



2020-2022 Community Health Needs Assessment — Implementation Plan

Adopted by the Mercy Health - Springfield Board of Trustees, Oct. 2, 2019

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3. Chronic Disease: Cancer (Specific focus on Bronchial & Lung and Colon & Rectum)
Heart Failure, Diabetes, COPD
4. Maternal/Infant Health, Healthy Births & Infant Mortality

Introduction

Springfield Regional Medical Center (“SRMC” or “Hospital”) is a 254-bed, full-service hospital providing inpatient, outpatient and ancillary health care services. SRMC, along with local health, education, social service, non-profit and governmental agencies participated in a Community Health Needs Assessment (“CHNA”) conducted for Clark County and surrounding areas. The detailed process, participants and results are available in SRMC’s Community Health Needs Assessment Report which is available at www.mercy.com/.

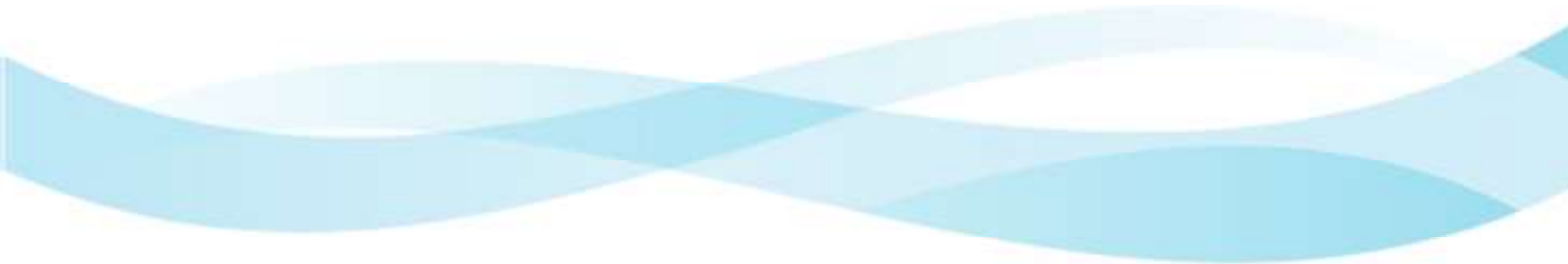
This Community Health Needs Assessment Implementation Plan will address the significant community needs identified through the CHNA. The Plan indicates which needs SRMC will address and how, as well as which needs SRMC won’t address and why. Beyond the programs and strategies outlined in this plan, SRMC will address the health care needs of the community by continuing to operate in accordance with its mission to extend the healing ministry of Jesus by improving the health of its communities with emphasis on the poor and under-served. This includes providing care for all individuals regardless of their ability to pay.

The strategies and tactics of this Implementation Plan will provide the foundation for addressing the community’s significant needs between 2020 and 2022. However, SRMC anticipates that some of the strategies, tactics and even the needs identified will evolve over that period. SRMC plans a flexible approach to addressing the significant community needs that will allow for adaption to changes and collaboration with other community agencies.

COMMUNITY SERVED BY THE HOSPITAL

For the purposes of the CHNA, SRMC is an acute care hospital located in the city of Springfield with 90% of patients served in Clark and Champaign Counties.

Geographic Identifiers: These areas are represented by the following Zip Codes: 45503, 45505, 45506, 45504, 45502, 43078, 45334, 45386, 45369, 45323, 43072, and 43044.



MISSION

We extend the compassionate ministry of Jesus by improving the health and well-being of our communities and bring good help to those in need, especially people who are poor, dying and underserved.

Mercy Health's Mission and culture are expressed through the organization's core values:

Human Dignity

We commit to upholding the sacredness of life and being respectful and inclusive of everyone.

Integrity

We commit to acting ethically and modeling right relationships in each of our individual and organizational encounters.

