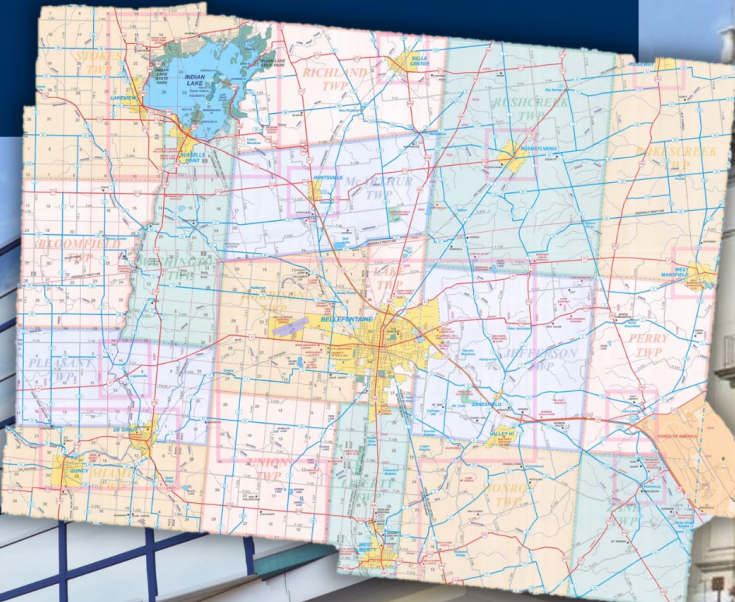




2020 - 2022

Mary Rutan Hospital Health Improvement Plan



Mary Rutan
HOSPITAL



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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 organizations to develop a county-wide Health Improvement Plan (CHIP) based on the 2020 Community Health Assessment (CHA). Members of the hospital team actively participated in the six community coalitions and a member of the hospital's senior leadership team serves on the county's 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 action steps that Mary Rutan Hospital will take to maintain and improve the health of Logan County.

COMMUNITY HEALTH NEEDS ASSESSMENT (CHA) AND COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)

Mary Rutan Hospital was a lead organization in facilitating and funding the community's fourth formal Community Health Needs Assessment; partnering with the Logan County Health District, Mental Health Drug and Alcohol Services Board of Logan & Champaign Counties, Community Health & Wellness Partners of Logan County, and United Way of Logan County. This collaboration allowed community partners to come together in a unified front to create a comprehensive assessment and plan to assist all agencies and organizations in fulfilling their mission and to impact the health, safety and well-being of the community and residents of Logan County.

In January of 2021, community members were publicly invited to review the findings of the needs 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 55 community leaders and residents while reviewing the findings of the CHA during the Community Call-To-Action held virtually on February 9, 2020. During this meeting community partners identified the areas of concern within Logan County and established priority areas of Mental Health, Substance Abuse, Housing & Homelessness, Workforce Development, and Healthy Living to prevent obesity/ chronic disease

and further defined action items for the community coalitions addressing each of these areas. In addition, specific strategies will be taken to address the concerns of “maltreatment of children” within mental health, substance abuse, nutrition and physical activity.

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.

Mary Rutan Hospital's Improvement Plan addresses each of the community health needs identified in the 2020 CHA and CHIP. A workgroup including the Medical Director, Vice President of Community Health/ Foundation COO, Vice President of Physician Integration, Director of Cardiovascular Services, Director of Education, Director of Pharmacy, Director of Respiratory Therapy, Pediatric Patient Center Medical Homes Clinic Manager, Chief Registered Dietician, Community Health Nurse, and the Community Health and Wellness Coordinator developed the Implementation Plan. The plan was reviewed and approved by Mary Rutan Hospital Senior Leadership to assure alignment with strategic planning and goals of the organization.



IMPLEMENTATION PLAN

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 Assessment (CHA) and Community Health Improvement Plan (CHIP) for Logan County and Mary Rutan Hospital Implementation Plan (HIP) are available to the public on the hospital's website at www.maryrutan.org. A printed copy and feedback of the CHA and CHIP may be requested or submitted at tammy.allison@maryrutan.org or by calling Mary Rutan Hospital Community Health Department at (937) 599-7003.

