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**2016**  
**COMMUNITY HEALTH IMPROVEMENT PLAN**

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## **COMMUNITY HEALTH NEEDS ASSESSMENT**

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The top three community health needs were:

1. Increased access to primary care providers
2. Improved community wellness related to preventative healthcare, management of chronic disease, promotion of healthy food options and exercise
3. Services and support to meet the needs of the population over 65 and individuals with disabilities

### **Next Steps**

Over the next several months PVHC, in collaboration with community partners, will develop an implementation plan for each of the priority health needs. The implementation plan will be published in a separate report.

## Community Health Improvement Plan

### **Priority #1 Team**

Increased access to primary care providers

Mike Gilmore – PVHC Clinic – Team Leader  
Dr. Sarah Durney – PVHC Physician  
Nicole Ostermiller – PVHC Clinic  
Beth Gilb – PVHC Board & Hospital District Board  
Terri Faxon – Community Member  
Scott Shopa – PVHC Plant Operations

### **Priority #2 Team**

Improved community wellness related to preventative healthcare, management of chronic disease, promotion of healthy food options and exercise

Rachel Williams – Prevention Management Organization of Wyoming, Park County Office  
Steve Miller – Prevention Management Organization of Wyoming, Park County Office  
John Asher, PT – PVHC Rehab Services  
Colette Behrent – Heritage Health Center  
Tina Braet-Thomas, RD – PVHC Nutrition Services  
Lisa Horton, RN – Health Net – Veterans Choice Program  
Dr. Mike Tracy – 307 Health  
Charlotte Deming – Wyoming Dept. of Health Workforce Services

### **Priority #3 Team**

Services and support to meet the needs of the population over 65 and individuals with disabilities

Trisha Shorb, LCSW – PVHC Social Services – Team Leader  
Cathy Florian – Powell Senior Center  
Cathy Aardema – Wyoming Services for Independent Living  
Mary Derry – Powell Senior Center  
Pat Gehrman – Powell Lifeline  
Jason Gedney, RN – Powell Valley Care Center

## Priority 1: Access to primary care providers

Goal: Increase access for patients to primary care providers

**Objective 1:1** By June 2019, increase the percentage of patients who identify that when they contact a provider at Powell Valley Clinic to get an appointment for care needed right away to at or above the national average for comparable facilities. Baseline (NRC - June 2015 – June 2016) = 62.7. NRC average for this time period was 66.7.

**Strategy 1:1:1** Increase the daily average number of patients seen by PVHC primary care providers from 13 per day to 15 per day by the end of 2017.

- Utilize medical assistants to free up physicians' time to see patients and improve clinic efficiency.
- Encourage community members to take advantage of seeing PA providers when their primary physician does not have openings.

**Strategy 1:1:2** In collaboration with other local providers, increase awareness of the physician assistants' and nurse practitioners' role in primary care and patient access at PVHC.

- Coordinate an education campaign for PVHC staff focused on the scope of practice for PA and NP providers and their partnership with physicians.
- Host presentations in the community featuring local providers discussing the role of physician assistants and nurse practitioners. Presentation locations may include community clubs, senior living facilities, and on the PVHC campus.

**Strategy 1:1:3** Maintain primary care at Powell Valley Clinic at 8 providers.

- Recruit 2 additional primary care providers by the end of 2017.

## Priority 2A: Preventative Health Care

Goal: Improve community wellness related to preventative health care - smoking

**Objective 2:1** By June 2019, increase utilization of the Wyoming Quit Tobacco Program by Park County community members wanting to quit smoking, from 104 (2015/2016) to 150, and in Big Horn County from 54 to 85.

**Strategy 2:1:1** Increase the number of referrals to the Wyoming Quit Tobacco program by local providers.

- Work with local providers at PVHC, 307 Health, Heritage Health, Public Health, local dentists, and Big Horn Co. providers to enhance community access to Wyoming Tobacco Program's "quit kits" via the providers' clinics.
- Work with the local Prevention Management Organization to enhance awareness of the Wyoming Quit Tobacco Program and availability of the "quit kits" within the community.

