Community Health Improvement Plan

Mercy Hospital
Mt. View St Francis

Fiscal Year 2019 - 2021

Mercy

Your life is our life's work.

Our Mission:

As the Sisters of Mercy before us, we bring to life the healing ministry of Jesus through our compassionate care and exceptional service.

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I. Introduction

Mercy St. Francis completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Directors in June 2019. The CHNA considered input from the county health department, community members, members of medically underserved, low-income, and minority populations and various community organizations representing the broad interests of the community of Monett. The CHNA identified three prioritized health needs the hospital plans to focus on addressing during the next three years: Cardiovascular Disease, Lung Disease and Awareness of Mental Health disease. The complete CHNA report is available electronically at mercy.net/about/community-benefits.

St. Francis is affiliated with Mercy, one of the largest Catholic health systems in the United States. Located in Mountain View, Missouri, St. Francis has 25 licensed beds. St. Francis provides24-hour emergency room with a board-certified emergency medicine physician and licensed therapists provide a full range of physical, occupational, speech, cardiopulmonary and respiratory therapies

This three-year Community Health Improvement Plan (CHIP), aimed at addressing the prioritized health needs identified in the CHNA, will guide the coordination and targeting of resources, and the planning, implementation and evaluation of both new and existing programs and interventions. The 2019 CHNA and this resulting CHIP will provide the framework for Mercy St. Francis as it works in collaboration with community partners to advance the health and quality of life for the community members it serves.

II. Implementation Plan by Prioritized Health Need

Prioritized Need #1: Cardiovascular Disease

Goal 1: Increase access to health care for uninsured and at-risk persons.

PROGRAM: **Good Samaritans Community Health Screens**
PROGRAM DESCRIPTION: A partnership with the local Senior Center to provide free health screens to at-risk and uninsured community members in Mt. View.
ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED: 1. Identify potential uninsured community members at the Senior Center locations in Mt. View. 2. Perform free blood pressure, blood sugar and pulmonary function screening tests 60 times per year in Mt. View locations. 3. Provide brief health education interventions for participants being tested, especially those with abnormal results. 4. Refer participants to local health care providers, assisting participants in obtaining timely appointments if necessary. 5. Refer eligible participants to Good Samaritans Care Center program as appropriate.
ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES): ***Short-Term Outcomes:*** 1. Senior Center clients will have blood pressure, blood sugar and pulmonary function screening tests done during health screening events and results recorded. 2. 10% of clients participating in screening events will be from under-represented minority populations. 3. Referrals to MCWW and appropriate health care providers will be made for all eligible participants at screening events. 4. 80% of clients participating in screening events will receive at least one educational intervention. ***Medium-Term Outcomes:*** 1. 10% of participants in health screening events who do not have a primary care provider will establish care with a PCP in the community. ***Long-Term Outcomes:*** 1. Participants in health screening events will demonstrate increased knowledge of health conditions and risk factors for chronic disease. 2. Participants in health screening events will have improved disease management and health outcomes.
PLAN TO EVALUATE THE IMPACT: 1. Track number of screening events offered. (Output) 2. Track total number of participants and total numbers of screening tests performed. (Output) 3. Measure percentages of screening tests which are abnormal. (Short-term) 4. Tabulate demographic profile of participants served. (Short-term)

5. Record number of participants receiving active assistance with referrals and referred to MCWW. (Short-term)
6. Record number of participants receiving educational interventions. (Short-term)

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

1. Mercy program coordinator and staff time.
2. Laboratory equipment, cartridges, and supplies.

COLLABORATIVE PARTNERS:

1. Good Samaritans Care Center

Prioritized Need #2: Lung Disease

Goal 1: Reduce Tobacco use

PROGRAM 1: **Tobacco 21 Ordinance**

PROGRAM DESCRIPTION:

Raising the minimum age of legal access (MLA) of all tobacco products from 18 to 21 years of age, will prevent nicotine dependence in teenagers and young adults and, according the Institute of Medicine, will decrease initiation of youth smoking, decrease overall smoking rates, and increase the number of on-time births and newborns with a healthy weight. Passing the Tobacco 21 ordinance in Howell county and the surrounding Mt. View communities counties.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

1. Engage and Participate in Efforts to Create T21 laws in SW Missouri.
2. Provide education regarding such issues as tobacco use, vaping, related risk factors and prevention strategies and cessation.
3. Promote and support evidence -based cessation and related co-morbidities programs, services and treatments within the Mercy system and community at large.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

Short-Term Outcomes:

1. Increase awareness of the law that bans anyone under the age of 21 to purchase tobacco products.
2. Distribute pamphlets and educational materials to community members regarding the dangers of tobacco use.
3. Changes in skills, attitudes, and knowledge dangers of vaping in school age children

Medium-Term Outcomes:

4. Fewer minors under the age of 21 will be using tobacco products by 10%
5. Increase the number of tobacco cessation program participants
6. Reduce the number of coworkers that smoke by 10%

Long-Term Outcomes:

7. Changes in status or health or life conditions
8. 5 or more a(specific)communities will adopt Tobacco 21 initiatives

PLAN TO EVALUATE THE IMPACT:

1. Number of individuals less than 21 years of age that had tobacco products confiscated.
2. Decrease the total sales of tobacco products in Howell County and Mt. View Communities.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

1. Time, resources, funds, indirect expenses

COLLABORATIVE PARTNERS:

1. Howell County Health Department
2. Tobacco Free Missouri

Prioritized Need #3: Mental Health Disease

Goal 1: Increase Awareness of Mental Health Disease

PROGRAM 1: **Mental Health Services Inventory/Assessment/Pilot**

PROGRAM DESCRIPTION: Mercy St. Francis will collaborate with community partners to conduct a current assessment of behavioral health services offered, identify any existing gaps and develop a plan to pilot creative collaborative approaches to meet community behavioral health needs.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

1. Conduct an internal inventory of existing Mercy behavioral health services.
2. Conduct an external inventory of existing local community services offered by other health systems, non- profit and for-profit agencies.
3. Review data from any existing community assessments, resource list inventories and other reports.
4. Identify gaps in service, explore Mercy ministry solutions and other best practice options, and develop a plan to pilot a minimum of one initiative.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

Short-Term Outcomes:

1.By the end of FY20, the internal and external assessments will be completed.

Medium-Term Outcomes:

1. By the end of FY21, community need gaps will be identified and a plan, including funding support will be proposed for pilot initiative(s).

Long-Term Outcomes:

1. By the end of FY22, the pilot plan, if adopted, will be implemented and initial outcome data presented.
PLAN TO EVALUATE THE IMPACT: Impact evaluation approach will be dependent on program piloted. Measurement tools will include, but are not limited to: 1. Number of internal behavioral health programs. 2. Numbers of patients and community members served. 3. Analyses of available outcomes data, for example, utilization, readmission, and change in contribution margin.
PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT: 1. Cost of coworker time 2. Operational budgeted support as appropriate 3. Philanthropy support as needed
COLLABORATIVE PARTNERS: 1. To be determined based on pilot program(s) proposed.

III. Other Community Health Programs

Mercy St. Francis conducts other community health programs not linked to a specific prioritized health need. These programs address a community health need and meet at least one of the following community benefit objectives: improve access to health care services, enhance the health of the community, advance medical or health care knowledge or relieve or reduce government burden to improve health. The need for these programs was identified through documentation of demonstrated community need, a request from a public health agency or community group, or the involvement of an unrelated, collaborative tax-exempt or government organization as partners in the activity or program carried out for the express purpose of improving community health. Although this is not an exhaustive list, many of these programs are listed below.

Community Benefit Category	Program	Outcomes Tracked
Community Health Improvement Services		Persons served
	Diabetes Support Group	Persons served
		Persons served, cost of services
	Community Health Fairs & Screenings	Persons served
	Community health education talks	Persons served
		Persons served
		Persons served
		Persons served, cost of services
Health Professions Education		Number of residents
		Numbers of students
Financial and In-Kind Contributions	First Aid and EMS Standby for community walks and runs	Cost of services
Community Building Activities – Workforce Development		Number of students
		Number of students
	Teen and college student volunteer programs	Number of students
Community Building Activities – Environmental Improvements		Cost of project

IV. Significant Health Needs Not Being Addressed

A complete description of the health needs prioritization process is available in the CHNA report. Three health issues identified in the 2019 CHNA process—heart disease, cancer, and substance abuse—were not chosen as priority focus areas for development of the current Community Health Improvement Plan Due Mercy's current lack of resources available to address these needs and the intention to focus on the four prioritized health needs. These issues will be addressed indirectly in implementation strategies developed to meet the prioritized needs in areas that may overlap. For example, efforts to reduce the incidence of type 2 diabetes in the community may also reduce the incidence of heart disease. Additionally, related community partnerships, evidence-based programming, and sources of financial and other resources will be explored during the next three-year CHIP cycle. Mercy St Francis will consider focusing on these issues should resources become available. Until then, Mercy St. Francis will support, as able, the efforts of partner agencies and organizations currently working to address these needs within the community.

NOTES:

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