habits initiatives. 1.2 Reduce the percentage of overweight and obese **CHA Survey** 3 years residents to 65% by 2018.

PRIORITY 1 Strategies – Healthy living to prevent obesity and chronic disease GOAL – Equip and motivate Logan County residents to make healthier choices			
Strategies (What we will do to achieve our goals and objectives)	Lead (Who is responsible)	Timeline	Measurement
1.1 Lead Logan County Healthy Living Coalition –expansion of community activities and education	MRH Community Relations Dept	Ongoing	Ability to meet goals set forth by CHIP
1.2 Expand the Healthy Habits, Healthy You program providing increased activities, community education, promotion of success stories and community involvement	MRH Community Relations Dept & LCHD/Coalition	1Q 2016 Finalize Plan 2016,2017,2018	-Participation Count, Pre & Post Knowledge of Education (Annual) -CHA Survey (3yr)
<ul> <li>1.3 Comprehensive Weight Management Clinic centered around Very Low Calorie Diet &amp; Low Calorie Diet options <ul> <li>Medical management</li> <li>Individual nutrition plans</li> <li>Education and group support sessions</li> <li>Psychosocial counseling</li> <li>Exercise programming</li> </ul> </li> </ul>	Director of Cardiovascular Services	1Q 2016 Implement new service line 2016,2017,2018	Increase the percentage of participants by 10% annually  Measure and track participant improvement outcomes annually

1.4 Implement "Healthier ME" Program to assist overweight population that does not meet new MRH Weight Management Program Guidelines	Community Relations Dept, Education, Exercise, Dietician, MRH PCMH practices	1Q 2016 Implement new service line 2016,2017,2018	-Participation -Referrals to "Healthier ME" program
1.5 Solid Ground Falls Prevention Classes (a new program Fall 2015) to allow senior adult to reduce fall risk and become more physically active. (baseline 60 participants)	Community Relations Department Barns/Harmon	Quarterly 2016, 2017, 2018	Increase by 30% the number of participants annually
1.6 Targeted screenings and education for school age, community and at risk population focused on Healthy Living/Chronic Disease/Cancer and lack of screenings	Community Relations and specific MRH related Depts.	2016,2017,2018	Number of Participants / risks identified
1.7 Video Education branded with Healthy Habits Healthy YOU initiatives – utilize Waiting Rooms, Social Media, Coalition Partners, Chamber	MRH Community Relations Dept/ Coalition	Implement 2017, 2018	Measure outreach touch points
1.8 Grocery Store labeling – Healthy Habits Health YOU choices marked/ in store education in Community Markets located in at-risk areas of Logan County of Central Bellefontaine/ IL area and privately owned markets in West Liberty and West Mansfield.	MRH Community Relations Dept/ Coalition	2Q 2016	Implementation of 1 store each year
1.9 Walk with a Doc/ Play with a Doc / Family Meal	MRH physician practices (PCMH)/MRH Community Relations Dept., MRH Medical Director	Nov/Dec 2016 Jan/Feb/Mar 2017	Participation
1.10 Partner with area Food Sites to provide education/demonstration/tools for providers and participants of Meal Sites to promote and offer healthy nutritional meal options	Coalition/ MRH Community Relations/ MRH Dietitian	4 <sup>th</sup> Quarter 2016 2017, 2018	-Increase participation of food sites annually
1.11 Implement School Based Health & Wellness Education Program with Belle Center Amish	MRH Community Relations Barns/Harmon	2016	Pre/Post Test

