

# St. Claire Regional Medical Center

## **Community Health Needs Assessment 2013**

*Completed between May 2012 and May 2013*

*Approved by SCR Board of Directors*

*May 22, 2013*

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[www.st-claire.org](http://www.st-claire.org)

## Introduction

As a committed community resource in northeastern Kentucky, St. Claire Regional Medical Center is **dedicated to our mission to proclaim God's goodness through a healing ministry to the people of eastern Kentucky**. Our mission remains the same after five decades of care, and we are driven to improve the lives of the people in the region. We constantly strive to reach this goal by making healthcare more accessible and convenient, while providing critical services. The creation of family medicine clinics in five surrounding rural counties, and the addition of women's imaging services serve as evidence of our growth. As this year marks the 50<sup>th</sup> anniversary for St. Claire Regional Medical Center, we celebrate our continual growth, and remain committed to providing exceptional healthcare to the people of our region.

Our mission and values have been enhanced through community benefit programs, and those activities have centered on education, collaboration and improving the health and well-being of the communities that we serve. The education and development of health professionals has been one of our primary focus areas for community benefit, because we believe that their training is vital to improving community health. Another target area is our engagement in community support and partnerships. This engagement is realized through participation in health fairs and screenings, providing support groups, as well as coalition building initiatives.

A leading example of our focus on coalition building efforts is through the creation of the Gateway Wellness Coalition. **This coalition was formed in 2011 by leaders at St. Claire Regional Medical Center (SCR), Morehead State University (MSU) and the Gateway District Health Department (GDHD) to conduct an extensive community health needs assessment in four of the Gateway area counties (Bath, Menifee, Morgan and Rowan).** (*See Appendix C*) Our coalition leaders utilized the Mobilizing for Action through Planning and Partnerships (MAPP) assessment tool to guide us through the Community Health Needs Assessment process (CHNA). The MAPP toolkit provided our coalition with a framework for assembling organizations, groups and other key stakeholders that comprise the local public health system (*See Appendix E*) to create and implement a community health improvement plan that targets services and education programs.

This comprehensive process is critical for our leaders, and the data-driven evidence it has produced has increased our understanding of the complex healthcare needs and concerns of our communities. It has also provided our leadership with the knowledge necessary to implement successful strategies to address the identified needs. Beyond increasing our own understanding and knowledge of the issues, the community needs assessment has strengthened community partnerships with many organizations.

Often times, the importance of collaboration and coalition-building can be overlooked. But this process has fostered better communication and relationships in our communities. In accordance with the Internal Revenue Code (IRC) requirements set forth in the Patient Protection and Affordable Care Act (ACA), the assessment process must be conducted every three years. However, our leaders' vision is that our assessments will be ongoing, and we will constantly engage in data renewal and strive for improvement. Most of all, this ongoing process is intricately linked with our mission that has guided us for the past 50 years.

## **Our Values**

Dignity – We treat each person with courtesy and respect

Compassion – We serve with heartfelt care and concern

Excellence – We provide care with sensitivity and professionalism

Commitment – We are dedicated to quality, integrity, and responsible use of our resources

Collaboration – We cultivate a spirit of cooperation and teamwork

## **Philosophy**

The philosophy of St. Claire Regional Medical Center, which flows from the conviction that God is the giver of life, is expressed through the hearts and hands of those who minister at St. Claire Regional Medical Center.

*We believe that life is a sacred gift from God.*

Every facet of human life from conception to natural death is to be valued. Quality service and loving care are provided in support of life and death.

*We believe that the needs of the whole person, physical, spiritual and psychosocial, are to be responded to according to professional standards and justice.*

Quality services are rendered in a professional, compassionate manner with respect for the dignity of all. Sensitivity and support for the total needs of the person are integral parts of the system of care. Support for the poor and disadvantaged is pursued in all aspects of the operation of the Medical Center.

*We believe that the task entrusted to us brings responsibilities to share and develop.*

Technological resources and knowledge are applied and shared to promote health. Opportunities for growth through education and research are promoted. Personal and technological resources are used in an efficient manner for the benefit of all.

## **Defining the Community Served**

St. Claire Regional Medical Center's service region is comprised of 11 counties. The Gateway Area Development District includes the majority of SCR's primary service counties (approximately 75 percent of SCR's patient population), including Rowan County, where SCR is located. These are also the counties served by the Gateway District Health Department. For these reasons, the Gateway Wellness Coalition decided to focus its assessment efforts on the Gateway ADD counties of Bath, Menifee, Morgan and Rowan.

