



Caring together. **MERCYHEALTH**

2017-2019 Community Health Needs Assessment Implementation Plan

ADOPTED BY THE ST. RITA'S HEALTH PARTNERS BOARD OF TRUSTEES, OCT. 2016

ST. RITA'S MEDICAL CENTER

730 W Market St., Lima, OH 45801



A Catholic healthcare ministry serving Ohio and Kentucky

Table of contents

INTRODUCTION	2
Community served by hospital.....	2
Mission statement.....	2
EXECUTIVE SUMMARY	3
Background and processes	3
IDENTIFYING SIGNIFICANT NEEDS	3
IMPLEMENTATION PLAN	4
Prioritized significant needs	4
Implementation strategies	4
1. Exercise, nutrition and weight.....	4
2. Mental health and substance abuse.....	5
3. Cancer.....	7
4. Maternal, fetal and infant health.....	8
5. Access to care.....	9

Introduction

St. Rita's Medical Center ("St. Rita's" or "Hospital") is a 424-bed, full-service hospital providing inpatient, outpatient and ancillary health care services. St. Rita's, along with local health, education, social service, nonprofit and governmental agencies participated in a Community Health Needs Assessment ("CHNA") conducted for Allen County, Auglaize County and Putnam County. The detailed process, participants and results are available in St. Rita's Medical Center Community Health Needs Assessment Report which is available at mercy.com.

This Community Health Needs Assessment Implementation Plan will address the significant community needs identified through the CHNA. The plan indicates which needs St. Rita's will address and how, as well as which needs St. Rita's won't address and why.

Beyond the programs and strategies outlined in this plan, St. Rita's will address the health care needs of the community by continuing to operate in accordance with its Mission to extend the healing ministry of Jesus by improving the health of its communities with emphasis on the poor and under-served. This includes providing care for all individuals regardless of their ability to pay.

The strategies and tactics of this Implementation Plan will provide the foundation for addressing the community's significant needs beginning 2017 through 2019. However, St. Rita's Medical Center anticipates that some of the strategies, tactics and even the needs identified will evolve over that period. St. Rita's Medical Center plans a flexible approach to addressing the significant community needs that will allow for adaption to changes and collaboration with other community agencies.

COMMUNITY SERVED BY HOSPITAL

For the purposes of the CHNA, St. Rita's Medical Center used Allen County, Auglaize County, and Putnam County in Ohio as the primary service area. Patient data indicates that 79% of people served at St. Rita's reside in the primary service area, based on the county of residence of discharged inpatients during 2014.

MISSION

We extend the healing ministry of Jesus by improving the health of our communities with emphasis on people who are poor and under-served.

Mercy's Mission and culture are expressed through the organizational core values:

Compassion

Our commitment to serve with mercy and tenderness

Excellence

Our commitment to be the best in the quality of our services and the stewardship of our resources

Human Dignity

Our commitment to value the diversity of all persons and to be respectful and inclusive of everyone

Justice

Our commitment to act with integrity, honesty and truthfulness

Sacredness of Life

Our commitment to reverence all life and creation

Service

Our commitment to respond to those in need

Executive summary

BACKGROUND AND PROCESS

The community served by St. Rita's Medical Center was defined as the primary service area: Allen, Auglaize and Putnam Counties in Ohio. St. Rita's participated in the Allen and Putnam counties' most recent collaborative community needs assessment projects, both of which were conducted by the Hospital Council of Northwest Ohio. St. Rita's also participated in a collaborative community needs assessment project in Putnam County, which was conducted by the Center of Social Research, Indiana University-Purdue University Fort Wayne. The assessments were designed to identify the community issues, behavioral health issues and physical health issues that residents of Allen, Auglaize and Putnam Counties face. The assessments were also designed to track progress from previous assessments, where applicable. The Hospital Council of Northwest Ohio in Allen and Auglaize Counties, and Center of Social Research in Putnam County collected the data, guided the health assessment process and integrated sources of primary and secondary data.

Organizations that provided input included public health departments, organizations serving at-risk populations, community health centers, academic experts, healthcare providers, labor and workforce experts, local government, local schools and healthcare consumers. Input from members of the community was obtained using a general survey, focus group sessions and meetings with organizations and individuals in community leadership positions. Special attention was given to obtaining input from members of medically underserved, low-income and minority populations.