Compassion

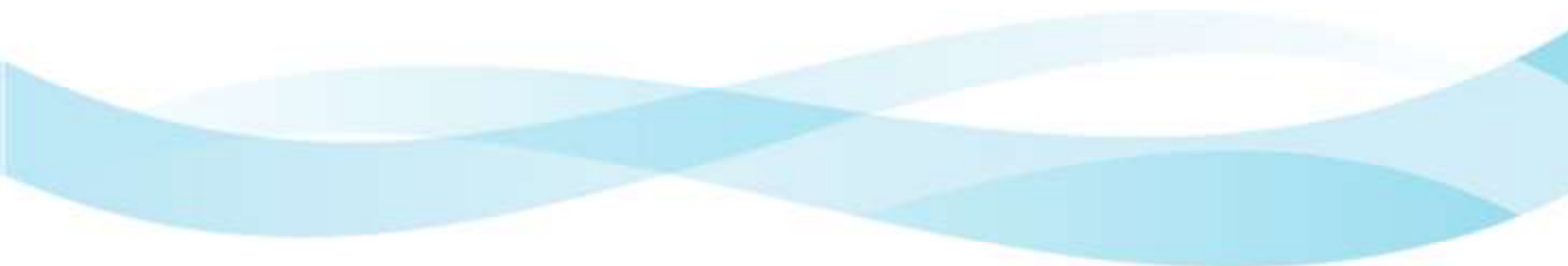
We commit to accompanying those we serve with mercy and tenderness, recognizing that "being with" is as important as "doing for."

Stewardship

We commit to promoting the responsible use of all human and financial resources, including Earth itself.

Service

We commit to providing the highest quality in every dimension of our ministry.



Executive Summary

BACKGROUND AND PROCESS


Regional Community Health Needs Assessment


Springfield Regional Medical Center participated in a regional Community Health Needs Assessment process coordinated by the Clark County CHNA Stakeholder Group (“Stakeholder Group” or “Group”). The Stakeholder Group assembled a team which included the Clark County Health District, Mental Health and Recovery Board of Clark, Greene, and Madison Counties, Rocking Horse Center, and Springfield Regional Medical Center. The health district steering committee provided executive oversight.

Here for reference is an overview of the Regional CHNA process and methods for collecting data. This information was included in the Clark County MAPP process as further detailed below:

For the collaborative design, the process for gathering primary data, and the process for identifying, collecting, interpreting, and analyzing secondary data, the consultants referenced numerous methods for both qualitative and quantitative data. The consultants sought data that reflected recent as well as emerging issues by people who lived in the hospitals’ service areas, with attention to vulnerable populations and social determinants of health. Secondary data provided information about demographics, health conditions, and health-related issues as of 2016. Primary data reflected the opinions and attitudes of individuals and agencies motivated to attend a meeting or complete a survey. Their passion and level of interest is helpful to hospitals who are contemplating future programs that depend on community support. While not designed to be statistically representative of all 3.3 million residents of the region, there was often remarkable alignment among the top 5-10 priorities from meetings, individual surveys, agency surveys, and health departments.

Here is a brief description of the activities and tools utilized most often:

- Analysis of priorities to identify areas of consensus from all data sources
 - Communication by email and letter to past and prospective meeting attendees
 - Community meetings that included a visual, interactive, and collective multi-voting exercise (3 dots) to identify the top three priorities of residents
 - Community Need Index (See Appendix D for more information.)
 - Comparison of most frequent topics by geographic area and across data source (i.e., community meeting participant or survey response from individual, agency, or health department)
 - Consultation with topic experts (i.e., epidemiology, air quality, public health)
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- Design and feedback meetings with hospital and health department representatives
 - Discourse analysis to categorize and analyze key concepts and topics in all collected responses
 - Geographic Information System (GIS) mapping program to identify compelling data and represent data visually
 - Marketing materials for hospitals, health departments, and meeting hosts to use or adapt to their needs
 - Meeting sites, with refreshments, in convenient locations that were welcoming, accessible, and perceived as community asset or resource
 - Online databases for researching accurate and reliable data
 - Oversampling with vulnerable populations and the general public, including focus groups, use of interpreters and translators, and surveys administered one-to-one in person and via tablet at events
 - Proofreading at least twice of secondary data entry for accuracy and consistency
 - Regular communication with hospital and health department representatives
 - Review of reports and publications on health, and health-related, topics
 - Scripts, handouts, and supplemental resource materials provided to trained facilitators and scribes
 - Shared data at meetings in form of County Snapshots and Community Need Index maps
 - Standard set of stakeholder questions (for individual, agency, meeting, health department)
 - SurveyMonkey (Gold) for tracking responses at meetings, from interviews, or on surveys, and use of feature to create custom tags for each response
 - Tabulation of responses by geographic area, region-wide and for immigrants, children, and urban residents
 - Team approach with diverse consultants
 - Training, in person and via webinar, for CHNA Team, health departments, hospitals, and nonprofits interested in facilitating and scribing for supplemental meetings to target sub-populations or subcounty geographic areas. This ensured consistent facilitation, process, and recording of meeting comment and priorities.
 - Trend analysis that considered local data measures worse than state and/or U.S. measures and/or trending worse than prior years
 - Word count to determine frequent categories and to identify dominant topic within a category (e.g., how many times 'heroin' was mentioned within 'Substance abuse' category)
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Public Information Meetings

