

2013 Platte Health Center Avera Implementation Strategy

Introduction:

Community health needs assessments are a tool used to help communities determine their capacity and use of resources by residents. It is also the foundation for improving and promoting the health of county residents. **Community health assessment is a key step in the continuous community health improvement process.** The role of the process is to identify factors that affect the health of a population and determine the availability of resources within the county to adequately address these factors.

The Community Health Needs Assessment is also a part of the required hospital documentation of "Community Benefit" under the Affordable Care Act. Non-profit hospitals are now required to perform community assessments to help them determine community benefit and plan for the future. Further explanation and specific regulations are available from Health and Human Services, the Internal Revenue Service and the U.S. Department of the Treasury.

This community health assessment is the first of its kind for Platte Health Center Avera. In order to comply with the established regulations, Platte Health Center Avera completed the following:

- Community Health Needs Assessment report, compliant with IRS – Treasury;
- Provide the Hospital information needed to complete the IRS – 990h schedule; and
- Develop an implementation strategy for the hospital to issue an assessment of community health needs and document how it intends to respond to the needs.

Platte Health Center Avera will conduct a community health needs assessment every three years to evaluate the health of the community, identify high priority health needs, and develop strategies to address the needs of the community. The 2013 Platte Health Center Avera community health needs assessment represents a combination of quantitative and qualitative information based on census data, patient data, and focus group feedback from several community organizations and leaders. Data for Charles Mix County was compared to statewide data as well as national data and benchmarks such as Healthy People 2010. This report summarizes the results of the analysis.

How Strategy & Plan Developed:

(Who was involved & How the Assessment was conducted)

Platte Health Center Avera began the process by initially participating in an educational and planning session conducted by Avera Health. From that meeting, the organization established a Community Health Needs Assessment committee that included the facility Chief Executive Officer, Chief Finance Officer, and Director of Patient Care Services.

The community health needs assessment was conducted by Platte Health Center Avera which also provided the financial and in-kind support for the assessment process. Since the greatest portion of the organization's patients and customers reside in county of Charles Mix and the towns of Platte and Geddes, an online and paper survey was utilized to solicit input from the community regarding potential community health needs. Individual and four focus group interviews were also completed.

The focus group members included representation from the medical community, healthcare center staff, business owners, farmers, and public health. Platte Health Center Avera also reached out to the local Hutterite Brethren Colony Ministers. A letter was sent inviting the Ministers to participate in the community health needs assessment and discuss their primary health concerns and needs.

Platte Health Center Avera collected qualitative or primary data through the use of this community wide survey. This survey was conducted targeting a wide range of stakeholders within Platte Health Center Avera's primary service area between May 15 and July 10, 2012. A press release was placed in the local paper (Platte Enterprise) and an email was sent out to all businesses through the Platte Chamber of Commerce. This survey was made available to all Platte Health Center employees, medical staff members, Platte Chamber members, and community members at large on the facility's website. In addition, paper copies of the survey were available during normal business hours at the Platte Medical Clinic and Hospital information desk, to persons who did not have access to or feel comfortable completing the survey online. The paper surveys were placed in unmarked envelopes with drop boxes available in the community. The surveys were picked up at random intervals and then manually entered into the survey monkey.

Platte Health Center Avera then proceeded to gather the most recent statistics about public health from county, state, and national sources. Data was collected from the US Dept. of Human Services, US Centers for Disease Control, Bureau of Labor Statistics, US Census Bureau, SD Epidemiology Profile, SD Medicaid and medically uninsured. In addition, the County Health Rankings website was utilized as it provides a wealth of information on nearly every county in the nation. Published by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation, this resource helps counties and other organizations like Platte Health Center Avera understand the many variables that influence health. In addition, the South Dakota Department of Health statistics provides additional information on the health status by county in South Dakota. Information was also obtained from the organization's Emergency Department and Inpatient unit.

Platte Health Center Avera reviewed all of the qualitative and quantitative data collected then conducted four community focus groups and interviewed the community health nurse. The results of the Community Health Needs Assessment survey were reviewed and common themes among the data were identified.

Target Areas & Population:

Charles Mix County is predominately a frontier area. The local area economy is heavily dependent on agriculture. The annual median household income is \$33,135, with 24.3 percent of the population living below the poverty level (\$22,350/year for a family of four). The service area population is 98.4% white and experienced a slight population decrease of 2.4% since the last census.

During 2012 and 2013, a Community Health Needs Assessment was conducted by Platte Health Center Avera for the approximately 5,000 people residing in the Platte Health Care Center Avera primary service area. The organization serves its host city, Platte, SD and its partnered city of Geddes, SD, the top 1/3 of Charles Mix County and the bordering counties of Aurora, Brule, and Douglas counties in South Dakota.

Community Assets Identified:

The assessment identified a number of strong community assets, including the health care center, care center, rural health clinics, highly qualified medical staff, strong volunteer ambulance service, public school system, strong business community, numerous religious congregations and community volunteer groups.

Major Needs:

Platte Health Center Avera has cared for the people of our region for over 65 years. The facility takes pride in providing care to our clients in a modern facility equipped with the highest level of technology for today's needs right here at home. From health education to disease prevention to diagnosis and treatment, the facility provides services to get people well and keep them well. The facility takes pride in providing access to quality healthcare in a rural community.