## **Input Representing the Broad Interests of the Community**

### **Gateway Wellness Coalition Local Public Health System Partners**

St. Claire Regional Medical Center

- Cave Run Surgical Specialists
- Morehead Medical Specialists
- St. Claire Regional Outpatient Center
- St. Claire Regional Family Medicine
- St. Claire Regional HomeCare, Hospice and Palliative Care
- St. Claire Regional Family Medical Supply

Morehead-Rowan County Chamber of Commerce

Elected Officials

Rowan County School District

Maysville Community and Technical College

Morehead & Rowan County Economic Development Council (EDC)

Physicians

Pharmacists

Optometrists

Dentists

Pathways Community Mental Health Center

Veterans Clinic

People's Clinic - Free Clinic

Morehead State University

Rowan UNITE

University of Kentucky

Morehead Police Department

Emergency Medical Services

Faith-Based Organizations

Employers

Urban Planners

Parks and Recreation

Morehead Fire/ Rescue

Gateway District Health Department

New Hope Free Clinic

County Level Steering Committees

## **Collaboration - Strategic Planning**

### ***Key Stakeholders***

#### **St. Claire Regional Medical Center**

St. Claire Regional Medical Center is a medical hub serving 11 counties located in the northeastern Kentucky city of Morehead. Founded on July 1, 1963, St. Claire Medical Center was created through the efforts of many people in the community, led by Dr. Louise Caudill.

- The largest rural hospital in northeastern Kentucky
- 159-bed regional referral center
- Sponsored by the Sisters of Notre Dame in Covington, Kentucky
- Over 100 physicians and surgeons represent 31 medical and surgical specialties
- Nearly 1,400 employees
- Second-largest employer in the region.
- An established training site for the University of Kentucky College of Medicine's physician residency programs
- 11 county service region serving over 160,000 in Bath, Carter, Elliott, Fleming, Lewis, Magoffin, Menifee, Montgomery, Morgan, Rowan & Wolfe counties
- Reaching our communities with five family medicine clinics located in Frenchburg, Morehead, Olive Hill, Owingsville, and Sandy Hook

In addition to providing services at the Medical Center's main campus in Morehead, St. Claire Regional's operations consist of a St. Claire Regional Outpatient Center, Cave Run Surgical Specialists, Morehead Medical Specialists, five comprehensive family medicine clinics, a regional telemedicine system, and an eight-county home care service region comprised of home health, hospice & palliative care, and home medical equipment. Additionally, St. Claire Regional partners with the University of Kentucky Medical Center to offer services through the Kentucky Clinic Morehead Cancer Treatment Center, and the UK Women's Center. St. Claire Regional also serves as a home for the University of Kentucky's Rural Physician Leadership Program, a unique program designed to train the next generation of medical students for the region. Last year, St. Claire Regional provided care for the region with nearly half a million patient encounters, and reported net revenues in excess of \$130 million.

SCR Representatives on the Gateway Wellness Coalition Executive Committee:

- Mark J. Neff, President/CEO
- Tom Lewis, St. Claire Foundation Executive Director
- Valerie Campbell, Director of Marketing and Public Relations
- Matt Watts, Coordinator of Marketing and Public Relations
- Sister Marge Mouch, Administrative Director of Mission Integration
- Tammy Jenkins, Manager, Grants and Contracts
- David Gross, Northeast Area Health Education Center Director

## **Gateway District Health Department**

The Gateway District Health Department exists to protect people's health and well being. Through its programs and services, the GDHD seeks to prevent injury and illness, promote good health practices, keep the environment safe and clean, and help area residents enjoy a long, high quality, and healthy life. The GDHD offers a number of important public health services at each of its health center locations in Bath, Menifee, Morgan and Rowan Counties.