A focus group was comprised of the members of the Community Health Improvement Plan (CHIP) committee for Allen County. The CHIP committee includes community stakeholders and representatives of organizations knowledgeable and interested in community health issues. Participation on the CHIP committee allowed community leaders and public health experts to discuss their concerns in a small-group setting.

The CHIP committee provided input about community capacity including organizations and resources available to address community needs.

Identifying significant needs

For each of the identified health topics, the Community Health Needs Assessment Committee analyzed the specific health indicators by county in comparison with state data, when available. In the absence of state data, national data was used in the analysis. Indicators were identified as being potentially significant if the county indicator was less favorable than the state or national indicator. Topics with issues were considered a potentially significant community health need and included in the prioritization process.

The criteria used to prioritize health needs included scope, severity, burden, urgency of need, the estimated feasibility and effectiveness of possible interventions and the importance the community placed on addressing the need. Scope and severity were measured by examining the data for rates that should be improved.

A community survey measured the burden and urgency of the health need. Prioritization participants used a survey to rank each health need based on the most troubling health topics to the community, the health topics requiring immediate action, and the health topics most troubling to youth. Participants ranked the most common financial barriers to access and the most common other barriers to access for health care services. Focus group sessions and meetings addressed the estimated feasibility and effectiveness of possible interventions. The community survey measured the importance the community placed on addressing the need.

The ranking of health needs based on weighted criteria was developed by the Community Health Needs Assessment Collaborative of Mercy Health. Members of

the Community Health Needs Assessment Collaborative Committee included Mercy Health employees with the following areas of expertise: mission, finance, corporate responsibility, legal and strategic planning.

The process of performing the CHNA, data sources consulted, development of the top priorities and the list of participants is explained in detail in St. Rita's Medical Center's CHNA Report which is available at mercy.com.

Implementation Plan

St. Rita's Medical Center is continuing to work with other agencies and is committed to developing a county-wide Community Health Improvement Plan for each of the counties in the primary service area. While these plans are still being finalized, St. Rita's is committed to addressing the health needs of the community through the strategies and tactics described in this implementation plan. These strategies and tactics will be in alignment with the overall Community Health Improvement Plans of the individual counties within the primary service area.

PRIORITIZED SIGNIFICANT COMMUNITY HEALTH NEEDS

The table below lists the significant community needs that were identified through the CHNA and specifies which needs St. Rita's Medical Center will address.

Prioritized significant community health need	Addressed by hospital
Exercise, nutrition, and weight	Yes
Mental health and substance abuse	Yes
Cancer.....	Yes
Maternal, fetal, and infant health.....	Yes
Access to care.....	Yes

IMPLEMENTATION STRATEGIES TO ADDRESS SIGNIFICANT COMMUNITY HEALTH NEEDS

In 2015, St. Rita's Medical Center provided \$32.8 million in community benefit, services and activities that benefitted the poor and underserved as well as the broader community. Of the \$32.8 million, \$23 million was related directly to those living in poverty. St. Rita's has supported its Mission since 1918 and will continue to provide quality care to the community with emphasis on the poor and under-served.

The strategies defined in the implementation plan will supplement the charity care and community benefit practices of St. Rita's, and will ensure that focus and resources are being devoted to the highest priority needs of the community.

EXERCISE, NUTRITION AND WEIGHT

Description

As detailed in St. Rita's Medical Center's Community Health Needs Assessment Report:

Exercise, nutrition and weight are related to health status. Regular physical activity can improve the health and quality of life of all people. Good nutrition and a healthy body weight are especially important for the growth and development of children. A healthy diet also helps to reduce the risk for many health conditions. Our primary service area shows a higher percentage of adults who are overweight and obese compared to national and state averages. Each county's Community Health Improvement Plan has identified adult and youth obesity as a prioritized health need. From our health needs assessment, we show that chronic illnesses which can be directly correlated with exercise, nutrition and weight such as heart disease, cerebrovascular disease, diabetes, hypertension and hyperlipidemia, are underperforming in indicators compared to state and national averages.

Goal

Reduce the incidence of overweight and obesity in our primary service areas.