Disease rates are higher than State and National Rates for acute myocardial infarction, cancer (colon, rectal, anal, prostate, pancreas), accidents, diabetes, influenza, pneumonia, suicide, chronic liver disease, and infant mortality. When compared to State and National benchmarks, Charles Mix County ranked lower in the areas of adult smoking, obesity and alcohol consumption. The community confirmed these as areas of concern and expanded the concern to include the youth population. For Charles Mix County, the sexually transmitted infection rates, teen birth rates and tobacco use in pregnancy were also statistically higher. The county's uninsured rates, primary care physician ratios, and preventable hospital rates were higher; with diabetic screening and mammography screening activities better than the state and national averages.

In addition, concerns related to **accessibility and affordability of health care services** were identified. Over 25% of the survey respondents as the top priority and was also mentioned by the community health nurse during the interview; while people may have major medical insurance, the deductible and co-pay amounts related with these plans impact their access to primary and specialty care services. A request for

access to additional specialty physicians was also expressed as a need for the service area. **Healthy lifestyle choices and health promotion activities** were also identified as a priority. The local survey group identified this as a need and requested community education and wellness programs targeted at services to help them stay healthy or support them in the management of their current health conditions.

Additional health issues were identified from the assessment and they included heart disease, diabetes, and cancer. Charles Mix County rates statistically higher for all of these disease states than the state and nation, with death from heart disease being the leading cause of death for the county. Cancer is the 2nd leading cause of death for the county.

Access and services related to mental health/substance abuse issues was identified as a major concern in the CHNA. More than 38% of respondents commented that mental health issues and alcohol consumption for adults and teens was something that was “unhealthy” about our community. Charles Mix County and the hospital’s service area have limited access to mental health and substance abuse programs. South Dakota ranks 10th in the state rankings of suicide and intentional self-harm is the 9th leading cause of death. In addition, accidental death is the leading cause of death in the county for those aged 1-44, with 20% of highway fatalities in 2009 being alcohol related.

The community often looks to the organization to impact the overall health and quality of life in the surrounding service area. Through the CHNA survey, participants had the opportunity to provide feedback related to how the organization could provide **community building activities** to improve the overall health and quality of life in the community. Survey participants identified prevention/screening/wellness activities, mental health services/counseling, support groups, affordable elderly housing and walking/bike trail as community needs.

How Priorities Were Chosen:

The top 7 themes were placed into prioritization template, shared with established focus groups and scored based on the significance of each need. Criteria was based on size, seriousness, economic feasibility, potential for impact, availability of community assets, need due to limited community assets, probability of success, and value of the presented themes. The focus groups scored the health issues based on each stated criteria using a 1-5 scale, with “1” indicating the lowest score for significance, feasibility, or probability and “5” indicating the highest score and maximum score possible of 40. From this process, the top 4 needs facing the community were identified as need for prevention/screening activities, heart disease, obesity, and mental health services.

What will the Hospital Do:

Platte Health Center Avera are committed to developing hospital services and other community-based programs that are tailored to meet the needs of the communities we serve. Platte Health Center Avera has cared for the people of our region for over 65

years. The facility takes pride in providing care to our clients in a modern facility equipped with the highest level of technology for today's needs right here at home. From health education to disease prevention to diagnosis and treatment, the facility provides services to get people well and keep them well. The facility takes pride in continuing to provide access to quality healthcare in a rural community. The facility is proud of this record and look forward to using the findings from the assessment to refine our current services and develop new community programs and partnerships.

Action Plans/ Next Steps:

The Board of Trustees of Platte Health Center Avera has determined that the following health needs identified in the Community Health Needs Assessment should be addressed through an implementation strategy noted for each identified need.

Access to health care: Ensure community members, including uninsured and working poor have access to healthcare, including access to primary care providers, mental health providers, and preventative care activities. Partner with established state education programs to promote/enhance health education and improve access and quality of care for the region.

Health improvement and promotion: Develop strategies for engaging customers in activities that are healthy and safe. Partner with community groups to promote health (reduce obesity), prevent disease (heart disease, diabetes, cancer) and reduce substance use in the service area. Maintain current level of support for subsidized health services and screening activities (Diabetes/Mammography) in the community and promote new screening activities to promote health.

Mental Health Services/Counseling/Support Groups: Develop strategies for provision of mental health services in the community. Explore partnerships with Avera Health and University of South Dakota School of Medicine to promote mental health services and counseling in the Rural Health Clinic setting. Work with regional hospital partner for provision of eServices.

Professional Education Plan: Develop strategies to partner with the Frontier and Rural Medicine Program and Rural Education for Health Professional Student programs to promote health education and offer rural clinical experiences for health professional students.

Subsidized Health Services: Platte Health Center Avera's review of current community benefit programs found that the hospital is meeting existing community needs through the provision of charity care; Medicaid and SCHIP services, homemaker services, recently introduced Avera Care Transition Program, community and health professional education programs. These activities were determined to be additional priorities for the hospital's community benefit plan.

Needs Not Being Addressed & Why:

Each of the health needs identified is important throughout the community. However, due to limited human and financial resources, the organization will not address the following needs as a part of its implementation plan: Public service and infrastructure needs, such as improving access to elderly housing, transportation, and law enforcement needs, walking/bike trail, high school graduation rates, and crime.

The community also suggested some service expansion needs. Orthodontia will not be pursued as dental health is not a part to of current services. Dialysis will not be pursued as it is not considered and underserved need due to access to dialysis centers in the neighboring communities of Chamberlain, Gregory, Mitchell, Wagner and Yankton. The organization will not address affordability of insurance coverage as this is not the organization's area of expertise.

Board Approval:

This report was prepared for the May 30, 2013 meeting of the Platte Health Center Avera Governing Board.

Platte Health Center Avera Governing Board Approval:

Robert T. R Board Chairman
By Name and Title

5-30-13
Date