Services for Infant and Children's Services include:

Physicals and Development Assessments (no sports physicals)  
Women, Infants, and Children Nutrition Services (WIC)  
Healthy Start  
Immunization  
Fluoride  
Lead Screening  
Infectious Disease  
School Health Units

In terms of Adult Services, the GDHD's offerings include:

Family planning  
First steps  
Cancer screening  
Screening mammography referral  
Breast cancer program  
Diabetes services  
Physical activity program  
Prenatal services  
Preconceptional risk assessment  
Counseling, preparedness planning and readiness assessment  
Tobacco Education Programs  
Immunization  
Health Education

Members who serve on the Gateway Wellness Coalition Executive Committee:

- Jahna Lane, Director of Nursing

## **Morehead State University**

Morehead State University has been an active partner with the Gateway Wellness Coalition, particularly through the auspices of the Center for Regional Engagement (CRE). The center sees itself as a threshold into the institution for external agencies (i.e. individual residents, nonprofit, governmental, quasi-governmental agencies, and private industry) to collaborate and partner with MSU. At the same time, we see ourselves as an informational portal for our internal constituents (i.e. students, faculty, and staff) to identify regional needs and provide services, resources and partner with external agencies to help improve the quality of life throughout MSU's service region related to community building, economic/entrepreneurial development, education, and health and wellness.

- 141 undergraduate degree programs
- 71 graduate degree programs
- Master's degree for physician assistants, social workers, and a cooperative doctoral program, in partnership with the University of Kentucky
- Doctoral degree in Education
- SACS accredited
- Center for Health Education and Research
- Recognized by US News and World Report as one of the top public universities in the South in the 2012 edition of "America's Best Colleges"
- Driven by their goal to become the number one public university in the South

Members who serve on the Gateway Wellness Coalition Executive Committee:

- J. Marshall, Ed.D. Executive Director for MSU's Center for Regional Engagement
- Blake Bedingfield, MPA student and Administrative Fellow for St. Claire Regional Medical Center
- Lucy Mays, DNP, APRN, FNP-BC, CNE, Coordinator of ADNPs

*(See Appendix G for a complete list of Gateway Wellness Coalition Executive Committee members)*

## **Executive Summary**

### ***Requirements for the Community Health Needs Assessment***

#### **The assessment must:**

- Take into account input from persons who represent the broad interests of the community served by the hospital, including those with special knowledge of, or expertise in public health
- Be made widely available to the public
- Be completed every three years with the first being completed no later than fiscal year 2012

#### **The assessment may:**

- Be based on information collected by other organizations, such as public health agencies or nonprofit organizations
- Be conducted in collaboration with other organizations, including related organizations, other hospitals, and state and local agencies, such as public health departments

\*Source: Kentucky Hospital Association, Community Health Needs Assessment Toolkit

To address the provisions set forth in the Affordable Care Act (ACA), St. Claire Regional Medical Center conducted a Community Health Needs Assessment.

#### **Our process:**

-Formed the Gateway Wellness Coalition through existing partnerships to efficiently meet the needs of the assessment process.

-Established Executive Committee.

-Produced the Community Health Status Report for each of the counties, providing a snapshot of what our communities look like. *(See Appendix A)*

-Established Steering Committees in each of the counties. *(See Appendix G)*

-Created and distributed a Community Wellness and Quality of Life Assessment, a survey instrument used to measure the major strengths and themes of the communities. *(See Appendix B)*

-Conducted Local Public Health System 'Clicker' Assessments, an exhaustive survey instrument used to measure constituents' perceptions and understanding of the local public health system. *(See Appendix A)*

-Combined the efforts of the Gateway Wellness Coalition's Executive and Steering Committees. These committees reconvened to review existing data reports, identify crucial health needs, and create goals and implementation strategies to address the most important health issues for each of the counties.

In terms of availability, access and quality, these areas have been identified by the community as critically important. These areas of emphasis are:

- Community Obesity with Emphasis on Childhood Obesity
- Access to Health/Dental Care for those in Poverty and the Uninsured
- Drug Addiction/Prescription Drug Abuse/Teen Drug Abuse
- Enhanced Walkability/Transportation Primarily in Remote Areas
- Tobacco Use and Cessation
- Elder Care Services

In our continual efforts to improve the health of our communities, the results of the Community Health Needs Assessment will be shared with as many members of the community as possible. Meetings with key stakeholders, including our Gateway Wellness Coalition Steering Committees, Chambers of Commerce, various business leaders, and other community members will continue to meet monthly, and the report will be distributed at those functions. The CHNA report will be available on the hospital website (st-claire.org) and paper copies will be offered at each of the following locations: Marketing, SCR Foundation, and Administration. In addition, links to the Community Wellness Assessment survey – an essential assessment tool – will be maintained, and can be found on the website. (*See Appendices A and B*)

## **Assessing the Community's Health Needs**

To better understand the health needs and concerns of our communities, the collection of primary and secondary data was essential to our process. After forming the Gateway Wellness Coalition to raise community awareness of the Community Health Needs Assessment process, we conducted health assessments utilizing the Mobilizing for Action through Planning and Partnerships (MAPP) assessment tool. The MAPP tool provides the framework for assembling organizations, groups and individuals that comprise the local public health system to create and implement a community health improvement plan that targets services and education programs. We also consulted the Catholic Health Association's (CHA) *Assessing and Addressing Community Health Needs* (March 2011) workbook as a guide for the methods that we implemented.

