

Mercy Medical Center - Centerville, IA

# Community Health Needs Assessment

IMPLEMENTATION STRATEGY

FY2016-FY2019



## **Implementation Strategy**

Mercy Medical Center – Centerville updated its Community Health Needs Assessment (CHNA) in March 2016. The CHNA is designed to reach broadly into the community to identify needs, gaps and barriers to health and health services. In order to address needs identified in the CHNA, Mercy Medical Center – Centerville will work as an organization and in conjunction with key community partners to continue implementing strategies across the service area.

Acknowledging the many organizations and resources in place to address the health needs of the community, Mercy has strategically reviewed the internal and external resources. This implementation strategy will explain how Mercy will address the prioritized findings by continuing existing programs and services, and by initiating new strategies. In addition, this document will explain reasons why Mercy will not address all needs identified within the CHNA, but will continue to support other organizations already addressing these needs.

The identified areas of community health need will be addressed in Mercy’s implementation strategy for FY2016 through FY2019, after which the next Community Health Needs Assessment will be performed.

### **Community Health Needs Assessment Available to the Community**

The CHNA is disseminated to the community via the Mercy website at: [www.mercycenterville.org](http://www.mercycenterville.org) and printed copies are available upon request of Mercy.



**Priority Area 1: After Hours/Urgent Care Clinic Availability** – The community health needs assessment through both the survey and town hall meeting overwhelmingly identified the need to access physician services beyond Monday – Friday, 8-5. Respondents identified difficulty getting same day appointments with physicians and/or mid-level practitioners and don’t want to use the emergency room for non-emergent conditions.

Objective	Strategy	Target Population	Actions	Time Frame	Responsibility	Resources
Improve the access of area citizens to primary care services.	Expand hours in current clinic to accommodate weekday after hours and weekend hours	Residents of all ages – infants through seniors	<ul style="list-style-type: none"> <li>Assess current clinic occupancy space</li> <li>Develop a business plan to estimate volumes and staffing needs.</li> </ul>	April 2016	<ul style="list-style-type: none"> <li>Hospital Administration</li> </ul>	
			<ul style="list-style-type: none"> <li>Recruit 3 mid-level providers</li> </ul>	By October 2016		Recruitment – 100 hours Administrator/ provider \$29,000 3 Provider Salaries/Benf. \$375,000
			<ul style="list-style-type: none"> <li>Develop operational processes &amp; procedures</li> </ul>	By November 2016	<ul style="list-style-type: none"> <li>Clinic Administrator</li> </ul>	Clinic Administrator Time 50 hours \$2,000 Purchase 2 high low exam tables \$8,600
			<ul style="list-style-type: none"> <li>Market opening of walk-in clinic with expanded hours</li> </ul>	December 2016	<ul style="list-style-type: none"> <li>Clinic Administrator</li> <li>Mercy PR</li> </ul>	Design/Print/Advertising/Signage \$10,000
			<ul style="list-style-type: none"> <li>Open walk-in clinic</li> </ul>	January 2017		





**Priority Area 2: Increase the physician specialist clinics locally - The CHNA survey, Town Hall and Focus group all identified a need for more specialists to be available locally so residents don't have to leave town for specialty care. Includes expanding the number of existing specialty clinics as well as addition of new specialists.**

Objective	Strategy	Target Populations	Actions	Time Frame	Responsibility	Resources
Improve the access of area citizens to specialist physician/providers locally.	Increase the number of specialties and specialists providing service in specialty clinic.	Residents of all ages – infants through seniors	Evaluate market studies for out-migration and assess current specialty clinic appointment wait times.	April 2016	Mercy Administration Mercy PR/Marketing	
			Recruit following specialists: <ul style="list-style-type: none"> <li>• Ortho (new)</li> <li>• Podiatry (expand)</li> <li>• ENT (replace)</li> <li>• Cardiology (expand)</li> <li>• Pain Management(new)</li> <li>• Vascular (new)</li> <li>• Urology (expand)</li> </ul>	Aug 2016 July 2016 Dec 2016 Dec 2016 2017 2017 2016	Mercy Administration	Recruitment 20 hours administrator time/specialist \$13,685  Equipment– Purchase: 3 podiatry chairs \$18,000 Surgery Tower \$150,000
	Increase community awareness of local specialists and availability.		Market new specialists in local media, through news releases, print/radio advertising, social media & community newsletter.		Mercy PR	Design/Print/Advertising \$5,000





**Priority Area 4: Increase personal health accountability of area citizens – the CHNA identified a need for individuals to better manage their own health through behavior modification to intervene, deter, or delay preventable health conditions.**

Objective	Strategy	Target Population	Actions	Time Frame	Responsibility	Resources
Identify patients who are considered pre-diabetic and educate on behavioral modifications to improve health.	Initiate a pre-diabetes prevention program.	Patients who are pre-diabetic.	<ul style="list-style-type: none"> <li>Physician identifies patients at most risk.</li> <li>Educate about importance of personal behavior for prevention of diabetes</li> <li>Offer 3 month trial guided exercise program</li> </ul>	2016-17 ongoing  By October 2016	<ul style="list-style-type: none"> <li>Physician</li> <li>Health Coach</li> <li>Diabetic Educator</li> <li>Diabetic Support Group</li> <li>Physician Physical Therapy YMCA</li> </ul>	Physician Time 104 hours \$11,249  Diabetic Educator Time 75 hours \$2,321  Hospital Contribution \$10,000
	Provide patients with the knowledge, tools and resources to manage their health post discharge.	Elderly, high LACE score, those who lack a good support system at home.	<ul style="list-style-type: none"> <li>Initiate discharge planning at admission.</li> <li>Provide education about diagnosis, medications and testing utilizing teach back methods</li> <li>Provide written discharge instructions for patient and family physician.</li> </ul>	September 2016	<ul style="list-style-type: none"> <li>Hospitalists</li> <li>Nursing</li> <li>Discharge Planning Nurses</li> <li>Patient Educator</li> </ul>	Diabetic Support Group Time 300 hours \$9,405

