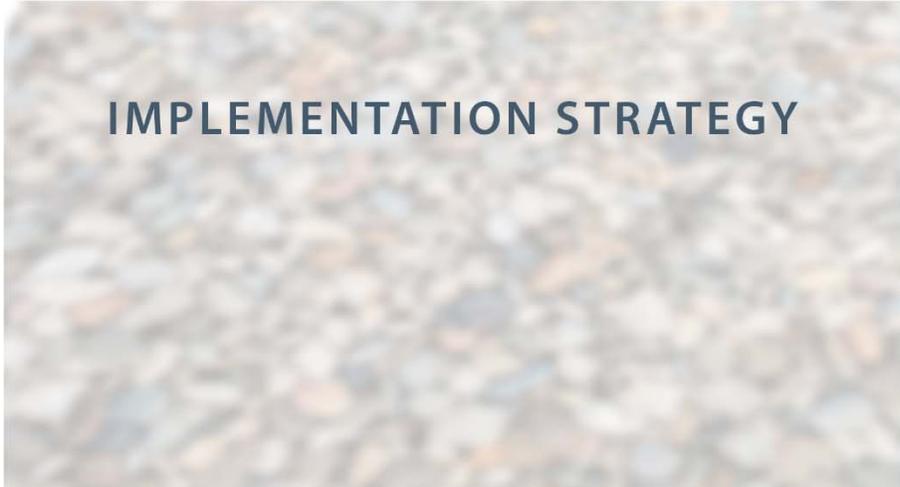




Community Health Network

2018



IMPLEMENTATION STRATEGY



South
Region

About This Document

This document describes how Community Hospital South (the hospital) plans to address needs found in the Community Health Needs Assessment (CHNA) published by the hospital on December 31, 2018. See the CHNA report at:

eCommunity.com/community-benefit/archived-reports

The implementation strategy describes how the hospital plans to address significant community health needs in calendar years 2019 through 2021.

The Implementation Strategy for Community Health Network (CHNw) has been prepared to comply with federal tax law requirements set forth in Internal Revenue Code Section 501(r) requiring hospital facilities owned and operated by an organization described in Code Section 501(c)(3) to conduct a CHNA every three years. Secondly, it will adopt an Implementation Strategy to meet the community health needs identified through the Community Health Needs Assessment reports for each hospital facility. The Implementation Strategy will satisfy each of the applicable requirements.

Community Hospital South reserves the right to amend this implementation strategy as circumstances warrant. Certain community health needs may warrant increased focus and resources during the next three years. Moreover, other organizations may decide to increase resources devoted to addressing one or more of the significant community health needs, or grant funds that support described initiatives may become unavailable, and as a result, the hospital may amend its strategies and focus on other identified needs.

The document contains the following information:

1. About Community Hospital South
2. Definition of the Community Served, and Determining Its Needs
3. Implementation Strategy to Address Significant Health Needs
4. Needs Community Hospital South Will Not Address
5. Next Steps for Implementation Strategy Adoption

Adopted by the Community Health Network, Inc. Board on: March 11, 2019



About Community Hospital South

Established in 1989, Community Hospital South (CHS), formerly University Heights Hospital, started bringing much needed services to the area, beginning with a hospital expansion that doubled in size and added maternity services just a few years later. In addition, to building health pavilions that bring ambulatory care to convenient places close to home, a freestanding cancer center was built offering an affiliation with MD Anderson Cancer Network. Community cares for more than 42,000 children through their school-based clinics, are partners with the University of Indianapolis with an onsite health clinic and higher education partnership. Most recently, the region opened the new Community Rehabilitation Hospital South.

Key Statistics

Admissions:	9,954
Emergency room visits:	55,459
Babies born:	1,679
Surgeries (at hospitals, inpatient and outpatient):	4,287
Physician & Clinic Visits:	709,346

The Community Served and Its Needs

Key Demographic Data

- The current population is 371,888. A five-year trend (2018-2023) shows population at 403,765.
- Whites comprised 86.9% of the population, with African-Americans at 3.2%, Hispanic/Latino at 4.1%, and 5.8% other race or ethnicity.
- The fastest growing age group is 65+ at 18.9%
- The South Region will experience 4.2% growth between 2018-2023. This population, however, represents a significantly smaller portion of the total population than the other age demographics
- The South Region has a higher median household income than the State and the Indianapolis market service area (MSA) at \$56,644

Creating the Community Health Needs Assessment

The identification of health needs for CHNw South Region was carried out using two types of data: 1) secondary data from the Healthy Communities Institute (HCI) dashboard and other local and national agencies; and 2) primary data obtained through an online survey of CHNw healthcare providers and a survey of community residents in each CHNw region. To supplement these data and identify population-specific health needs, CHS directed a focus group with twenty-eight community stakeholders, representing twenty-six organizations. Key informant interviews were also conducted with the State of Indiana's top health leaders: Director of the Marion County Public Health Department, the Commissioner for the Indiana State Department of Health, and the Family and Social Services Administration.