## **Community Health Status Report**

The first step in conducting our Community Health Needs Assessment was to identify secondary sources relevant to the health needs of each of the four Gateway Wellness Coalition's designated target counties. After identifying the secondary data, our team of researchers created a customized core indicator list representative of: demographic and socioeconomic statuses, health resources availability, health outcomes, and health rankings for the four counties. The core indicator list aligned with the Catholic Health Association's recommendations found in their workbook's *Assessing and Addressing Community Health Needs* fifth chapter - *Planning for Community Benefits*.

Our community health status report provides a snapshot of each of our counties as well as answers to critical questions:

- How healthy are our residents?
- What does the health status of our community look like?

The final data reports included secondary data collected from the following sources:

Appalachian Regional Commission  
Bureau of Labor Statistics  
Bureau of Economic Analysis  
CDC – National Center for Health Statistics  
Community & Economic Development Initiative of Kentucky (CEDIK)  
Countyhealthrankings.org  
Kentucky Institute of Medicine- The Health of Kentucky: A County Assessment  
Kids Count Data Center  
St. Claire Regional Medical Staff Development Plan  
U.S. Census Bureau – American Community Survey  
U.S. Census Bureau  
U.S. Department of Health and Human Services Community Health Status Indicators Report

Our next assessment utilized different survey instruments to measure the major strengths and themes of the communities. Primary data was also collected at our county level “Clicker Assessments” of the local public health system. The National Public Health Performance Standards Program (NPHPSP) guided this portion of the assessment process. The purpose of the assessments was to better understand how our communities perceive of our local public health systems.

The first assessment for Rowan County was hosted in the Center for Health, Education and Research (CHER) on March 30, 2012. Individuals representing the local public health system (*See chart in Appendix E*) were invited, and there were 58 participants at the eight-hour event. Questions from the NPHPSP were utilized at the event, and our participants provided answers centered on the 10 essentials for public health. (*See results in Appendix A*)

The “Clicker Assessment” for Bath County was hosted at the Bath County Cooperative Extension Office on October 17, 2012. Individuals representing the local public health system (*See chart in Appendix E*) were invited, and there were 31 participants at the eight-hour event. Questions from the NPHPSP were utilized at the event, and our participants provided answers centered on the 10 essentials for public health. (*See results in Appendix A*)

The “Clicker Assessment” for Menifee County was hosted in the Clark Energy Building Community Room on February 21, 2013. Individuals representing the local public health system (*See chart in Appendix E*) were invited, and there were 25 participants at the eight-hour event. Questions from the NPHPSP were utilized at the event, and our participants provided answers centered on the 10 essentials for public health. (*See results in Appendix A*)

To generate additional primary data, our coalition created a data collection and analysis subcommittee, which included Dr. Mattie Burton, Matthew Watts (SCR Marketing) and Blake Bedingfield (Morehead State University MPA student/SCR Fellow). This committee created county-specific data reports, unique to each county, providing a critical snapshot of the communities under study. (*See Appendix A*) Part of

the data collection process included the creation of a Community Wellness Assessment Survey (*See Appendix B*) to sample large numbers of community constituents. This survey featured two parts, one focused on community need, and the other on quality of life. The community need portion focused on the three most critical health problems, as well as availability, access, and quality considerations, and three areas most important to making the community healthier. The Quality of Life section asked respondents to rate their community on a scale of one (least positive) to five (most positive), including questions like “Is there economic opportunity in your county?”

This original survey is an efficient and effective assessment instrument, providing firsthand knowledge of our communities from key stakeholders and other community members. Our survey is readily available online and can be found on St. Claire Regional Medical Center’s webpage. The survey has also been administered at a number of community steering committee meetings, ‘Clicker Assessments’ of the local public health system, Chamber of Commerce meetings, and other community events.