EVALUATION PLAN

The improvement plan will be used as a baseline for performance and used to guide the evaluation process and future strategic 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

ALIGNMENT WITH OHIO'S STATE HEALTH IMPROVEMENT PLAN (SHIP)

The State Health Improvement Plan (SHIP) is a tool to strengthen state and local efforts to improve health, well-being and economic vitality of Ohio.



Collaboration

between local health departments and tax exempt hospitals, and alignment between state and local entities, will allow for more effective and efficient health improvement activities. Alignment with the Ohio SHIP is required for the 2020-2022 period and every three years thereafter.

Hospitals and health departments must align with the following components of the 2020-2022 SHIP:

1. Identify and select at least one priority factor established in the SHIP: Community Conditions, Health Behaviors or Access to Care.
2. Identify and select at least one priority health outcome established in the SHIP: Mental Health and Addiction, Chronic Disease or Maternal and Infant Health.
3. Select at least one strategy for each selected priority factor and priority health outcome.
4. Whenever possible, identify priority populations for objectives and select strategies likely to reduce disparities and inequities.

(Refer to page 6, Figure 1.2)

MARY RUTAN HOSPITAL HEALTH IMPROVEMENT PLAN (HIP)

An internal workgroup reviewed the findings of the 2020 Logan County CHA and Ohio SHIP and were asked to select what they considered to be the highest priority issues, while meeting ODH requirements and SHIP alignment and 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 mostly mirrored those identified by community partners and were identified as:

1. **Mental Health**
2. **Substance Abuse**
3. **Obesity & Chronic Disease**
4. **Maltreatment of Children to be addressed through specific strategies within the 3 previous areas of priority.**

The workgroup then reviewed existing programs and services, rating what programs and services were working, needed modified, improved or discontinued. New programs, services, suggested process and policy changes 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.

OTHER NEEDS IDENTIFIED IN THE COMMUNITY HEALTH ASSESSMENT AND THE COMMUNITY CALL TO ACTION BUT NOT ADDRESSED IN THIS PLAN.

Two other areas of need were identified by the CHA and Call to Action: absence of affordable housing and workforce development.

These areas are not addressed in Mary Rutan Hospital's improvement plan due to limited staff and financial resources and the need to allocate significant resources to the priority health needs identified and in line with the mission of the organization. However, support will be given to community efforts in these areas through participation and support of the Logan County Coalition

Advisory Board (CAB), Logan County Chamber of Commerce, and United Way of Logan County.

ADOPTION

BOARD APPROVAL

An overview of the findings of the Logan County Health Risk and Needs Assessment (CHA) and the Mary Rutan Hospital Health Improvement Plan (HIP) were presented to the Mary Rutan Hospital Board of Directors on Monday, April 26, 2021 for approval. The Board unanimously approved the documents as presented.

Figure 1.2 SHIP Framework

Equity

Health equity is achieved when all people in a community have access to affordable, inclusive and quality infrastructure and services that, despite historical and contemporary injustices, allows them to reach their full health potential.

Priorities

The SHIP identifies three priority factors and three priority health outcomes that affect the overall health and well-being of children, families and adults of all ages.

What shapes our health and well-being?

Many factors, including these 3 SHIP priority factors*:

How will we know if health is improving in Ohio?