In addition to the regional data, the Clark County Combined Health District also held several (6) public information meetings throughout Clark County where community members could attend and give their feedback on localized health needs. These meetings were scheduled throughout the summer of 2018 to gather data:

- May 31, 2018 – 19 Attendees at Rocking Horse Center: 651 S. Limestone St. Springfield, Ohio
- June 14, 2018 – New Carlisle, Smith House: New Carlisle, OH 45344
- June 18, 2018 – St. John Missionary Baptist Church: 34 W. Pleasant St. Springfield, Ohio
- June 21, 2018 – Clark County Public Library: 201 S. Fountain Ave. Springfield, Ohio (GDAHA conducted)
- June 28, 2018 (2 sessions) – Morning: Springfield Regional Medical Center: 100 Medical Center Dr. Springfield, Ohio
Evening: South Vienna Town Hall: 149 W. Main St. South Vienna, Ohio

Clark County Community Health Steering Committee

From here, the Clark County Combined Health District and Mercy Health Springfield collaborated around the results and timing of the data. Together, the Clark County Community Health Steering Committee was assembled, and their perspectives, feedback and expertise were taken into consideration. The Community Health Steering Committee leveraged Mobilizing for Action through Planning and Partnerships (MAPP) process to identify top priorities. The MAPP process is a community-driven strategic planning tool for improving community health. Facilitated by public health leaders, this tool helps communities apply strategic thinking to prioritize public health issues and identify resources to address them. MAPP is an interactive process that can improve the efficiency, effectiveness, and ultimately the performance of local public health systems.

The Community Health Steering Committee Consists of individuals from the following organizations:

- Clark County Educational Service Center - (City and County Schools)
- The Springfield Foundation
- The Rocking Horse Center
- The Mental Health & Recovery Board
- The Community Health Foundation
- Springfield Metropolitan Housing
- Wittenberg University
- The City of Springfield
- Clark County
- Mercy Health – Springfield (Springfield Regional Medical Center)
- Clark County Combined Health District



With the help of the Community Health Steering Committee we were able to establish priorities and group them in new ways to show relationship and associated root causes.

Thus, the top 4 significant health needs for Clark County were identified as:

1. Mental health and addiction, including trauma
2. Chronic disease (heart, asthma, diabetes, cancer)
3. Maternal and infant health (preterm births, low birth weight, and infant mortality)
4. Cross-Cutting Factors: Social determinants of health (education, employment, income and housing), Health behaviors (tobacco prevention and cessation, active living, health eating, sexual activity) and Access to care

These results of the data collection and top indicated health needs were then shared with the public at several public locations throughout the county with an option to provide feedback via written comments and an electronic link.

External sources


- Census American Community Survey (ACS)
- Ohio Department of Education (ODE)
- Ohio Department of Health (ODH)
- United States Department of Agriculture (USDA)

Collaborating partners

The hospital collaborated with the following organizations as part of the process of conducting the needs assessment:

- Clark County Educational Service Center - (City and County Schools)
- The Springfield Foundation
- The Rocking Horse Center
- The Mental Health & Recovery Board
- The Community Health Foundation
- Springfield Metropolitan Housing
- Wittenberg University
- The City of Springfield
- Clark County

Other sources

- ODH 2017
 - ODH, Clark County
 - Clark County Youth Risk Behavior Survey (Self-Reported)
 - Ohio and US - CDC National Center for Health
 - ODE - Ohio Department of Education
 - Clark County Job & Family Services
 - USA Sleep
- 

- US EPA
- OJFS, Ohio Labor Market Information, Civilian Labor Force Estimates
- County Health Rankings, ODH
- ACS American Community Survey, Census Data
- OH & US: CDC

Identifying significant needs

As previously noted, the Clark County Combined Health District in partnership with several community agencies held several (6) public information meetings throughout Clark County where community members could attend and give their feedback on localized health needs. One was conducted by the THC/GDAHA consultants, and five were conducted by the Clark County Combined Health District. 68 people contributed votes to identify a total of 18 priorities.