## **Additional Steps**

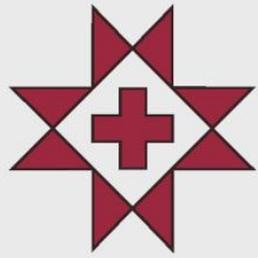
The Gateway Wellness Coalition Executive Committee formed Steering Committees in each of the counties to serve as focus groups to address critical health issues and identify common community themes and strengths (*See lists of County Steering Committee members in Appendix G*). Each of the county-level Steering Committees are vital to the on-going efforts of the community needs assessment process. Our Executive Committee shared the Community Health Status Report, as well as an overview of the Gateway Wellness Coalition purpose and structure (*See Appendix D*), in meetings with the Steering Committees. Each Steering Committee was organized to identify answers to questions including:

- What is important to our community?
- How is quality of life perceived in our community?
- What assets do we have that can be used to improve community health?

Our next assessment combined the efforts of the Gateway Wellness Coalition’s Executive and Steering Committees. The Executive Committee met for an extended session in November to review the primary and secondary data reports. In subsequent meetings, the Executive and Steering Committees identified the three or four most critical health issues in each county to focus on over the next three years.

### **The assessments considered the following questions:**

- What is occurring or might occur that affects the health of our community or the local public health system?
- What specific threats or opportunities are generated by these occurrences?



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## **Implementation Strategies**

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## Prioritizing Area Needs and Implementation Strategies

Over the final five months of the CHNA process, each of the county level Steering Committees for the Gateway Wellness Coalition became extremely active. After the data collection and analysis subcommittee presented their findings on assessing community health needs, the goals for each of the steering committees quickly emerged. The Gateway Wellness Coalition Executive and Steering Committees identified the most critical areas of concern, largely supported by data and committee member input. After identifying these areas of concern, several questions were asked including:

- Who can make an impact?
- Who is not here that can make an impact?
- Who will contact those that are not here?

Most of the critical issues and areas of concern are:

- Childhood and community obesity and nutrition
- Drug addiction and teen drug use
- Tobacco usage and cessation
- Access to quality, affordable health and dental care

Other areas of concern identified in Gateway Wellness Coalition meetings include:

- Diabetes
- Cancer and its causation
- Heart disease and stroke
- Family counseling services
- Care for the uninsured/underinsured

Once critical issues were identified and prioritized, the Executive and Steering Committees then collaborated to identify and begin implementing strategies to address those issues and to seek funding (grants, corporate and civic group donations, combining of existing resources, etc.) to effectively implement and sustain those strategies over the next three years and perhaps beyond.

## Rowan County

Addressing the obesity problem in Rowan County has been identified as the number one priority by the Gateway Wellness Coalition. 31% of Rowan County's adult population is considered obese, according to Community Health Status Indicators Report. The GWC will seek to raise obesity awareness through community events, as well as participate and encourage partnerships with the schools. As indicated in the Rowan County Profile (*See Appendix A*), early childhood obesity rates in the county are currently lower than the state average. It is critical that fitness programs, and school-based obesity prevention interventions are maintained for childhood obesity rates to continue to fall.

The Robert Wood Johnson Foundation Health Group has commented on the decline of childhood obesity in some cities, and those that have experienced measurable decreases have credited an emphasis on "multiple, comprehensive programs that target both schools and communities."

Priority: Childhood and Community Obesity

Emphasis: Access to Healthy Foods, Exercise and Education on Healthy Lifestyle

Implementation Strategies:

- (1) Awareness and community events.
- (2) Seek Morehead's designation as a Kentucky Trail Town for hiking, biking and horseback riding.
- (3) School-based obesity prevention interventions that seek to increase physical activity and improve nutrition before, during, and after school. Programs combine educational, behavioral, environmental, and other components such as health and nutrition education classes, encourage enhanced physical education and activities, increase availability/promotion of healthy food options, and family education and involvement. Specific components vary by program. A specific example is the "10,000 Steps Program", which encourages individuals to be physically active by walking at least 10,000 steps (approximately 5 miles for adults and 3 miles for small children) each day. The project will be piloted at an elementary school by providing one or two classes with pedometers and logs to track the number of steps they take daily. If successful, the program will be expanded to other schools and the community at-large.
- (4) Fitness programs in community settings – Fitness programs can be offered in a variety of community settings including community wellness, fitness, community, and senior centers. Program offerings vary by location, but often include exercise classes such as spinning/indoor cycling, aerobic dance classes, Zumba, Pilates, and Tai Chi.