Expected impact

- Increase participation in sponsored physical activity programs for youth.
- Increase participation in physical activity events and programs in the community.
- Increase participation in healthy-eating and nutrition programs.
- Increase education about the relationship between exercise, nutrition and weight management and the prevention of chronic diseases.

Targeted populations

Within our primary service area, there will be a special emphasis on at-risk populations such as low-income, uninsured and at-risk youth.

Strategies

1. Sponsor programming that encourages an increase in physical activity in youth (GoNoOdle).
2. Encourage schools to develop their own programs to increase physical activity and/or healthy eating (Veggie U, Activated School Challenge, other).
3. Encourage an increase in participation in fitness events (5Ks, biking events, etc.).
4. Support initiatives to increase physical activity options by partnering with community recreational facilities, parks and community development organizations.
5. Support initiatives, including collaborating with community based groups, to improve access to healthier foods (Healthy Happens Here, farmers markets, community gardens, etc.).
6. Educate community members about chronic-disease prevention and management, especially among the target population.

Strategic measures

1. Program-specific outcome indicators that measure the physical activity (minutes of physical activity for GoNoOdle)
2. Number of schools participating in Veggie U, the Activated Schools Challenge or other sponsored programs
3. Number of participants in St. Rita's sponsored fitness events

4. Community-benefit dollars, including time and talent, in-kind donations and financial contributions, to support physical-activity initiatives for the community
5. Community-benefit dollars, including time and talent, in-kind donations, and financial contributions, to support healthy-food access initiatives for the community
6. Number of participants in provided educational forums focusing on chronic diseases such as diabetes and cardiac illness

Community collaborations

- Activate Allen County
- Allen County YMCA
- Bluffton Recreational Center
- Putnam County YMCA
- Wapakoneta YMCA
- Local city and county schools
- United Way
- CHIP collaborative committees
- The Bradfield Community Center

MENTAL HEALTH AND SUBSTANCE ABUSE

Description

As detailed in St. Rita's Medical Center's Community Health Needs Assessment Report:

Mental health is essential to personal well-being, family and interpersonal relationships and the ability to contribute to community and society. Substance abuse has a major impact on individuals, families and communities. The effects of substance abuse contribute to social, physical, mental and public health problems. Within our primary service area, community leaders, subject matter experts and community members show heightened concern regarding mental health needs and substance abuse. Age-adjusted death rate due to suicide, depression rates and the opiate and heroin epidemic have been identified as high-priority focus areas to address.

Goals

- Improve mental health through prevention, early detection and by ensuring access to appropriate, quality mental health services.
- Reduce substance abuse in the primary service area to protect the health, safety and quality of life for all.

Expected impact

- Increase the number of youth and adults with mental health and/or substance abuse needs who receive treatment.
- Increase the number of youth and adults who are screened for depression.
- Increase depression awareness and prevention efforts.
- Increase education and prevention efforts around substance abuse.

Targeted populations

Within our primary service area, there will be a special emphasis on individuals with opiate and heroin addiction, those with low income and the uninsured.

Strategies

1. Subsidize behavioral health services including inpatient psychiatric services and partial hospitalization program.
2. Provide intervention and care coordination to crisis patients through the Behavioral Access Center.
3. Use behavioral health specialists within Mercy Health Physicians primary care practices.
4. Provide integrated treatment for depression through participation on the Patient Intervention Treatment Team.
5. Provide opportunities for early detection of depression.
6. Provide educational events with schools to promote depression awareness and/or substance abuse prevention.
7. Promote depression awareness in the community.
8. Support the recommendations of the St. Rita's Health Partners (SRHP) Opiate Addiction Task Force.
9. Participate in community collaborative efforts to respond to the identified mental health and substance abuse needs of the community.

