

Implementation Strategy: Avera Landmann-Jungman Memorial Hospital Community Health Needs Assessment

Organization Mission

Landmann Jungman Memorial Hospital is committed to providing the highest quality healthcare with compassion and respect. Our commitment shall be to the ethical treatment of all people throughout the continuity of life. We recognize the constantly changing face of healthcare and we pledge to continually strive to meet the changing healthcare needs of our community. Through a constant review of our goals, commitment to our ideals, and efficient management, we look forward to providing quality care to the community for years to come. As an Avera managed facility, the mission of Avera includes that Avera is a health ministry rooted in the Gospel. Our mission is to make a positive impact in the lives and health of persons and communities by providing quality services guided by Christian values.

Community Served

Landmann Jungman Memorial Hospital is located in Scotland, S.D. Scotland is located in Bon Homme County, S.D., in the south central part of the state. Agriculture is the primary economic driver in the county. Landmann Jungman's primary service area is defined as Bon Homme County. In fiscal year 2018, 81 percent of inpatient discharges and 68 percent of Emergency Room visits were from Bon Homme County. According to the U.S. Census Bureau's 2016-2017 estimated data, the population of Bon Homme County was just over 7,000 people and is predominately White/Caucasian (89%). About 20 percent of the population is over the age of 65. County Health Rankings assesses the unemployment rate of Bon Homme County at 2.6 percent compared with the state of South Dakota's 2.8 percent unemployment (2018.) County Health Rankings states that the median household income of Bon Homme County is \$48,023, which is about \$4,000 less than the state's average (2016). The percentage of persons 100 percent below the Federal Poverty Level in 2018 was 10.4 percent; about 1/5 of households are single parent households within the county. US Census data shows high school graduation in the county at 89 percent, which is above the State rate, but reports adults over 25 years of age with a Bachelor's degree or higher at 18.3 percent, which is significantly below the State rate (2012-2016). The secondary service area includes portions of Hutchinson and Yankton counties. Hutchinson and Yankton Counties are demographically similar to Bon Homme County with rural, agricultural lifestyles. In fiscal year 2018, these two counties made up 15 percent of inpatient discharges and 24 percent of Emergency Room visits. Landmann Jungman has about 4,000 clinical encounters a year for one or more services at the health center.

There are two hospitals located in Bon Homme County, namely St. Michael's Hospital Avera and Landmann Jungman Memorial Hospital. St. Michael's Hospital Avera is located in Tyndall, S.D., which is about 22 miles southwest of Scotland. Both hospitals are considered essential community services.

Implementation Strategy Process

The assessment process started with a core group of hospital staff and administration discussing the best approach to the CHNA. It was decided to approach the assessment from a multi-factorial data gathering process.

1. Statistical data from reliable data repositories or agencies
2. Formal interviews

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3. Information discussions
4. Focus groups
5. Anonymous survey
6. Review of clinical/medical services and grant projects at Landmann Jungman.

After the completion of the Community Health Needs Assessment process, the CHNA Committee reconvened to discuss the prioritized health needs. This included discussing each prioritized area and developing a plan to address them. The committee then set strategic goals to address health needs identified in the Community Health Needs Assessment, completing the implementation strategy.

Health Needs Identified in CHNA

Identified health needs through the data gathering process were identified to help prioritize areas and realistically choose options for the health center to address.

Behavioral Health Concerns. Behavioral Health needs identified during the process included multiple different topics and areas of need. These needs included substance use, mental health counseling access, lack of access for behavioral health care, substance use education, and other health behavior education for the teen population in general.

Social Determinants of Health. Many different social determinants of health were identified as needs, ranging from dilapidated homes, poverty, transportation issues, to lack of childcare options.

Health Education. Health education for many topics was assessed and identified as a need. Some of the examples of needed health education include more health education in the school not only with students but also with staff, immunization education, youth health education, and healthcare workforce education.