The Gateway Wellness Coalition has identified access to dental care as a critical need in Rowan County. Existing data on dental health and care is limited on the county level, but will be enhanced through a partnership with the People's Dental Clinic of Morehead. The People's Dental Clinic will utilize facilities at St. Claire Regional Medical Center's Dental Clinic, which is expected to open beginning July 1, 2013. The clinic will see patients every odd month from that point forward. All patients will be registered at the People's Clinic and be given an appointment date and time in advance.

Priority: Access to Health/Dental Care

Emphasis: Those in Poverty and the Uninsured

Implementation Strategies:

- (1) People's Dental Clinic.
- (2) Expand the Rural Physician Leadership Program in Morehead through the UK College of Medicine - Rural training tracks and programs focus medical school training and learning experiences on the skills necessary to practice medicine in rural communities. These initiatives often recruit students from rural backgrounds and students who have expressed an interest in practicing medicine in small towns and rural locations.
- (3) Financial incentives such as payments, vouchers, and tickets for prize drawings can be used to encourage patients to undergo preventive care such as screenings, vaccinations, and other brief interventions. Personal incentive programs are usually offered through the public sector and typically offer incentives to low income individuals.
- (4) More strategies will be identified and implemented after the impact of the ACA on healthcare access and affordability becomes clearer.

Priority: Drug Addiction/Prescription Drug Abuse

Emphasis: Drug addiction and prescription drug abuse among teens and adults

Implementation Strategies:

- (1) Collaborate with Rowan UNITE on awareness, prevention and treatment programs.
- (2) Educate physicians and other medical providers about warning signs of prescription drug use and appropriate ways to address it when identified.
- (3) Facilitate support groups such as AA, NA and ALANON.

Priority: Tobacco Usage

Emphasis: Cessation programs

Implementation Strategies:

- (1) Adopt and work toward the American Heart Association's goal of reducing tobacco use by 20 percent by the year 2020.
- (2) SCR and the Gateway District Health Department to partner to provide smoking cessation classes at little or no cost (depending on available grant funds) to interested residents.
- (3) Curtail all sources of involuntary exposure to environmental tobacco smoke.

## **Bath County**

Priority: Childhood and Community Obesity

Emphasis: Access to Healthy Foods, Exercise and Education on Healthy Lifestyle

Implementation Strategies:

- (1) Awareness and community events.
- (2) Support Morehead's designation as a Kentucky Trail Town for hiking, biking and horseback riding.
- (3) School-based obesity prevention interventions seek to increase physical activity and improve nutrition before, during, and after school. Programs combine educational, behavioral, environmental, and other components such as health and nutrition education classes, enhanced physical education and activities, promotion of healthy food options, and family education and involvement. Specific components vary by program.
- (4) Fitness programs in community settings – Fitness programs can be offered in a variety of community settings including community wellness, fitness, community, and senior centers. Program offerings vary by location, but often include exercise classes such as spinning/indoor cycling, aerobic dance classes, Zumba, Pilates, and Tai Chi.

The Gateway Wellness Coalition has identified access to dental care as a critical need in Bath County. Existing data on dental health and care is limited on the county level, but will be enhanced through a partnership with the People's Dental Clinic of Morehead. The People's Dental Clinic will utilize the

facility at St. Claire Regional Medical Center's Dental Clinic, which is expected to open beginning July 1, 2013. The clinic will see patients every odd month from that point forward. All patients will be registered at the People's Clinic and be given an appointment date and time in advance.

Priority: Access to Health/Dental Care

Emphasis: Those in Poverty and the Uninsured

Implementation Strategies:

- (1) People's Dental Clinic.
- (2) Expand the Rural Physician Leadership Program in Morehead through the UK College of Medicine. Rural training tracks and programs focus medical school training and learning experiences on the skills necessary to practice medicine in rural communities. These initiatives often recruit students from rural backgrounds and students who have expressed an interest in practicing medicine in small towns and rural locations.
- (3) Financial incentives such as payments, vouchers, and tickets for prize drawings can be used to encourage patients to undergo preventive care such as screenings, vaccinations, and other brief interventions. Personal incentive programs are usually offered through the public sector and typically offer incentives to low income individuals.

Priority: Chronic Illness Management for the Uninsured

Emphasis: Elder Care Services

Implementation Strategies:

- (1) Expand the number and types of elder care services, and assess the prospects for establishing a training program to certify elder care providers.