Implementation Strategy

To Address Significant Health Needs

This implementation strategy describes how CHS plans to address the significant community health needs identified in the 2018 CHNA. The hospital reviewed the CHNA findings and applied the following criteria to determine the most appropriate needs for the CHS Region to address:

- The extent to which the hospital has resources and competencies to address the need
- The impact that the hospital could have on the need (i.e., the number of lives the hospital can impact)
- The frequency with which stakeholders identified the need as a significant priority
- The extent of community support for the hospital to address the issue and potential for partnerships to address the issue

By applying these criteria, the hospital determined that it would address the significant health needs identified by Y (for Yes) in the table that follows. Issues identified by N (for No) represent issues that the hospital does not plan to address during the 2019-2021 time period.

Significant Health Needs Identified in the 2018 CHNA	Intend to Address
1. Social Determinant of Health*	Y
2. Mental Health	Y
3. Substance Abuse (Alcohol)	N
4. Substance Abuse (Opioids and Other Drugs)	Y
5. Obesity	Y
6. Sexually Transmitted Diseases	N
7. Access to Health Services	Y
8. Chronic Disease Management	N
9. Food Insecurity	N
10. Tobacco	Y

*Social Determinant(s) of Health are addressed in Mental Health, Substance Abuse (Opioids and Other Drugs) Access to Health Services and Tobacco.

SIGNIFICANT HEALTH NEED *Mental Health*

Indicator Rankings

The Mental Health indicators ranked of highest concern at a system level are listed below. The system-level rankings can be found for each indicator in the *Highest Ranking CHNw Health Indicators* table.

- Pediatric Mental Health
- Adolescent Suicide and Intentional Self-Inflicted Injury
- Mental Health
- Suicide and Intentional Self-Inflicted Injury

Goal 1: Improve Access to Mental Health Services and QPR Training

Interventions/Recommendations

- Improved access to mental health providers can be achieved through outpatient therapy/counseling, specifically early identification programs and integrated care models that can help to identify those most in need for prioritization
- Continued support of 24 hour crisis intervention
- Improve mental health screening in primary care settings by providing trainings and tools for primary care practitioners and organizational policies to encourage the use of screenings and electronic health record (EHR) prompts. Increase screening capacity within primary schools (requires school personnel to be trained on signs/symptoms; can be state policy-driven; and/or partnerships with schools for training)
Improve screenings in primary care settings
- Continue to utilize current school based mental health clinics to provide education and training to educators, providers, parents and children
- Partner/collaborate with community-based organizations and congregations to provide education and training about mental health and available resources:
 - Empower Johnson County
 - Reach for Youth
 - Healthy Southside Initiative
 - Baxter YMCA
 - Partnership for a Healthier Johnson County
 - Burmese American Community Institute
 - Hope For Tomorrow
 - The Chin Center
 - South Indy Quality of Life
 - Greenwood High School Mayor's Youth Council
- Encourage and support community greening initiatives in the utilization of green spaces
 - Community garden beds at the University of Indianapolis, Bethany Lutheran Church and the City of Greenwood

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- Continued support of the integration of Zero Suicide Initiatives which is already a part of the continuum of care model in Behavioral Health
 - Provide two QPR Institute Gatekeeper certificate programs annually
 - Continued support for and advocacy of the CHNw current Nurse Family Partnership collaboration through Goodwill Industries

Collaboration

- Health Care Providers
- Employer Health
- Adult & Child Community Mental Health Center
- Jane Pauley Federally Qualified Health Center
- Perry Township, Greenwood, and Johnson County School Systems
- Community-based organizations
- Faith based community and CHNw Faith Health Initiative
- South Region law enforcement and first responders

Anticipated Impacts

- Increased access through improved screening
- Increased percentage of participants that understand the concepts of mental health and availability of resources through education and training
- Increased education and awareness of suicide prevention through QPR training impacting 50+ participants annually

Evaluation Metrics

- Assess impact during 2021 CHNA
- Number of clients treated

SIGNIFICANT HEALTH NEED *Substance Abuse (Opioids and Other Drugs)*

Indicator Rankings

The four substance abuse indicators that ranked the highest at a system level are listed below. The system-level rankings can be found for each indicator in the *Highest Ranking CHNw Health Indicators* table.