1.12 Institute Logan County Restaurant menu labeling – promote Healthy Habits Health	Coalition/ MRH Community Relations/ MRH Dietitian	2018	Increase participation of food sites
YOU restaurant choice.			annually
1.13 Establish Formal Plan/Policy	MRH Food & Nutrition/ MRH	1Q/2Q 2016	Employee Survey
to restructure MRH café and	Leadership Team/	Plan & Policy	Patient Survey
menu to healthier products for	Administration, Foundation	3Q 2016	
patients, visitor, community and		Implementation	
staff to include meals, vending,		2017 reno fresh,	
snack bar, gift shop and catering		healthy look	
1.14 Review Chronic Disease	MRH	4Q 2016 review	Increased
Education at the bedside and in	Education/PCMH/Community	2017, 2018	participation in
MRH physician practices along	Physician Practices	implementation	chronic disease
with promotion of management		-ongoing	management
and support group programs			program,
(CHF,COPD, Cardiac Rehab,			support groups
Diabetes, Weight Management)			and PCMH data
1.15 Fund Community Health &	Mary Rutan Foundation	2016,2017,2018	Overview of
Wellness Grants for community			programs and
partners targeting physical			grant outcomes
activity and proper nutrition			

# **KEY FINDING #2:**

# **DRUG ABUSE (OPIATE AND HEROIN)**

Data from the 2015 Logan County Community Needs Assessment survey shows that this is another issue that is negatively affecting the health and well-being of too many Logan County residents. The assessment showed that:

- Nearly one-third (31.4%) of young adults said they knew someone that uses heroin.
- Over 17% of seniors indicated they misused pain medications.

# **IMPROVEMENT TARGETS**

GOAL –Reduce the number of individuals and families that are negatively affected by drug				
abuse				
Measurable Objectives Data Source Frequency of				
(How we will know we are making progress) Measurement				
1.1 Increase the number of heroin addicts seeking	Coalition/CHWPLC			
treatment by 5% by 2018. CCI 3 years				
1.2 Reduce the rate of opiate prescriptions in Logan County by 1% annually.  OARRS Annually				

PRIORITY 2 Improvement Strategies – Drug Abuse (Opiate & Heroin) GOAL –Reduce the number of individuals and families that are negatively affected by drug abuse.			
Strategies (What we will do to achieve our goals and objectives)	Lead (Who is responsible)	Timeline	Measurement
1.1 Remain a lead organization in the Community C.O.R.E. Coalition as an active partner	MRH Medical Director, VP Community Relations	2016,2017,2018	Ability to meet goals set forth by Coalition/CHIP
1.2 Senior Leadership lead Community C.O.R.E. Medical Action Group	MRH Medical Director, VP Community Relations	2016,2017,2018	Committee Goal Outcomes: Education, Treatment, Policy
1.3 Educate physicians regarding over- prescribing opiates and use of the OARR system.	Coalition, MRH Medical Director, Pharmacy, Community Relations Dept.	2016	-2016 Participation Rate -2017-2018 OARR data to track improvement
1.4 Implement patient education program by medical professionals at discharge, medication review with pharmacist and in MRH practices	MRH pharmacy, MRH Practice Managers, MRH Medical Director	2016	90% compliance rate as reported through EMR
1.5 Review and update current prescribing protocols and educate appropriate clinical staff	MRH Medical Director, Pharmacy Director	2016-2017	Protocol review, incorporated in EMR and education complete by 12/31/2017
1.6 Awareness/Prevention Education incorporated in to Power-Up 4 Fitness Program	Community Relations/ DARE Officer	2016,2017,2018	Pre and post test
1.7 Host Medication Take Back and promote take back boxes at Sheriff's Dept and Indian Lake	Community Relations/ Pharmacy/Law Enforcement	2016,2017,2018	Report amount of medications collected annually
1.8 Pursue possibility of placing medication drop box in MRH retail pharmacy to offer drop site within city limits.	MRH Pharmacy/ Foundation	2017	Implementation of box and tracking of collected medications annually

1.9 Partnership with Bellefontaine City Police Department and Pharmacies promoting disposal of unused and unwanted medications	Community Relations/Foundation BCPD	Ongoing	Count of flyer disbursed
1.10 Work with Coalition to research opportunities to bring in a consultant to assist with a community-wide plan for a comprehensive treatment program.	Coalition/ Foundation	2017	Findings of study