Strategic measures

1. Number of patients served by behavioral health services
2. Number of patients served by the Behavioral Access Center
3. Number of patients served by the behavioral health specialists residing within primary care practices for the employed physician groups
4. Number of patients served by the Patient Intervention Treatment Team
5. Number of depression screening opportunities
6. Number of educational events in collaboration with schools focusing on depression awareness and/or substance abuse prevention
7. Number of educational events focusing on depression awareness and/or substance abuse prevention in the community
8. Key metrics identified by the SRHP Opiate Addiction Task Force as indicators of success
9. Community-benefit dollars to support community collaborative efforts (time and talent, in-kind donations, financial contributions)

Community collaborations

- Patient Treatment Intervention Team
- CHIP collaborative committees
- PRIDE collaborative
- Opiate Dependent Pregnant Women Collaborative
- Suicide-prevention efforts
- United Way
- Mental Health and Recovery Services Board
- Family and Child First Council
- UMADAOP

CANCER

Description

As detailed in St. Rita's Medical Center's Community Health Needs Assessment Report:

Cancer is one of the top two leading causes of death in the St. Rita's primary service area. Screening for cancer is effective in identifying some types of cancers in early, often highly treatable stages. Many cancers are preventable by reducing certain risk factors. St. Rita's primary service area shows a higher incidence rate per 100,000 individuals in breast, colorectal and other forms of cancer. We are also behind national and state averages for cervical cancer screening. Community leaders and health care professionals have identified a gap in the community for tobacco cessation services, which has been shown to be a risk factor for cancer.

Goal

Reduce the number of preventable disabilities and deaths caused by cancer within our primary service area through increased access to screening and other prevention programs.

Expected impact

- Increase the proportion of women over 40 receiving guideline-based, clinically appropriate screening for breast cancer.
- Increase the proportion of adults receiving guideline-based, clinically appropriate screening for colorectal cancer.
- Increase the proportion of adults receiving guideline-based, clinically appropriate lung cancer screening.
- Increase efforts to address risk factors for developing cancer, including tobacco use, untreated diseases and other priorities identified by SRHP Cancer Committee.

Targeted populations

Within our targeted population of our primary service area, there will be a special emphasis on tobacco users, at-risk populations, people with low income and uninsured people.

Strategies

1. Provide access to clinically appropriate and advanced imaging techniques for early detection of cancers, including emphasis on:
 - a. Screening and diagnostic mammography
 - b. Colorectal cancer screenings
 - c. Lung screening for 30-pack/year smokers
2. Participate in community collaborative efforts, including Mercy Health Physicians, to address cancer prevention, education, research and care, including health fairs and other initiatives.
3. Promote community awareness of cancer resources and education through the Cancer Resource Center and St. Rita's Cancer Committee, Community Outreach and other related efforts.
4. Provide access to tobacco cessation resources through collaboration and community initiatives.

Strategic measures

1. Increase the number of patients who receive mammography screenings at St. Rita's.
2. Increase the number of appropriate, guideline-based colorectal screenings for early detection in our service area.
3. Increase the number of patients in the primary service area receiving CT lung screenings based on the most recent guidelines for early detection.
4. Commit specific community-benefit dollars, including time and talent, in-kind donations and financial contributions, to support:
 - a. Promoting public awareness of health screens and prevention
 - b. Fostering community collaborative efforts
 - c. Supporting the Cancer Resource Center
 - d. Establishing a tobacco cessation program

Community collaborations

- Colorectal, Breast and the Community Cancer Coalitions
- American Cancer Society
- Activate Allen County
- Mercy Health Physicians
- St. Rita's Cancer Committee

MATERNAL, FETAL AND INFANT HEALTH

Description

As detailed in St. Rita's Medical Center's Community Health Needs Assessment Report:

Infant mortality is an estimate of the number of infant deaths for every 1,000 live births. This rate is often used as an indicator to measure the health and well-being of a nation because the factors affecting the health of entire populations can also affect the infant mortality rate. The leading causes of infant mortality are birth defects, preterm birth, maternal complications of pregnancy, Sudden Infant Death Syndrome and injuries. A woman's health during preconception and pregnancy is the most important factor in pregnancy-related health outcomes. One of the most effective preventative measures a mother can take to protect the health of her infant is to breastfeed. Data for our primary service area, specifically in Allen County, shows the following underperforming health indicators for factors related to infant mortality: lower rates of mothers who received early prenatal care, significantly higher incidence of mothers smoking during pregnancy and babies with low birth weight.

Goal

Reduce the risk of infant mortality by improving the health and well-being of mothers and infants.