The SHIP is designed to track and improve these 3 SHIP priority health outcomes:

- Community conditions**
 - Housing affordability and quality
 - Poverty
 - K-12 student success
 - Adverse childhood experiences
- Health behaviors**
 - Tobacco/nicotine use
 - Nutrition
 - Physical activity
- Access to care**
 - Health insurance coverage
 - Local access to healthcare providers
 - Unmet need for mental health care

- Mental health and addiction**
 - Depression
 - Suicide
 - Youth drug use
 - Drug overdose deaths
- Chronic disease**
 - Heart disease
 - Diabetes
 - Childhood conditions (asthma, lead)
- Maternal and infant health**
 - Preterm births
 - Infant mortality
 - Maternal morbidity

- All Ohioans achieve their full health potential**
- Improved health status
 - Reduced premature death

Vision
Ohio is a model of health, well-being and economic vitality

Ohio—State Health Improvement Plan (SHIP)

Mary Rutan Hospital Alignment

Priority Factors/ Social Determinants of Health

1. Community Conditions

- **Adverse childhood experiences**
 - [CC7. Childhood abuse and neglect](#)
 - Parenting, mentorship and school-based prevention
 - Well-child check ups
 - Patient portal reminders
 - School prevention program

2. Health Behaviors

- **Tobacco/nicotine use**
 - [HB1. Adult smoking](#)
 - Pregnant women cessation class
 - [HB2. Youth tobacco/nicotine use](#)
 - Youth smoking & vaping cessation
 - Youth class alternative to suspension
- **Increase Physical Activity**
 - [HB6. Adult Physical Activity](#)
 - Promote benefits of walking
 - Promote Winter Walking program
 - Distribute/monitor use of Nature Rx

3. Access to Care

- **Unmet need for mental health care**
 - [AC5. Youth mental health care unmet need](#)
 - Genetic testing/counseling
 - Health and wellness grants
 - [AC4. Adult mental health care unmet need](#)
 - Healthy and wellness grants
 - Postpartum depression programming
 - Scheduled communication with mental health team; MRH, Coleman, TCN, CHWP
 - EMS Home visit program for at-risk

Priority Health Outcomes

1. Mental Health and Addiction

- **Reduce suicide deaths**
 - [MHA3. Youth suicide deaths](#)
 - [MHA4. Adult suicide deaths](#)
 - Provider recruitment, counseling & CNP health strategies
- **Reduce drug overdose deaths**
 - [MHA7. Unintentional drug overdose deaths](#)
 - Educate providers on opiate prescribing
 - Promote county medication drop boxes
 - Buprenorphine and Methadone added to formulary for OUD pain options
 - Identify patients with OUD
 - Research alternative pain mgmt. for surgery and ED patients
 - Track opiate prescriptions by month
 - Report average MME/day at discharge
 - Install additional med drop box
 - Research development of MAT in ED
 - MAT offered by MRH providers

2. Chronic Disease

- **Heart disease**
 - [CD1. Coronary heart disease](#)
 - [CD3. Hypertension](#)
- **Diabetes**
 - [CD4. Diabetes](#)
 - Research start up of DPP
 - Determine DPP patient referral
 - Provider recruitment—IM CDM
 - Collaboration to expand weight management and bariatric surgeries
 - Research library of “Rutan Resources”
 - Transition health blog to MRH website
 - [CDa. Physical Activity](#)
 - Monitor use of Nature Rx
 - [CDb. Tobacco/nicotine use](#)
 - Youth smoking/vaping cessation class
 - Youth class alternative to suspension

3. Maternal and Infant Health

- **Reduce Infant Mortality**
 - [MIH2. Infant Mortality](#)
 - Support LCHD with Newborn Visit program
- **Reduce maternal morbidity/mortality**
 - [MIH3. Severe maternal morbidity.](#)
 - Participation in the AIM program in partnership with ODH and OHA.

4. Cancer

- **Breast Cancer**
 - [Breast Cancer reduction](#)
 - Include prevention education in outreach setting. Evidenced-based programming
 - Research Oncology and breast care program.
- **Melanoma and other skin cancers**
 - [Skin Cancer reduction](#)
 - Include prevention education in outreach setting. Evidenced-based programming

COMMUNITY CONDITIONS



Adverse childhood experiences (ACEs)

What shapes our health and well-being?