			<ul style="list-style-type: none"> <li>• Health Coach follow up.</li> <li>• Schedule follow up physician before discharge</li> <li>• Phone call follow up within 48 hours</li> <li>• Weekly phone calls to those high risk for 1 month.</li> <li>• Provide medication pill planners, medication bags, scales for their use at home.</li> </ul>			<p>Patient Educator Time - 1000 hours     \$31,350</p> <p>Grant funding supplies: \$6,355</p>
	Provide opportunities for community to access screenings and exercise.	Adults & Children	<ul style="list-style-type: none"> <li>• Provide reduced cost wellness screen panels.</li> <li>• Provide bi-annual community screening event.</li> <li>• Design walking trails map and make available throughout community.</li> <li>• Partner with Hy-Vee, and Chamber of Commerce to sponsor Step into Spring Fitness event</li> </ul>	<p>2016-2019 Ongoing</p> <p>Fall &amp; Spring 2016 – 2019</p> <p>Spring 2017</p> <p>March 2017</p>	<ul style="list-style-type: none"> <li>• Health Promotion Coordinator</li> <li>• Mercy Lab</li> <li>• PR/Marketing</li> <li>• Hy-Vee Food Store</li> <li>• Chamber of Commerce</li> </ul>	<p>75 @ \$174.65/avg. \$13,098</p> <p>Health Promotion Time 20 hours     \$485</p> <p>Design/Print     \$1,000</p> <p>Health Promotion Time 80 hours     \$1,940</p>

			with community and schools.			
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**Priority Area 6: Lack of transportation services in the county the CHNA identified a need for transportation resources particularly for citizens who need to access medical appointments, and mental health follow up treatment, support and/or legal appointments.**

Objective	Strategy	Target Population	Action	Time Frame	Responsibility	
Increase community knowledge and awareness of transportation resources and how to access.	Assess current transportation availability.	Adults & Senior Citizens	<ul style="list-style-type: none"> <li>Organize a local transportation coalition with cross section of community stakeholders.</li> </ul>	December 2013	<ul style="list-style-type: none"> <li>Chariton Valley Planning</li> <li>Appanoose County Mental Health Coalition</li> <li>Mercy Medical Center</li> <li>Appanoose Community Care Services</li> </ul>	Mercy Administrator Time 10 hours \$520
			<ul style="list-style-type: none"> <li>Develop a community wide communication plan to educate and build awareness of existing transportation resources.</li> </ul>	June 2017	<ul style="list-style-type: none"> <li>Transportation Coalition</li> <li>Transit Bus</li> <li>Chariton Valley Planning</li> </ul>	Design/Print Communications pieces \$2,000
Increase availability of current services or seek additional transportation services.	Assess potential for addition of increased services.	Adults & Senior Citizens	<ul style="list-style-type: none"> <li>Identify gaps in services needed.</li> </ul>		<ul style="list-style-type: none"> <li>Transportation Coalition</li> <li>Transit Bus</li> <li>Chariton Valley Planning</li> </ul>	Mercy Administrator Time 10 hours \$520
			<ul style="list-style-type: none"> <li>Explore expanded service hours/additional</li> </ul>			



			buses by current service. <ul style="list-style-type: none"><li>• Explore other funding/grant opportunities for alternative services.</li></ul>			
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**Priority Area 6: Build community knowledge and awareness about existing healthcare services available from the hospital – the CHNA identified that many in the community aren’t aware of all the services available or brought into the community by the hospital that deters people from leaving the county for the same services.**

Strategy	Target Population	Actions	Time Frame	Responsibility	Resources
Increase community knowledge about available hospital services	Young families Adults Senior Citizens	Establish a community work group to discuss alternative communication vehicles compared to traditional models.	January 2017	Mercy PR/Marketing Patient Family Advisory Awareness Work Group	Mercy VP Time 20 hours \$1,040
		Develop a comprehensive communication plan based on recommendations.	June 2017		Mercy VP Time 100 hours \$5,200



**Priority Area 3: Poverty** – the CHNA, Town Hall and Focus groups identified the high poverty level of the county as having an impact on community health. We did not include this in the implementation plan because the hospital cannot impact the poverty level of the citizens but we do our part by providing medical services and partnering with others to address the social issues for this demographic of our population.

**Priority Area 5: Rural 911 Mapping Updates Needed** – the Town Hall meeting identified concerns about the E-911 mapping in the county and its impact on area ambulances being able to find rural residences. We did meet with the county sheriff regarding this concern. The facts are that new maps have been developed and created and updates are sent to the GPS provider. According to the sherriff, the E-911 mapping is not a cause for ambulance not to find a residence but that issues may occur when the ambulance districts overlap and the 911 call goes to the closest service before being sent to the hospital service which may result in a 5 minute delay. He stressed that if anyone lives in these areas, they should request Mercy ambulance when making the 911 call and it will be immediately dispatched. We did not include this in the implementation plan because we don't have control over the E-911 mapping service but the hospital will work with law enforcement to communication the above information.

**Priority Area 9: Department of Human Services (DHS) presence in Appanoose County** – the town hall meeting identified that no longer having a DHS office in Centerville negatively impacts the health of the community. As the hospital has no control of this state managed agency, who eliminated the office due to cutbacks several years ago, we did not include it in our implementation plan.

Approved & Adopted by:

Mercy Medical Center – Centerville  
Board of Directors

Date: August 5, 2016