Priority: Tobacco Usage

Emphasis: Cessation Programs

Implementation Strategies:

- (1) Adopt and work toward the American Heart Association's goal of reducing tobacco use by 20 percent by the year 2020.
- (2) SCR and the Gateway District Health Department to partner to provide smoking cessation classes at little or no cost (depending on available grant funds) to interested residents.
- (3) Curtail all sources of involuntary exposure to environmental tobacco smoke

Community Partners: Gateway Wellness Coalition, Gateway District Health Department, Bath County Schools, Parks and Recreation, Extension Service, City Council, Bath County School Board, Bath County Library, Chamber of Commerce, Elected Officials

## Menifee County

Priority: Access to Health/Dental Care and Exploring Options for New Services

Emphasis: Those in Poverty and the Uninsured

Implementation Strategies:

- (1) Collaboratively assess the opportunities for opening an Urgent Treatment Center in Menifee County.
- (2) Assess the prospects of opening a regional nursing home to provide employment and meet a community and regional need.
- (3) Expand the number and types of elder care services, and assess the prospects for establishing a training program to certify elder care providers.
- (4) People's Dental Clinic
- (5) Expand the Rural Physician Leadership Program in Morehead through the UK College of Medicine. Rural training tracks and programs focus medical school training and learning experiences on the skills necessary to practice medicine in rural communities. These initiatives often recruit students from rural backgrounds and students who have expressed an interest in practicing medicine in small towns and rural locations.
- (6) Financial incentives such as payments, vouchers, and tickets for prize drawings can be used to encourage patients to undergo preventive care such as screenings, vaccinations, and other brief interventions. Personal incentive programs are usually offered through the public sector and typically offer incentives to low income individuals.

Priority: Improve Infrastructure

Emphasis: Enhance Walkability, Transportation in Rural Areas and for the Public

Implementation Strategies:

- (1) Improve signage for all community resources.
- (2) Enhance existing tourism assets.
- (3) Explore and expand available transportation services (public or otherwise) to serve residents of remote areas to increase access to medical services.
- (4) Explore funding for a walking park at the fitness center to connect the areas of low income housing, and the local medical center to the fitness center.
- (5) Improve walking trails at Broke Leg Falls County Park.

Priority: Tobacco Usage

Emphasis: Cessation Programs

Implementation Strategies:

- (1) Adopt and work toward the American Heart Association's goal of reducing tobacco use by 20 percent by the year 2020.
- (2) SCR and the Gateway District Health Department to partner to provide smoking cessation classes at little or no cost (depending on available grant funds) to interested residents.
- (3) Curtail all sources of involuntary exposure to environmental tobacco smoke.

Priority: Childhood and Community Obesity

Emphasis: Access to Healthy Foods, Exercise and Education on Healthy Lifestyle

Implementation Strategies:

- (1) Awareness and community events.
- (2) School-based obesity prevention interventions that seek to increase physical activity and improve nutrition before, during, and after school. Programs combine educational, behavioral, environmental, and other components such as health and nutrition education classes, encourage enhanced physical education and activities, increase availability/promotion of healthy food options, and family education and involvement. Specific components vary by program.
- (3) Fitness programs in community settings – Fitness programs can be offered in a variety of community settings including community wellness, fitness, community, and senior centers. Program offerings vary by location, but often include exercise classes such as spinning/indoor cycling, aerobic dance classes, Zumba, Pilates, and Tai Chi.

Community Partners: Gateway Wellness Coalition, Gateway District Health Department, Menifee County Schools, Parks and Recreation, Extension Service, City Council, Menifee County School Board, Menifee County Library, Chamber of Commerce, Elected Official, Family Resource and Youth Service Center

## **Morgan County**

Morgan County – as a member of the Gateway Area Development District, the Gateway District Health Department service area, and St. Claire Regional Medical Center’s primary service region – was identified for inclusion in the Gateway Wellness Coalition Community Health Needs Assessment. After the assessment process was initiated, it was learned that the Appalachian Regional Healthcare (ARH) organization, which operates the Morgan County ARH Hospital, had already begun undertaking a system-wide Community Health Needs Assessment in each of its 10 hospital communities during the fall of 2012. The data reflected in its reports were collected from surveys and focus groups conducted in each of ARH’s local communities.

Representatives of the Gateway Wellness Coalition consulted with administrators at Morgan County ARH. It was determined that the Coalition would partner with Morgan County ARH in addressing needs/priorities and implementing strategies identified in the ARH assessment. The Morgan County hospital also agreed to share data and other findings from its assessment with the Gateway Wellness Coalition as that information became available.