Adverse childhood experiences (ACEs) are strongly linked to the development of a wide range of physical health, mental health and addiction problems, such as diabetes, depression, alcohol and other drug use and premature death. ACEs include a child's exposure to family dysfunction, violence in the home or neighborhood and living in a family with financial hardship. As the number of ACEs a child is exposed to increases, so does his or her risk for poor health outcomes.



Objectives

Mary Rutan Hospital will use the following objectives to monitor progress toward reducing ACEs in Logan County.

Indicator (source)		Baseline 2020	Short Term 2021	Intermediate 2022
CC7. Childhood abuse and neglect.	Number of reports of child abuse and/or neglect in Logan County. Source: LCDJFS	1300/yr	Monitor only	no target
Priority Populations				
Low income (household income below 200% PPL)				
Number of pediatric Managed Care patients receiving well-checks.		42%	51%	
Number of children in at-risk schools receiving evidenced-based education on ACEs.		0	0	
Featured Strategies		Target		
Includes		Lead		
Parenting, mentorship and school-based prevention.	• Improve the number of well-child check-ups through managed care plans	Report 12/31/2021	Report 12/31/2022	Peds—Tammy B. Outreach—Christie
	• Utilize patient portal to send reminders of well-child visits.	Implement 01/01/2022		Peds—Tammy B. Analytics—Nick W.
	• Research, develop and implement an evidenced-based school prevention program. Pilot to an at-risk school spring of 2022.	Pilot Active Parenting Class Mar 7—28/22	Implement 08/31/22	Outreach—Deb O. Peds—Tammy B. Peds—Erica R.

HEALTH BEHAVIORS



Tobacco/nicotine use

What shapes our health and well-being?

Tobacco use and secondhand smoke exposure contribute to many of Logan County's greatest health challenges, including cancer and heart disease among others. In recent years there has been a surge in e-cigarette use (vaping) among youth in our community and across the nation, raising concern about future addiction to nicotine and other drugs. Also a concern in Logan County is women who continue to use tobacco while pregnant.



Objectives

Mary Rutan Hospital will use the following objectives to monitor progress toward reducing tobacco and nicotine use among youth and pregnant women.

Indicator (source)		Baseline 2020	Short Term 2021	Intermediate 2022
HB2. Youth—smokeless tobacco/nicotine use	Number of youth grades 10th and 12th who indicate they've vaped tobacco, nicotine, or marijuana during the past 30 days. Source: MHDAS	6% - 10th grade 15% - 12th grade	Monitor only, no target 1 in 4 students use tobacco Of which 1/2 are athletes	
HB1. Adult smoking	Number of pregnant women at OBGYN enrolled in smoking cessation class.	Zero (0)	Is the cessation class being offered? Is it promoted anywhere?	
Priority Populations				
Pregnant women (same data as HB1 above)				
Featured Strategies		Target		
Includes		Lead		
Tailored tobacco cessation access. ▶	<ul style="list-style-type: none"> Explore need for YOUTH smoking/vaping cessation classes; N-O-T (Not on Tobacco) with MHDAS funding source. Explore evidenced-based cessation programming for pregnant women. 	Complete by 1/1/2022 ✓ March 14-18, 2022	Outreach—Deb O. Resp.—Brooxie C.	
School-based tobacco prevention. ▶	<ul style="list-style-type: none"> Explore interest with county schools and Family Court the implementation of INDEPTH; an alternative to suspension or citation. American Lung Association provided these evidenced-based programs. 	Complete by 1/1/2022 05/30/2021 ✓ Implemented Spring of 2021	Resp.—Brooxie C. OBGYN—Carla D. Outreach—Christie Outreach—Deb Resp.—Brooxie	

▶ indicates strategy is used in more than one focus area.

HEALTH BEHAVIORS

Physical activity



What shapes our health and well-being?

Physical activity contributes to many positive health outcomes, including prevention of diabetes, heart disease, hypertension, cancer and obesity. Exercise can also be an important part of chronic disease management for those living with these conditions. Active living supports mental health, brain health for older adults and academic achievement for youth.