- Substance Abuse
- Alcohol Abuse
- Drug Poisoning
- Adults who drink excessively

Goal: Treatment

Interventions/Recommendations

- Enhance CHNw’s capacity for substance abuse disorder treatment by developing licensed clinical social workers (LCSWs) who are dually licenses as clinical addiction counselors (LCACS). CHNw currently has a Behavioral Health Academy Program designed to address the shortage of Behavioral Health providers.
- Continue to offer and recruit CHNw physicians to complete training and provide care in behavioral health outpatient offices to clients in need of Medication Assisted Treatment (MAT)
- Evaluate the utilization of Screening, Brief Intervention and Referral to Treatment (SBIRT) program as part of the screening process in primary care settings
- Implementation of youth prevention programs to educate and train children and adolescents about alcohol and drug use
- Continue support for and participation in Medication Take Back Program system-wide
- Continue support public education and awareness regarding substance abuse and addiction
- Provide substance use and prevention curriculum to educate and train at least 10 faith based organizations about alcohol and drug use
- Continued support for and advocacy of the CHNw current Nurse Family Partnership collaboration through Goodwill Industries

Collaborations

- Health care providers
- Employer Health
- Adult & Child Community Mental Health Center
- Jane Pauley Federally Qualified Health Center
- Perry Township, Greenwood, and Johnson County School Systems
- Community-based organizations within the South Region such as:

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- Empower Johnson County
 - Reach for Youth
 - Healthy Southside Initiative
 - Baxter YMCA
 - Partnership for a Healthier Johnson County
 - Burmese American Community Institute
 - South Indy Quality of Life
 - Greenwood High School Mayor's Youth Council
 - Faith Based Communities and CHNw Faith Health Initiative
 - South Region law enforcement and first responders

Anticipated Impacts

- Reduction of drug use
- Reduce long-term impact of drug abuse on the community

Evaluation Metrics

- Increased participation in Medication Take Back Programs System-Wide
- Increased participation in youth prevention programs
- Development of SBIRT Pilot Program to increase screening capacity
- Increase the number of behavioral health providers
- Increase public education and awareness through two subject matter expert speaking events annually/impacting 50+ participants
- Offer free Naloxone (Narcan) training to the public annually with kits provided upon training conclusion

SIGNIFICANT HEALTH NEED *Obesity*

Indicator Rankings

The two obesity indicators that ranked highest at a system level are listed below. The system-level rankings can be found for each indicator in the *Highest Ranking CHNw Health Indicators* table.

- Long-term complications of diabetes
- Short-term complications of diabetes

Goal: Provide Education, Training and Nutrition Program Opportunities to Individuals to Reduce Obesity Thereby Resulting in a Reduction of Obesity-Related Diseases such as Diabetes and Heart Disease

Interventions/Recommendations

- Continue to provide fresh harvest to food insecure residence from community gardens
- Increase participation in community gardening and provide gardening classes at no cost
 - University of Indianapolis and Bethany Gardens
- Continue cooking demonstrations that provide education on healthy food and nutrition
- Provide medically tailored meals free for 30 days to patients who are food insecure with diabetes and or congestive heart failure

Collaborations

- Health Care Providers
- Community-based organizations
 - Sacred Heart
 - Hunger Inc.
 - Baxter YMCA
 - Meals on Wheels
- Faith based communities and Faith Health Initiative

Anticipated Impacts

- Increase knowledge of available resources
- Increase availability of education and training program opportunities

Evaluation Metrics

- Measure number of participants in community outreach and education/training classes on healthy food and nutrition in order to reduce obesity
- Measured number of participants that have improved health screening results
- Measured number of participants that demonstrate changes in their behavior

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- Measured number of community garden beds with accompanied education on use of fresh vegetables and fruit
 - Measured number of participants in combined diet/activity programs

SIGNIFICANT HEALTH NEED *Tobacco Use/Smoking*

Indicator Rankings

The Tobacco Use/Smoking indicators ranked of highest concern at a system level are listed below. The specific rankings can be found for each indicator, are listed in the *Highest Ranking CHNw Health Indicators* table.