Based on the Morgan County ARH prioritization of identified health needs during its Community Health Needs Assessment, the hospital selected the following as its top goals/areas of need and strategies:

- (1) Educational Programs – To increase community awareness (connection) between education and screening activities and ARH.
  - a. In addition to current off-site health fairs, ARH will sponsor two on-site health fairs.
  - b. Partner with other agencies and organizations to plan for programming and to develop materials.
  - c. Increase programming specific to obesity and diabetes.
  - d. Increase programming targeting the senior population.
  
- (2) Increase ER physician customer satisfaction scores and more effectively meet the needs of the community.
  - a. Increase physician involvement in care and quality meetings.
  - b. Utilize third-year residents to staff the ER when possible.
  
- (3) Expand access to provider services in nutrition, allergy testing and dermatology.
  - a. Expand current services to include nutrition and allergy testing, and offer telemedicine for dermatology.
  - b. Contact specialists regarding expansion of these specialty services.

## **Explanation of Needs Not Addressed**

Throughout this comprehensive process, many health needs were identified, but some have not been addressed in this specific plan. Several Gateway Wellness Coalition Executive Committee meetings focused on the needs that were already being addressed in different ways. One of the most critical areas of need is care for uninsured/underinsured, as St. Claire Regional Medical Center provides care and services for uninsured and Medicaid patients. SCR routinely treats patients who receive Medicaid benefits, and SCR's Fiscal 2012 reimbursement fell \$2.7 million short of the actual cost of care for Medicaid patients. SCR also provided approximately \$6 million in charity care (at cost) in Fiscal 2012. Uncompensated care, which totaled \$6.9 million, was the cost of SCR services to individuals who were unable or unwilling to pay and did not officially meet guidelines for traditional charity care. Thus, more funding, expertise and access are necessary to ensure that the substantial impact that St. Claire Regional has on the uninsured/underinsured population in its primary service area is sustainable for years to come, particularly given the requirements and impact of the Affordable Care Act.

Since our founding in 1963, St. Claire Regional Medical Center has continually sought to expand our reach in the region. Evidence of this outreach and growth includes the complete transformation of our family medicine clinic in Morehead, as we have tripled our exam room space over the past five years. Additionally, St. Claire Regional Medical Center has expanded into the region, operating several primary care and family clinics in five service area counties. Our first primary care clinic opened in 1973 in Menifee County, while our second opened three years later in Bath County. Other primary care/family medicine clinics followed in Rowan, Carter and Elliott counties. In 2010, St. Claire Regional Medical

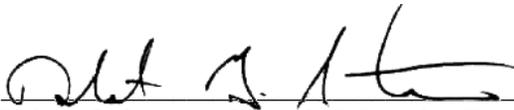
Center and the University of Kentucky forged a Comprehensive Stroke Affiliation, which enhanced patient services for the region.

Evidence of our efforts to address an anticipated need for more primary care physicians and specialists in the region is a unique joint initiative – featuring a regional university (Morehead State University), a land grant university (the University of Kentucky), and a private nonprofit hospital (St. Claire Regional Medical Center) – that led to the creation of the Center for Health, Education and Research (CHER) in Morehead to train the next generation of medical students and healthcare professionals for the region. This facility provides exceptional training opportunities for the state’s top ranked nursing program at Morehead State University. Additionally, the facility serves as a regional campus for the University of Kentucky College of Medicine’s Rural Physician Leadership Program. It is also a training ground for the family practice residency programs for St. Claire Regional and UK.

The Office of Research and Engagement for Advancing Community Health (REACH), a University of Kentucky venture, will also advance its efforts at the CHER facility. Through the creation and implementation of the services that the CHER building has to offer, this facility allows for exceptional graduate medical education and research. Another added benefit to the region is that citizen access to primary care services will be greatly enhanced with the expansion of SCR’s Family Medicine Clinic.

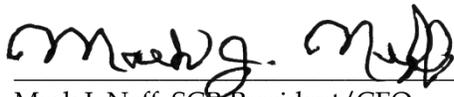
## Approval/Adoption of Implementation Strategy

St. Claire Regional Medical Center’s Board of Directors approves the Community Health Needs Assessment and Implementation Strategy that has been developed by the Gateway Wellness Coalition’s Executive and Steering Committees to address the needs/priorities identified (*See Appendix F*).



Robert G. Stevens, Chair, SCR Board of Directors

Date: December 5, 2013



Mark J. Neff, SCR President/CEO

Date: December 5, 2013



Tom Lewis, Chair, Gateway Wellness Coalition Executive Committee

Date: December 5, 2013