Objectives

Mary Rufan Hospital will use the following objectives to monitor progress toward improving physical activity.

Indicator (source)		Baseline 2020	Short Term 2021	Intermediate 2022
HB6. Adult physical activity. Increase the number of adults who are participating the Winter Walking.		407	Monitor only, no target Not offered in 2021—COVID	201 participants 2,238 walking times
Featured Strategies		Target		
Includes		By year-end 2021		
Community fitness programs. ▲	• Additional promotion of the benefits of walking. • Additional promotion of the Winter Walking program	By 03/31/2022		
Exercise prescriptions ▲	• Distribute and monitor use of exercise prescriptions; Nature Rx, developed by the Healthy Living Coalition, with MRH providers.	Implemented by 04/01/2021 ✓ Evaluate use 02/01/2022 ✓		
			Outreach—Christie	Outreach—Christie Clinic Managers
				Lead

▲ indicates strategy is used in more than one focus area.

ACCESS TO CARE

Unmet needs for mental health care

What shapes our health and well-being?

Access to quality mental healthcare services is critical for maintaining mental health, managing mental illness, preventing and assisting with mental health crises and reducing premature death. Equal access to mental health care is also an important step toward achieving health equity for all Logan County residents.



Objectives

Mary Rutan Hospital will use the following objectives to monitor progress toward reducing unmet need for mental health care. There are no priority populations for these indicators.

	Indicator (source)	Baseline 2020	Short Term 2021	Intermediate 2022
AC5. Youth mental health care unmet need.	Suicide screening data—local schools. Source: MHDAS	283 screened 47 positive 14 suicidal ideation 7 suicide attempts	Monitor only	no target
AC4. Adult mental health care unmet need.	Mental Health Related Services and MRH Emergency Department Source: Logan County CHA—Table 1-2 (MRH, LCHD, TCN)	5769 Visits 1230 Patients	Monitor only	no target
Featured Strategies	Includes Target Lead			
Develop overall strategy to better align behavioral health services with community partners. (SP) ▶	<ul style="list-style-type: none"> Explore genetic testing/counseling for mental health treatment optimization. Assess, standardize and further develop postpartum depression programming and provide assistance to mothers. Establish regular schedule with Coleman, TCN, CHWP and MRH for coordinated communication and patient flow. <i>Wendy Roberts from Coleman and Chrystal Beatty in the ED try to talk by phone with each Julie Wilcox from TCN and Ashley Brewer, CHWP, every two weeks.</i> Fund Community Wellness grants focused on mental health. Pilot EMS Home Visit Program for at-risk, behavioral health, readmission individuals. Coordinate with MRH, Robinaugh and IL squad. (SP) 	12/31/2022	Clinics—Tom D. Behav. Health—Andrea	
▶ indicates strategy is used in more than one focus area.		By 12/31/2022	Peds.—Tammy B. OB/GYN—Carla D. FBC—Sandy N.	
		Implement by 12/31/2021 ✓	ED—Crystal D. CC—Jim S.	
		Fund by 12/31/2021 ✓ Fund by 12/31/2022	Foundation—T.Allison	
		Finalize by 12/31/2021 Postponed due to COVID To 12/31/2022	Com Health—T. Allison Foundation	

MENTAL HEALTH AND ADDICTION



Suicide Reduction

How will we know if our health is improving?

Fewer Logan County residents will die by suicide, disparities in the suicide rate will be eliminated and supports will be available for everyone in crises.



Objectives

Mary Rutan Hospital will use the following objectives to monitor progress toward reducing deaths by suicide. Priority groups are historically those most at-risk.