Expected impact

- Reduce the number of sleep-related deaths for babies within the first year of life.
- Reduce the total number of preterm births of 36 weeks or less of gestation.
- Reduce the number of babies born at a low or very low birth weight (less than 5lbs 8oz).
- Increase the proportion of parents receiving prenatal and infant safety education and resources.
- Increase the proportion of infants who are exclusively fed breastmilk.

Targeted populations

Within Allen County there will be a special emphasis on first-time, low-income mothers, pregnant teens and addicted mothers.

Strategies

1. Promote higher participation in the existing antepartum program through increased promotion and access, especially to target populations.
2. Promote higher participation in the existing breastfeeding program through increased promotion and access, especially to target populations.
3. Collaborate with local community agencies to develop and support robust prenatal and infant safety education and outreach for target populations.
4. Promote tobacco cessation for women during pregnancy and preconception.
5. Collaborate with community OB/GYN providers and community health agencies to promote early screening, coordination of care and access to needed resources.
6. Promote, protect and support breastfeeding during the hospital stay through adopting the objectives of the Ohio Department of Health and the Ohio Hospital Association program called Ohio's First Steps for Healthy Babies.
7. Encourage and support mothers to exclusively feed their infants breastmilk during the hospital stay.

Strategic measures

1. Number of total participants in St. Rita's antepartum program
2. Number of total participants in St. Rita's breastfeeding program
3. Community-benefit dollars reported for contributions of time, talent, in-kind donations and financial contributions to community partners for prenatal and infant safety education
4. Percentage of women who did not smoke during pregnancy
5. Number of collaborating partners promoting early screening, coordination of care and access to needed resources
6. Increase in the number of steps in the Ohio's Healthy First Steps program that have been fully implemented
7. Number of infants who are exclusively fed breastmilk in the medical center

Community collaborations

- Allen County Maternal, Infant and Fetal Health Task Force
- WIC
- Opiate Dependent Women Task Force
- Guiding Light
- Help Me Grow
- Samaritan House
- Activate Allen County
- Allen County Health Department Cribs Program
- Heartbeat of Lima

ACCESS TO CARE

Description

As detailed in St. Rita's Medical Center's Community Health Needs Assessment Report:

Access to comprehensive, quality healthcare services is important for achieving health equity and for increasing everyone's quality of life. Key components of access to care are coverage, services, timeliness and a healthcare workforce. Health insurance coverage helps patients get into the healthcare system. Services can be provided to reduce the burden of barriers to access. Timeliness is making healthcare available quickly after a need is recognized. A qualified workforce is needed to provide healthcare services. Community members have identified barriers for individuals seeking medical advice or treatment, which include: continued gaps in insurance coverage coupled with high cost of care and prescription drugs, and the inability to understand the complexities of healthcare.

Goal

Improve education and access to appropriate services for health resources and care.

Expected impact

- Decrease the number of individuals who identify health insurance coverage or financial barriers to access.
- Decrease the number of individuals who identify transportation as a barrier to access.

- Decrease the number of individuals who identify medication cost as a barrier to access.
- Increase efforts to educate and recruit health professionals, especially providers of services that are in high demand.

Targeted populations

Within our primary service area, there will be emphasis on those who have low incomes and on the uninsured.

Strategies

1. Provide financial counseling services.
2. Enhance Mercy Action prescription-assistance program to provide options for long-range support and to reach target populations.
3. Provide Mercy Express and Mercy Action transportation-assistance programs.
4. Collaborate with community agencies to address barriers to access, including transportation.
5. Provide information and support connecting to resources through the Health Resource Center.
6. Provide opportunities for health professionals to further their education.

Strategic measures

1. Number of individuals and amount of community-benefit dollars invested in providing financial-counseling services
2. Number of individuals assisted through enhanced medication-assistance programs, including Mercy Action or manufacturer program enrollments
3. Number of individuals receiving transportation services to medical appointments using Mercy Express or Mercy Action
4. Number of eligible individuals who were declined transportation services due to limited resources
5. Number of individuals assisted with access barriers through the Health Resource Center and Health Resource Center events
6. Community-benefit dollars invested in educational opportunities for health professionals

Community collaborations

- FAST Community Collaborative
- United Way
- CHIP collaborative committees