These meetings were scheduled throughout the summer of 2018 to gather data:

- May 31, 2018 – 19 Attendees at Rocking Horse Center: 651 S. Limestone St. Springfield, Ohio
- June 14, 2018 – New Carlisle, Smith House: New Carlisle, OH 45344
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Below are the topics receiving at least 4.5% of the vote:

Access (Transportation/cost included) 34 votes 19.2%, Mental health (Trauma included) 25 votes 14.1%, Substance abuse 14 votes 7.9%, Poverty (Children included) 13 votes 7.3%, Environment 11 votes 6.2%, Healthy behaviors (Smoking included) 10 votes 5.7%, Social/emotional/community interaction 9 votes 5.0%, Social Determinants of Health 9 votes 5.0%, Fluoride 8 votes 4.5%,

Surveys from individual consumers living in Clark County were also collected between 6/19/18 and 8/3/18. 7 people participated. Respondents all answered the question, “Given the health issues facing the community, which ones would be your top priorities?” They mentioned thirteen health and/or health-related issues of concern to them. The issues that received at least two mentions were as follows: Substance abuse 5 votes 38.5%, Mental health 3 votes 23.1%, Dental 2 votes 15.3%

Eight organizations serving County residents, especially vulnerable populations, responded with their priorities. The priorities that received more than 2 mentions are listed below: Obesity 4 votes 33%, Social determinants of health 3 votes 25%, Mental health 2 votes 17%.



From here, the Clark County Combined Health District and Mercy Health Springfield collaborated around the results and timing of the data. Together, the Clark County Community Health Steering Committee was assembled, and their perspectives, feedback and expertise were taken into consideration. The Community Health Steering Committee leveraged Mobilizing for Action through Planning and Partnerships (MAPP) process to identify top priorities. The MAPP process is a community-driven strategic planning tool for improving community health. Facilitated by public health leaders, this tool helps

communities apply strategic thinking to prioritize public health issues and identify resources to address them. MAPP is an interactive process that can improve the efficiency, effectiveness, and ultimately the performance of local public health systems.

The Stakeholder Group compared secondary data to the information gathered via community meetings, individuals surveyed, organizations surveyed, (see explanation above) and the Clark County Combined Health District data.

With the help of the Community Health Steering Committee we were able to establish priorities and group them in new ways to show relationship and associated root causes.

Thus, the top 4 significant health needs for Clark County were identified as:

1. Mental health and addiction, including trauma
2. Chronic disease (heart, asthma, diabetes, cancer)
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These results of the data collection and top indicated health needs were then shared with the public at several public locations throughout the county with an option to provide feedback via written comments and an electronic link.

Implementation Plan

SRMC is continuing to work with other county agencies and is committed to developing a county-wide Community Health Improvement Plan. While that plan is still being finalized, SRMC is committed to addressing the health needs of the community through the strategies and tactics described in this Implementation Plan, which will be in alignment with the overall CHIP.

PRIORITIZED SIGNIFICANT COMMUNITY HEALTH NEEDS

The table below lists the significant community needs that were identified through the CHNA and specifies which needs Springfield Regional Medical Center will address.

Prioritized Significant Community Health Need	Addressed by the Hospital
Mental health and addiction, including trauma	Yes
Chronic disease (heart, asthma, diabetes, cancer)	Yes
Maternal and infant health (preterm births, low birth weight, and infant mortality)	Yes
Cross-Cutting Factors: Social determinants of health (education, employment, income and housing), behaviors (tobacco prevention and cessation, active living, health eating, sexual activity), Access to care	Yes (Specifically to health behaviors of cross-cutting factors & access to care.)