- Adults who Smoke
- Mothers who Smoked During Pregnancy
- Preterm Births
- Babies with a Low Birth Weight

Goal: Reduction in the Use of Tobacco and Tobacco-Related Products

Interventions/Recommendations

- Support and advocacy for Tobacco-Related Community/State Policies
- Clinical/Systems Interventions for tobacco cessation which include service-based and/or system-wide policy changes
- Incentive-based Smoking Cessation Program for Pregnant Women
- Continued support for and advocacy of the CHNw current Nurse Family Partnership collaboration through Goodwill Industries

Collaborations

- Providers
- Community-based organizations
- Schools
- Youth organizations
 - Reach for Youth
 - Greenwood High School Mayor's Youth Council
 - Empower Johnson County
 - Burmese American Community Institute
- Faith based community and CHNw Faith Health Initiative

Anticipated Outcomes

- Increase quality of education surrounding tobacco use
- Decrease in tobacco use
- Increase knowledge of existing resources



Evaluation Metrics

- Reduction in number of participants that use tobacco or tobacco related products
- Increased number of participants in tobacco cessation programs
- Increased number of Tobacco Cessation education and training programs
- 50% reduction of Nurse Family Partnership expecting mothers who reduce or quit smoking prior to their child's birth annually

SIGNIFICANT HEALTH NEED *Access to Care*

Indicator Rankings

The Access to Care two indicators that ranked the highest at a system level are listed below. The system-level rankings can be found for each indicator in the *Highest Ranking CHNw Health Indicators* table.

- Access to health insurance coverage
- Access to health care providers

Goal(s): Increase Access to Health Care Education, Information and Resources; Free or Reduced-Cost Screenings; Increase Education on Insurance, Including Eligibility, Enrollment and Understanding of One’s Medical Bills

Interventions/Recommendations

- Continue support for free Know Your Numbers screenings
- Provide pre-diabetic programs for those who are diagnosed as pre-diabetic to delay the onset of diabetes for free or a reduced rate
- Continue support and advocacy for the CHNw current Nurse Family Partnership collaboration through Goodwill Industries
- Implementation of a Medical Legal Program providing free civil legal services
- Provide medically tailored meals free for 30 days to patients who are food insecure with diabetes and or congestive heart failure
- Explore telehealth options to expand affordable access to care
- Continue and support medical cost transparency and education about healthcare insurance
- Continue support and advocacy for urban gardens providing fresh harvest free or a reduced rate

Collaborations

- Health Care Providers
- Perry Township, Greenwood and Johnson County School Systems through the CHNw School Based Nursing Program
- Community-based organizations
- Case management, social workers, and financial counselors
- Faith-based communities

Anticipated Impacts

- Assess impact during 2021 CHNA
- Number of participants assisted by CHS’s Financial Counselors



Evaluation Metrics

- Measured number of participants in community outreach and education/training classes
- Measured number of participants that have improved health screening results
- Measured number of participants that utilize free and reduced rate screenings
- Measured number of participants that utilize free civil legal services



Health Needs Not Addressed

Health needs not identified as a priority fall into one of three categories:

1. Beyond the scope and capacity of CHNw services
2. Needs further intervention, but no plans to expand community benefit services at this time
3. Rely on community partners to lead efforts with expertise in these areas with CHNw in a supporting role

The needs identified below are not specifically included in the hospital's Implementation Strategy for 2019-2021:

1. Social Determinant(s) of Health. Social Determinant(s) of Health are addressed in Significant Health Needs such as Access to Care, Mental Health, and Obesity.
2. Substance Abuse (Alcohol). CHNw will continue its course of action in addressing substance abuse (alcohol).
3. Sexually Transmitted Diseases. CHNw will continue its course of action in addressing Sexually Transmitted Diseases.



Next Steps for Implementation Strategy Adoption

1. Build consensus around an evaluation plan
2. Decide what goals are most important to evaluate
3. Determine evaluation methods
4. Evaluate current partnerships and create new health-need focused alignment
5. Identify indicators and how to collect data (process and evaluation measures)
6. Identify benchmarks for success
7. Establish data collection and analysis systems
8. Collect credible data
9. Monitor progress toward achieving benchmarks
10. Review evaluation results and adjust programs
11. Share results with CHNw community, and as needed, with the community