Indicator (source)		Baseline 2020	Short Term 2021	Intermediate 2022
MHA3. Youth suicide deaths	Number of deaths by suicide for youth ages 0-17. <small>Source: MHDAS, LCHD</small> Number of MRH Treatments for attempted suicide-youth ages, 0-17 <small>Source: MRH</small>	1 68	Monitor only, no target	
MHA4. Adult suicide deaths	Number of deaths by suicide for adults, ages 18+ <small>Source: MHDAS, LCHD</small> Number of MRH Treatments for attempted suicide for adults 18+ <small>Source: MRH</small>	4 168	Monitor only, no target 6	
Priority Populations				
Male, ages 18-49	Number of MRH Treatments for attempted suicide	63	Target	Lead
Featured Strategies				
Develop an overall strategy to better align behavior health services with community partners. (SP) <ul style="list-style-type: none"> • Provider recruitment, counseling and CNP health strategies. 				
		Report 12/31/2021	Clinics—Tom D. Med. Dir.—Hood Outreach—Tammy A.	
			** Ongoing	

MENTAL HEALTH AND ADDICTION



Drug overdose death reduction

How will we know if our health is improving?

Fewer Logan County residents will die from drug overdoses, disparities in the drug overdose rate will be eliminated and more individuals will be on the path to recovery from addiction.



Objectives

Mary Ruffan Hospital will use the following objectives to monitor progress toward reducing drug overdose deaths.

Indicator (source)	Baseline 2020	Short Term	Intermediate 2022
MHA7. Unintentional drug overdose deaths. Number of deaths due to unintentional drug overdose in Logan County. Source: LCHD Treatment for Drug Overdose source: MRH	12 (2 lived out of Co) 11= Fentanyl 515 F= 276 M= 226	Monitor only, no target	

Featured Strategies

Includes

Lead

Expansion of Pain Management Stewardship Program. (SP)

Educate physicians on evidenced-based practices on opiate prescribing. *Communication sent to providers regarding resources for managing patients with opiate use disorder.*

Pharm—Jessi PMSP task force

- Buprenorphine and Methadone added to formulary for pain management options with OUD.

Pharm—Jessi PMSP task force

- Implement pilot program to identify patients with Opiate Use Disorder in PAC. Program initiated and functioning as intended. Patients screened during PAC visit. Identified patients communicated to clinical pharmacy staff for multidisciplinary pain management plan development. Notes regarding plan entered into EMR and shared with providers.

Pharm—Jessi PMSP task force

- Research alternative pain management for surgery and ED patients.. Adult and pediatric pain order sets developed utilizing multimodal pain approach and alternative non-opiate pain management techniques. Order sets developed by pain management stewardship group and approved by several physician committees. Implementation into Meditech is underway.

Pharm—Jessi PMSP task force

- Tracking opiate prescriptions by month by MRH providers.

Pharm—Jessi PMSP task force

- Reporting average MME/day at discharge

Pharm—Jessi PMSP task force

- Additional drop box location at Retail Pharmacy

Pharm—Jessi Pharm.—Christy Outreach—Tammy A.

MENTAL HEALTH AND ADDICTION

Drug overdose death reduction

Continued...

Featured Strategies

Includes

Target

Lead

Expansion of Pain Management Stewardship Program. (SP)

- County medication drop box information added to discharge packets and make available at all clinics. List drop box locations on MRH website.

Outreach—Christie

Completed 03/15/2021
On website 01/28/2022

Develop an overall strategy to better align behavior health services with community partners. (SP)

- Research development of MAT program in the ED. (SP)
1/2022 Project was delayed due to COVID. A community partner meeting was held 12/2021 to confirm need, capacity, referral sources to assure continuum of care. (MHDAS, CHWP, TCN, Coleman, LCHD were in attendance) Implementation remains on target for 12/31/2022.

Nursing—Wendy R
ED—Mackey
ED—Adam
Outreach—Tammy A.

Development by 12/31/21
Implementation by 12/31/22

- Medically assisted treatment offered by MRH providers. (SP)

Outreach—Tammy A.
Clinics—Tom D.
Med Dir—Hood

5 new providers by
12/31/2022

CHRONIC DISEASE

Heart disease and diabetes



How will we know if our health is improving?

Fewer Logan County residents will develop type 2 diabetes or heart disease, disparities will be eliminated and all residents will have the opportunity to engage in healthy behaviors that prevent chronic disease.