**Collaborating Organizations:** Prevention Management Organization of Wyoming, PVHC, 307 Health, Heritage Health Center, Park County Public Health, Wyoming Dept. of Workforce Svcs., Health Net - Veteran's Choice Program

## Priority 2B: Management of Chronic Disease

Goal: Improve community wellness related to diabetes

**Objective 2:2** Increase the number of people in our community managing diabetes, who work with a local diabetic educator to better manage their diabetes. Goal is to increase this number to 60 by the end of 2017. In 2015 we worked with 32 patients and as of Sept. 1, 2016, we have worked with 36 patients.

**Strategy 2:2:1** Promote diabetes education program within the community.

- Share information about our diabetic education staff (Jill O'Donnell, Tina Braet-Thomas) with the community.
- Host educational presentations on diabetes prevention and management.

**Strategy 2:2:2** Coordinate community education during National Diabetes Awareness Month (November).

- Offer a special promotion on A1C lab wellness tests
- Utilize diabetes education funds via the Powell Medical Foundation to promote an educational campaign on diabetes, in collaboration with other community health care providers.

**Collaborating Organizations:** Prevention Management Organization of Wyoming, PVHC, 307 Health, Heritage Health Center, Park County Public Health, Wyoming Dept. of Workforce Svcs., Health Net - Veteran's Choice Program

## Priority 2C: Diet and Exercise

Goal: Improve community wellness related to healthy food options, and exercise

- Objective 2:3** Increase community awareness of healthy food choices/healthy cooking, and the importance of regular exercise. Will measure participants' perceptions of the benefit of community educational presentations on diet and exercise for their health, by the end of 2017.
- Strategy 2:3:1** Host educational presentations/demonstrations for the community on healthy food choices and healthy meal preparation by PVHC's registered dietitian.
- Strategy 2:3:2** Host educational presentations for the community on the importance of regular cardiovascular exercise.
- Strategy 2:3:3** Host demonstrations for the community on safe and effective strengthening exercises.
- Strategy 2:3:4** Continue to collaborate with community partners in seeking ways to raise awareness about the importance of healthy food choices, and regular exercise.

**Collaborating Organizations:** Prevention Management Organization of Wyoming, PVHC, 307 Health, Heritage Health Center, Park County Public Health, Wyoming Dept. of Workforce Svcs. Health Net - Veteran's Choice Program

## Priority 3: Services & Support for Seniors and People with Disabilities

Goal: Enhance awareness of services and support for people over 65 and people with disabilities

**Objective 1:1** Increase awareness of local care giver support group, advance directives, and educational resources within the community among seniors. Increase new participants in the care giver support group to 2 new participants by the end of 2017. Identify the current awareness of advance directives and educational resources by local residents of the Rocky Mountain Manor and participants at senior centers and form an established baseline, targeting a 50% increase from the baseline by June 2019.

**Strategy 1:1:1** Increase community awareness of local care giver support group.

- Promote the support group through various means within PVHC and the community.
- Deliver care giver support group brochures to the Rocky Mountain Manor, Powell Senior Center, and Big Horn Enterprises.
- Deliver care giver support group brochures to local mental health professionals, local providers, and Park County Public Health staff.

**Strategy 1:1:2** Increase awareness of advance directives within the community.

- Coordinate presentations on advance directives within the community. Look to partner with PVCE in promoting and presenting the topic of advance directives.
- Share information on advance directives on PVHC website and Facebook page. Encourage other organizations to share the information via their websites and social media resources.
- Conduct a community clinic on completing advance directives, specifically for the local senior centers, Rocky Mountain Manor, and Heartland Assisted Living. Will include information on 5 Wishes and POLST.

**Strategy 1:1:3** Enhance awareness of available care giver educational resources within the community.

- Promote the Park County Resource Guide.
- Share information with the community on adaptive equipment resources.
- Sponsor and promote educational presentations on aging and disability services within the community.

**Collaborating Organizations:** Powell Senior Center, PVHC, Wyoming Services for Independent Living, Rocky Mountain Manor, Powell Lifeline





If you have questions or would like to discuss the 2016 community health needs assessment or 2016 community health improvement plan, we welcome you to please contact us.

Thank you!

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