# **KEY FINDING #3: MENTAL HEALTH**

Data from the 2015 Logan County Community Needs Assessment survey shows that there is the need to address mental illness in Logan County to improve the overall health status of the community. For example, the survey showed that:

- Nearly 30% of the respondents (29.2%) reported that they had symptoms of depression for two or more weeks in the last year; in some communities the rate was as high as 36.3%.
- Nearly one in five adults (19.7%) said that their mental health prevented them from performing their usual daily activities.
- Among young adults, 4.8% said they had seriously considered committing suicide in the past year.
- Almost 20% of young adults (19.8%) said they use drinking to deal with stress; 41.6% said they use eating and 12.9% said they use smoking as stress relieving techniques.

# **IMPROVEMENT TARGETS**

PRIORITY #3 Improvement Targets – Mental Health			
GOAL – Equip and motivate Logan County residents to make healthier choices			
Measurable Objectives Data Source Frequency of			
(How we will know we are making progress)		Measurement	
1.1 Reduce the percentage of young adults that use	CHA Survey	2 voors	
drinking, eating or smoking to relieve stress by 2%.		3 years	
1.2 Reduce the percentage of young adults that	Crisis Hotline	Annually	
seriously consider suicide to 4.5% by 2018.	CHA Survey	3 years	

PRIORITY 3 Improvement Strategies – Mental Health GOAL – Equip and motivate Logan County residents to make healthier choices			
Strategies (What we will do to achieve our goals and objectives)	Lead (Who is responsible)	Timeline	Measurement
1.1 Partnership with OSU to institute tele- psychiatry services in MRH Emergency Department	MRH Medical Director, VP Patient Services, ED Director	2016 Implementation 2017, 2018 Ongoing Services	-Patient Volumes -Intervention # -CCI & Tele-psychiatry -Hospital Placement
1.2 MRH Internal Medicine (PCMH) Practice/Care Coordinator represent medical sector in Mental Health Suicide Coalition	MRHIM Practice Manager	2016 Ongoing	Participation
1.3 MRH Internal Med & Pediatric (PCMH) Behavioral/Mental Health Assessment of all patients with option of additional mental health services provide by Dr. Mason for total continuum of care.	MRHIM & MRH Peds Practice Managers	Ongoing	-Patient volumes by diagnosis -MH Service Volumes -Improvement outcomes
1.4 Implement Stress Manager/ Depression Education as a part Healthy Habit Healthy YOU initiative	Community Relations Health & Wellness/ Coalition	2016, 2017, 2018	-Touch points -Pre/Post Assessments
1.5 Pediatric Mental Health Medication Grant for indigent	MRH Peds Practice Manager/ Care Coordination/ Community Relations	ongoing	Application count # assisted

# **KEY FINDING #4:**

# **ACCESS/AWARENESS/RESOURCES**

Logan County has many organizations that provide a wide variety of services and programs designed to meet residents' health and social service needs. However, data from the 2015 Logan County Community Needs Assessment shows that many residents are not aware of all of the services and programs that they could benefit from. They also indicated they have not received important information that can help them make better lifestyle choices and/or seek appropriate care. For example, the assessment showed that:

- Nearly three quarters of the survey respondents (73.5%) never heard of the Healthy Habits, Healthy You campaign, a major community initiative designed to help residents of Logan County make healthier lifestyle choices; another 20% of residents heard about it but knew little or nothing about it.
- In focus groups that were conducted it was found that few of the participants knew about the federally qualified health center (Community Health and Wellness Partners of Logan County) that has locations in the West Liberty and Indian Lake communities. This center provides a full range of low cost health care services to Logan County residents.
- About one-third of respondents indicated they had never received information from providers regarding important health topics such as diet and eating habits (30.7%), physical activity or exercise (31.5%), quitting smoking (33.5%), drug and alcohol addiction (38.8%), and mental health issues (35.2%).
- During the community Call-To-Action, seventy (70) community partners shared concerns regarding the lack of knowledge and contact information for available resources throughout Logan County.