Objectives

Mary Rutan Hospital will use the following objectives to monitor progress towards reducing heart disease and diabetes.

Indicator (source)	Baseline 2020	Short Term 2021	Intermediate 2022
CD1. Coronary heart disease/heart attacks Number of adults, ages 18 and older, treated for coronary heart Disease/heart attack. Source: MRH	845	Monitor only, no target	Monitor only, no target
CD3. Hypertension. Number of adults, ages 18 and older, treated for hypertension. Source: MRH	14,077	Monitor only, no target	Monitor only, no target
CD4. Diabetes. Number of adults, ages 18 and older, treated for diabetes. Source: MRH	5,899	Monitor only, no target	Monitor only, no target
CDa. Stroke Number of adults, ages 18 and older, treated for stroke. Source: MRH	602	Monitor only, no target	Monitor only, no target

Featured Strategies	Includes	Target	Lead
Process to refer pre-diabetic patients to Diabetes Pre-vention Program (DPP)	Research start up costs and feasibility of offering DPP. Explore others in the area offering the program. There have been 3 committee exploratory meetings, and 1 interview phone calls with DPP's throughout the state. Amy met with Nicole from ODH, who helps administer the program in the state.	Complete by 07/01/2021 ✓	Nutrition—Amy K.
Task force to determine patient referral process and implementation of DPP. The group has paused the project, due to Covid and staffing concerns. The committee decided to resume talks in June, 2022.		Assemble Task Force 12/31/2021 Develop plan by 01/01/2022 Implement by 01/01/2023	Nutrition—Amy K. CDM—Liz C. Outreach—Tammy A.

CHRONIC DISEASE

Heart disease and diabetes

Continued...

Featured Strategies	Includes	Target	Lead
Preventative care delivered through patient-centered medical homes	<ul style="list-style-type: none"> Provider recruitment for Internal Med PCMH model—Chronic Disease Management. 1/2022 Dr. Matthew Schilling was recruited 11/2021 to split between IM and Pediatrics. Planning and preparation for the new endocrinology service line occurred in 2021 with Ashlenn Naseaman, CNP. She began seeing patients 1/2022. 	Ongoing	Recruit—Tammy G Med Dir—Hood Clinics—Tom D.
Healthy behavior support delivered through technology.	<ul style="list-style-type: none"> Transition Nutrition & Wellness blog from Healthy Habits website to MRH as a blog, then push on social media. Research the cost and program for a library of MRH “Ted Talks,” “Mary Moments,” “Rutan Resources.” 	Complete 05/01/2021 ✓	Outreach—Christie Nutrition—Amy K.
Expansion of services	<ul style="list-style-type: none"> Explore collaboration with OSU to expand weight management and bariatric surgical services 	Broad Range Completion by 07/31/21 ✓	Outreach—Christie Com Health—Tammy A.
Exercise prescriptions ▲	<ul style="list-style-type: none"> Distribute and monitor use of exercise prescriptions; Nature Rx, developed by the Healthy Living Coalition, with MRH providers. 	Complete by 04/01/2021 ✓ Evaluate use 10/01/2021	Cardio—Mike H. Senior Leadership
Tobacco/nicotine use reduction strategies. ▲	<ul style="list-style-type: none"> Explore need for YOUTH smoking/vaping cessation classes; NOT (Not on Tobacco) with MHDAS funding source. Explore interest with county schools and Family Court the implementation of INDEPTH; an alternative to suspension or citation. American Lung Association provided these evidenced-based programs. 	Complete by 01/01/2022 Completed 03/2021 ✓	Outreach—Christie Outreach—Deb Resp.—Brooxie C.

▲ indicates strategy is used in more than one focus area.

MATERNAL AND INFANT HEALTH

Infant mortality & maternal morbidity/mortality

How will we know if our health is improving?

More babies born in Logan County will be healthy, at full-term and will celebrate their first birthdays. More women of child-bearing age will have healthy pregnancies and safe deliveries in Logan County.