IMPLEMENTATION STRATEGIES TO ADDRESS SIGNIFICANT COMMUNITY HEALTH NEEDS

The strategies defined in the Implementation Plan will supplement the charity care and community benefit practices of SRMC, through enhanced education opportunities for patients/community members, increased access to care, that will in turn reduce the number of Emergency visits as well as the number of readmissions to the hospital. In our previous strategy and approach, we segmented each health need into its own category and area of focus. However, what we have found, is the close connection and overlap many critical health needs have and their relationship to wellness. So, in our strategy and execution for this next implementation plan, we hope to see a greater shift by recognizing the cause and effect of certain health needs and outcomes. Based on all the above

information and processes, the prioritized health needs of the community served by the hospital are listed below.

CROSS-CUTTING FACTORS: HEALTH BEHAVIORS & ACCESS TO CARE

Chronic health issues continue to affect our community. Out of the top 10 causes of death in Clark County, the majority are Chronic Disease and may even be preventable with a shift in community culture in partnership with prevention programs. We will focus on ways we can help to decrease things that cause greater risk to health such as obesity while increasing and reinforcing healthy behaviors like physical activity.

With the significant health needs we are seeing in Clark County, particularly in the areas of Chronic Disease and prevention of greater health risk, we will focus on continuously providing better access to Emergency, Specialty and Primary care throughout Clark County.

HEALTH BEHAVIORS

Description

Health behaviors are served by reinforcing a healthy lifestyle and preventative health measures such as physical activity, healthy eating, mindfulness and the ability to self-regulate through mental and spiritual health practices.

- Despite our most recent efforts, sexually transmitted diseases continue to rise.
- Diabetes rates in Clark County are also continuing to rise.
- Obesity rates among youth and adults continue to rise in Clark county

Goal

Improve the general wellness of individuals living in Clark County by educating about and reinforcing healthy behaviors

Expected impact

Improved obesity rates

Improved sexually transmitted disease rates

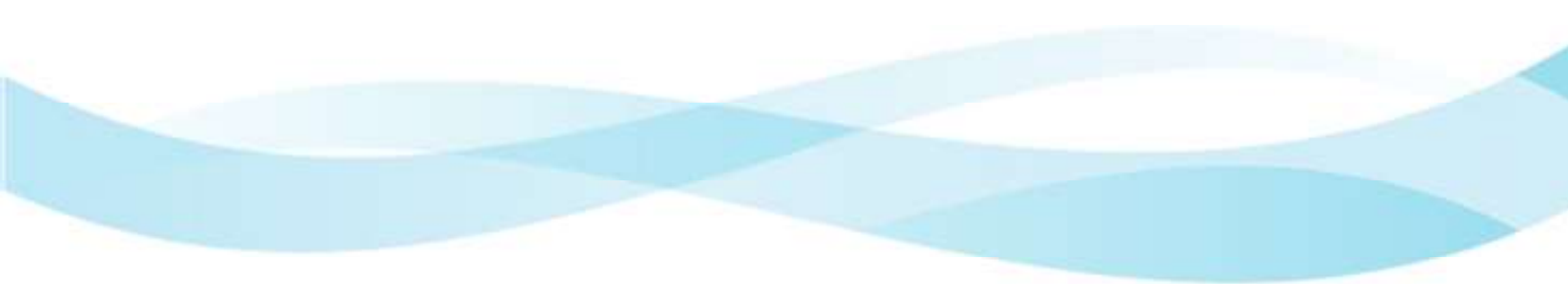
Improved diabetes rates

Improved activity rates among Clark county residents

Targeted populations

Clark County residents

Strategies



The hospital is creating a Community Health Oversight team to review community health needs and create strategies within the Mercy Health system to combat these issues. From here, the Community Health Oversight team will pull together work groups of individuals with the right core competencies to inform the discussion and decisions around building new programming, supplementing existing programming, supporting new policies and procedures or possibly adjusting old ones. Additionally, we will look for community partnership opportunities where expertise cannot be found in house.