# **IMPROVEMENT TARGETS**

PRIORITY #4 Improvement Targets – Access/Awareness/Resources

GOAL – Effectively disseminate information about the community's health and social service programs to all Logan County residents

Measurable Objectives (How we will know we are making progress)	Data Source	Frequency of Measurement
1.1 Increase awareness/use among residents in at-risk Neighborhoods of Community Health and Wellness Partners of Logan County and MRH Physician Practice by 2018.	CHWP/ MRH Practices	Annually
1.2Increase awareness among residents and agencies of Logan County about services and community resources related to health and mental health.	Coalition CHA Survey	Annually 3 years
1.3 Increase access of transportation to available resources and services.	TLC CHA Survey	Annually 3 years
1.4 Decrease percentage of individuals traveling outside of Logan County for Urgent Care Services	CHA Survey	3 years

PRIORITY 4 Improvement Strategies – Access/Awareness/Resources GOAL – Effectively disseminate information about the community's health and social service programs to all Logan County residents and assess availability of needed resources				
Strategies	Lead	Timeline	Measurement	
(What we will do to achieve our goals and objectives)	(Who is responsible)			
1.1 Convenience Care Services Line as pilot for Urgent Care	VP Physician Practices/Administrative Team	1 Q 2016 Opening 2017 transition	Strategic Plan	
1.2 Construct and open Urgent Care Facility at 33/68 property	Administrative Team	2017	Strategic Plan	
1.3 Remodel & Renovation of Rehabilitation Center	Director of Rehabilitation Center/ Administrative Team	2016-2017	Strategic Plan	
1.4 Non-primary Care ED Referral Program	ED Director/ MRH Practices Managers/ CHWPLC	Ongoing	Annual	
1.5 Physician Recruitment for upcoming retirements	MRH Medical Director/ Compliance Officer	Ongoing	Strategic Plan	
1.6 Medical Scholarship & Loan Program	Foundation	Ongoing	Annual Participation	
1.7 Implement EMT/Paramedic Scholarship Program to address county shortage	Foundation	2016- ongoing	Annual Participation	
1.8 Representative of MRH to be an active partner in Coalition	Director of Care Coordination	2016, 2017, 2018	Participation	
1.9 MRH to participate in investigation and support of 211 system implementation; including funding partnership and updating all MRH information regularly	Coalition/ Foundation/ MRH Care Coordination, Marketing & Community Relations	2016 Coalition Investigation 2017 Plan & Implementation	Outcome – Annual CHA Survey- 3 yr	
1.10 Participation and support of Logan County Transportation Advisory Board	VP Community Relations/ Foundation	Ongoing	TAB- Annual CHA Survey-3 yr	
1.11 Senior Leadership Participation in Logan County Coalition Advisory Board – oversight/advise all Coalitions	VP Community Relations	Ongoing	Community Plan Outcomes-annual CHA Survey -3 yr	

# Other Needs Identified in the CHNA But Not Addressed in this Plan

Two other topics were identified by the Community Health Risk and Needs Assessment: Poverty and Transportation (Evening and Weekend). These areas are not addressed in Mary Rutan Hospital's Implementation Plan due to limited staff and financial resources and the need to allocate significant resources to the priority health needs identified. However, support will be given to community efforts in these areas through participation in the Logan County Coalition Advisory Board (CAB), Logan County Chamber of Commerce, Logan County Transportation Advisory Board and United Way of Logan County.

# **Board Approval**

An overview of the findings of the Logan County Health Risk and Community Needs Assessment (CHA), the Logan County Community Health Plan (CHIP) and the MRH Implementation Plan were presented to the Mary Rutan Hospital Board of Directors on Monday, October 26, 2015 for approval. The Board unanimously approved the documents as presented.