Objectives

Mary Rutan Hospital will use the following objectives to monitor progress towards improvement of infant and maternal health.

Indicator (source)	Baseline 2020	Short Term 2021	Intermediate 2022
MIH2. Infant mortality Five-year infant mortality rate for Logan County	2015-2019 5 - 6 per 1,000 live births	Monitor only.	Monitor only.
MIH3. Severe maternal morbidity/mortality (SMM) Three-year mortality rate for pregnant women in Ohio. Three-year mortality rate for pregnant women in Logan County	2015-2017 18.8 per 100,000 live births 0 = Logan Co.	Monitor only.	Monitor only.

Featured Strategies	Target	Lead
<p>Family, social and educational support programs.</p> <ul style="list-style-type: none"> Partner with LCHD in support of the Newborn Visit program to address infant safe sleep and maternal depression. 	Supply 100 packs of diapers annually. ✓	Fdn/Corn Health—Tammy A.
<p>Safety and quality improvement.</p> <ul style="list-style-type: none"> FBC participation in Alliance for Innovation on Maternal Health Program (AIM) with ODH and OHA. 1/2022 Currently Wave 2 of the ODH/OHA Maternal hypertension Safety Quality Improvement Project is underway which includes education, follow-up on case reviews, policy/protocol development, etc. This project started August 2021 and is ongoing. 	Ongoing	FBC—Sandy N. OBGYN Providers
<ul style="list-style-type: none"> Implement evidenced-based programs to improve maternal health and prevent deaths, while addressing health disparities, improving access and expanding services. Current focus—Postpartum Hemorrhage and Maternal Hypertension 1/2022 The post-partum hemorrhage AIM bundle is close to completion. Nurse documentation and training for quantitative blood loss is close to completion. 	Ongoing	FBC—Sandy N. OBGYN Providers

Severe maternal morbidity (SMM) has risen 75% over the past decade and affects more than 52,000 women annually in the United States. SMMs are physical and psychological conditions, relating directly or indirectly to pregnancy, that negatively impact a woman's health. SMMs occur 100 times more frequently than maternal deaths. (Callaghan et al 2008, 2012)

CANCER



Breast cancer and melanoma (& other skin cancers)

How will we know if our health is improving?

Fewer Logan County residents will develop breast cancer and various types of skin cancer and all residents will have the opportunity to engage in healthy behaviors that prevent cancer.



Objectives

Mary Rutan Hospital will use the following objectives to monitor progress towards reducing cancer in Logan County.

Indicator (source)	Baseline	Short Term 2021	Intermediate 2022
<p>C1. Breast cancer</p> <p>Number of individuals diagnosed with breast cancer.</p> <p>Per 2015 CHA 54 Per 2018 CHA 67</p> <p>According to the ODH for the years 2013-2017 combined, there were 176 new cases of breast cancer and 33 died in Logan County.</p> <p>Number of individuals treated for breast cancer. 2020 75</p>		Monitor only, no target	
<p>C2. Melanoma and other skin cancers</p> <p>Number of individuals diagnosed with skin cancer.</p> <p>Per 2015 CHA 114 Per 2018 CHA 100</p> <p>Number of individuals treated for skin cancer. 2020 15</p>			
Featured Strategies	Includes		
<p>Increase awareness and preventive measures for certain types of cancer.</p> <p>Improved access to cancer care. (SP)</p>	<ul style="list-style-type: none"> • Include evidenced-based prevention education in outreach settings. • 2019—Community Health nurse screened 338 individuals at 9 different locations. • Explore the addition of Medical Oncology Services through a clinical partnership. 		
	Target	Lead	
	Implement by 07/01/2021 For Skin Cancer Implement by 10/01/2021 For Breast Cancer County Assist. Living facilities received prevention education in 2021	Outreach—Deb O. Admin—Chad R. Senior Leadership	
	Update status 12/31/2021 Work is ongoing 12/31/2021		



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