Chronic disease treatment and prevention. Needs identified include providing care for chronic diseases as well as preventing diseases in our community. Diabetes, cancers, and cardiac diseases all ranked high as needs identified in our service area.

Obesity. Needs related to obesity were at the forefront of community concern. Not only from a data analysis point of view, but also from lack of exercise and perceived limited healthy food options. Having an exercise friendly built environment outside of the hospital walls was a significant need identified. This included sidewalk repairs, bike and walking trails, and wintertime exercise options that appeal to all ages. Poor overall nutrition habits, lack of healthy options when eating out, and healthy eating education across a lifespan were all identified needs.

Access to health care from pediatric to geriatric. Having healthcare and maintaining healthcare in the service area was a recurrent theme as a health need identified. This ranged from clinic care, specialty access, emergency room care, therapy services, EMS shortage, dental services, pediatric and geriatric care, urgent care clinic hours, and expanded pharmacy services.

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Prioritized Health Needs

The CHNA committee discussed the health needs identified during the community health needs assessment and prioritized the needs based on the following criteria:

1. Estimated feasibility for the health care center to address the issue with current resources
2. Importance the community placed on the need
3. Burden, scope, severity, or urgency of the health need
4. Health disparities associated with the need

Behavioral Health Concerns. Behavioral Health needs were prioritized based on importance placed by the community through interviews, focus groups, and survey data. Although there are some limits to feasibility to address all behavioral health needs, the implementation plan will help strategize goals in the area of behavioral health concerns.

Health Education. Health education was prioritized based on importance placed by the community and feasibility for the health center to address the issue with current resources. It is recognized that we can provide health education in our community in various locations and formats to help increase health literacy and promote a culture of prevention.

Access to health care from pediatric to geriatric. Access to care was a critical factor discussed in focus groups, interviews, and in the electronic survey. The CHNA committee recognized this as a prioritized health issue based on data collected during the CHNA. Research indicates that access to quality health care can relieve the burden of health disparities and address psychosocial factors of health, such as transportation. This was also viewed as realistic in scope for the health center to address with current resources. Although there are some limits to feasibility to address all health care needs, the implementation plan will help strategize goals in the area of access for care focusing on pediatrics, geriatrics, and chronic disease concerns.

Obesity and social determinants of health. Prioritizing obesity and social determinants of health by looking at health disparities contributing to these issues was the criteria used. It is felt at this time that the hospital cannot address the built environment, concerns over lack of healthy food access, dilapidated homes, poverty, lack of child care options, and transportation issues in the community alone. To help address these needs, the hospital will commit to having a representative at the table with local programs and projects that work together to address built environment issues related to exercise and healthy eating, as well as related social determinants of health.

Significant Health Needs to be Addressed

The Community Health Needs Assessment Committee met on September 13th, 2019 to discuss goals and an action plan to address the prioritized health needs of the community. For each of the actions plans under the overarching goals a specified Avera Landmann Jungman Memorial Hospital Staff member will be assigned as leader to implement the action plan area.

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Health Need to be Addressed: Behavioral Health Concerns

Overarching Goal: Provide access to behavioral health care and education in our community.

- 1.1.1. *Action Plan:* Provide behavioral health care access through telemedicine options, including eTriage and Avera Addiction Recovery Services.
- 1.1.2. *Action Plan:* Meet with community groups and stakeholders to educate the public on the services available.
- 1.1.3. *Action Plan:* Provide education materials on the Farmer Stress Hotline to local businesses.
- 1.1.4. *Action Plan:* Provide education about vaping, bullying, and other potential behavioral health related emerging topics.
- 1.1.5. *Action Plan:* Use social media platforms to provide behavioral health topic education.
- 1.1.6. *Resources Committed to Achieve Goal:* staff time; print materials
- 1.1.7. *Collaborations Needed to Achieve Goal:* Avera eCare team; school district; community groups such as Rotary, PEO, Parent Teacher Association
- 1.1.8. *Anticipated Impact:* Provide evidenced based education to children, adolescence, parents, and other community members to help reduce vaping. Educate 200 people about behavioral health emerging topics; Improve access to behavioral health services locally.

Health Need to be Addressed: Health Education

Overarching Goal: Provide health education in a variety of different learning platforms to Landmann Jungman's service area.

- 1.1.1. *Action Plan:* Provide digital media education for a variety of health issues.
- 1.1.2. *Action Plan:* Utilize the local newspaper to write health education articles.
- 1.1.3. *Action Plan:* Provide resource guides and education sheets for diseases that are prevalent in our service area and have them available via print/digital.
- 1.1.4. *Action Plan:* Assist with at school health education needs.
- 1.1.5. *Action Plan:* Provide in person and hands on health education of topics that appeal across a life span
- 1.1.6. *Action Plan:* Teach Hands Only CPR and Stop the Bleed in the school and community
- 1.1.7. *Action Plan:* Assist the local EMS with teaching certain education topics to EMS staff
- 1.1.8. *Resources Committed to Achieve Goal:* staff time; print materials
- 1.1.9. *Collaborations Needed to Achieve Goal:* School district, community groups, EMS
- 1.1.10. *Anticipated Impact:* Provide evidenced based health education to improve the health literacy of the service area.

Health Need to be Addressed: Access to health care from pediatric to geriatric

Overarching Goal: Improve access to health care in the service area.

- 1.1.1. *Action Plan:* Work towards expanding clinic hours for urgent care needs.
- 1.1.2. *Action Plan:* Thoroughly assess gaps in community transportation that effect individuals from being able to access health care.
- 1.1.3. *Action Plan:* Pilot a pharmacy delivery service.
- 1.1.4. *Action Plan:* Continue chronic care RN services.
- 1.1.5. *Action Plan:* Promote telehealth services to improve access to care while reducing transportation needs.
- 1.1.1. *Resources Committed to Achieve Goal:* administration and key staff time

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- 1.1.6. *Collaborations Needed to Achieve Goal:* nurses, pharmacists, volunteers, community groups
- 1.1.7. *Anticipated Impact:* Decrease unnecessary emergency room utilization; improve management of chronic diseases

Health Need to be Addressed: Obesity and social determinants of health

Overarching Goal: Promote healthy lifestyle through nutritional and exercise education and activities.

- 1.1.1. *Action Plan:* The hospital will commit to having a representative at the table with local programs and projects that work together to address built environment issues related to exercise and healthy eating.
- 1.1.2. *Action Plan:* Work with local restaurants, convenience stores, and grocery store to label healthy food options.
- 1.1.3. *Action Plan:* Create a “Shop with a Doc” program.
- 1.1.4. *Action Plan:* Launch “Walk with Ease” class.
- 1.1.5. *Action Plan:* Launch “Fit and Strong” class.
- 1.1.6. *Action Plan:* Explore feasibility for adding a Zumba class.
- 1.1.7. *Resources Committed to Achieve Goal:* administration and key staff time
- 1.1.8. *Collaborations Needed to Achieve Goal:* local businesses; SDSU Extension; local organizations and City Government
- 1.1.9. *Anticipated Impact:* Improve access to exercise activities; improve knowledge of healthy food options.

Significant Health Needs Not Addressed

When the Community Health Needs Assessment Committee met on September 13th, 2019 to discuss goals and action plans for the significant health needs, there was also discussion on what needs identified would not be addressed. Although many social determinants of health factors and built environment needs were considered a need in the community, the committee did not feel that this was realistic for the hospital to address alone nor by direct funding. Walking and bike paths, sidewalk repair, and home dilapidation are significant cost items and need ongoing maintenance, which the committee felt was a resource constraint for the hospital at this time from a financial perspective, as described above.

DATE ADOPTED BY AUTHORIZED BODY OF HOSPITAL: 10/29/19