Strategic measures

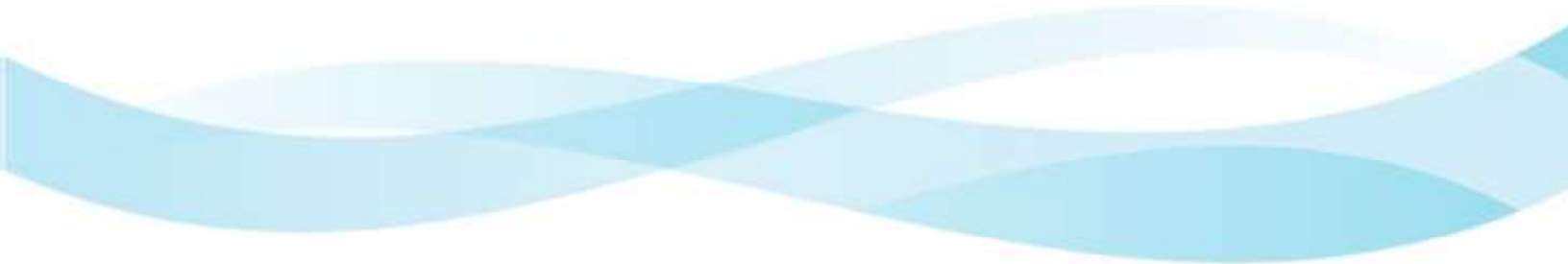
- Create opportunities to celebrate physical wellness by way of 5ks and walks
- Create learning opportunities in the areas of overall wellness by partnering with Weight Management and Occupational Health
- Partner with Primary care on tactics to reduce obesity and improve mind, body and spiritual wellness.

Community collaborations

- The Rocking Horse Center
- Mercy Health Physicians
- The Mental Health & Recovery Board
- The Clark County Combined Health District
- Mercy Health Walk-in Clinic

Community resources available

- The Rocking Horse Center
- Mercy Health Physicians
- Urgent Care facilities
- School Nurses
- Primary Care Physicians
- Springfield Regional Medical Center
- Mercy Health Walk-in Clinic
- Local Schools
- Local Gyms, YMCA, National Trails Parks and Recreation District.



ACCESS TO CARE

Description

With the significant health needs we are seeing in Clark County, particularly in the areas of Chronic Disease and prevention of greater health risk, we will focus on continuously providing better access to Emergency, Specialty and Primary care throughout Clark County.

Goal

Increase the number of individuals with a Primary Care Providers in Clark County
Increase the number of Primary Care Providers in Clark County

Expected impact

Improvement in the wellness of individuals in Clark County
Improvement in the overall management of medications and Chronic Conditions in Clark County

Targeted populations

Clark County residents without a Primary Care provider

Strategies

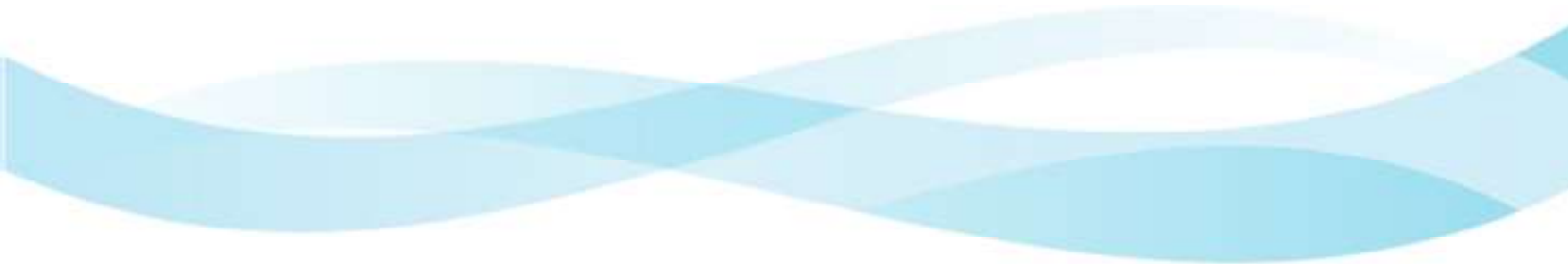
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Strategic measures

Increase the number of Primary Care Providers
Increase the availability of Physicians in Clark County

Community collaborations

- The Rocking Horse Center
- Mercy Health Physicians
- Springfield Regional Medical Center
- Mercy Health Walk-in Clinic



Community resources available

- The Rocking Horse Center
- Mercy Health Physicians
- Urgent Care facilities
- School Nurses
- Primary Care Physicians
- Springfield Regional Medical Center
- Mercy Health Walk-in Clinic

MENTAL HEALTH AND ADDICTION, INCLUDING TRAUMA

Description

As detailed in the hospital's Community Health Needs Assessment Report:


- Mental Health, Addiction and Trauma are served by providing coordinated care, education, support and programs that promote and enable healthy behaviors.
- Substance Abuse (Addiction) is served through treatment and prevention programs.
- Presently Mental Health providers are 710:1 in Clark county and while poor mental health days are relatively consistent with state and national averages, we are seeing the effects of trauma county wide in the increase of reported child abuse, increase in suicide rates, as well as an increase in unintentional drug overdoses.
- In 2018 there were 62 unintentional overdoses in Clark County; 724 emergency patient visits with discharges to drug-related detox; 1463 inpatient visits with discharges to drug-related detox for a total of 2187 patient visits with discharges to drug related detox.
- In 2018 Springfield Regional Medical Center saw a total of 370 patients with some type of opiate dependence.

Goal

It is our goal to better equip our staff with strategies to combat trauma and better treat our patients experiencing mental health and substance abuse by helping to address the core issues involved via program development, partnership or handoff protocols to improve patient outcomes.

Expected impact

The goal would be:

- See more individuals experiencing recovery from substance use disorder
 - For patients to experience better mental health with less poor mental health days
- 

- To properly identifying trauma in a patient's time in the healthcare setting, so referral to treatment is better and the individual can take the correct steps towards recovery.
- For Mercy Health to become a trauma-informed care provider.

Targeted populations

Those exposed to, or experiencing trauma, substance use disorder or poor mental health.

Strategies

The hospital is creating a Community Health Oversight team to review community health needs and create strategies within the Mercy Health system to combat these issues. From here, the Community Health Oversight team will pull together work groups of individuals with the right core competencies to inform the discussion and decisions around building new programming, supplementing existing programming, supporting new policies and procedures or possibly adjusting old ones. Additionally, we will look for community partnership opportunities where expertise cannot be found in house. And, enlisting the help of Mercy REACH to see what we are doing well and where we can make improvements.

Strategic measures

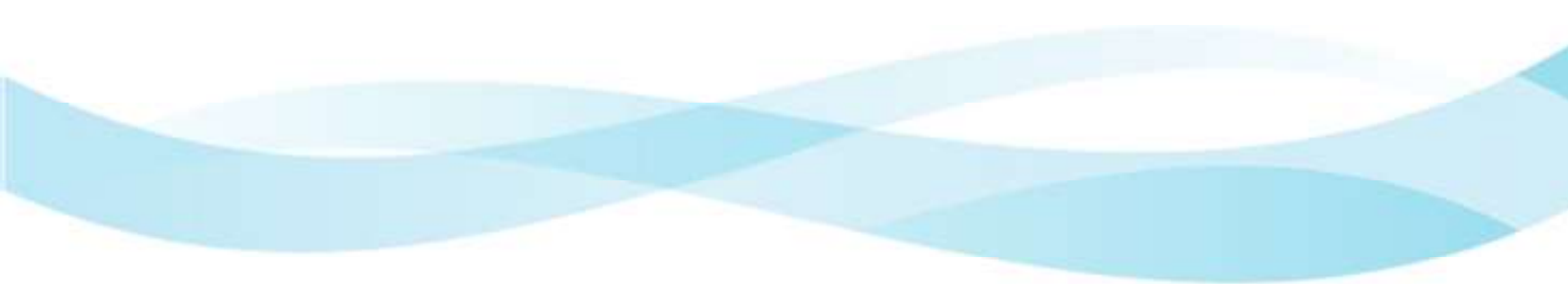
- Springfield Regional will meet with strategic partners like Back2Back Ministries and the Mental Health & Recovery Board to better understand how Mercy Health Staff can become better equipped in areas of trauma
- Continue to review and make changes in prescriber practices for Opiates and Monitoring Community opiate burden to ensure this number is continuing to decrease.
- Continue to provide opportunities for the general public to remove unused prescription drugs from the community by supporting local drug takeback days, by providing prescription drug takeback boxes and bags.

Community collaborations

- Springfield Regional will meet with strategic partners like Mercy REACH, McKinley Hall, Wellspring, Back2Back Ministries and the Mental Health & Recovery Board to better understand how Mercy Health Staff can become better equipped in areas of trauma

Community resources available

The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:



- Mercy REACH
- McKinley Hall
- Clean Slate
- Wellspring
- Mental Health & Recovery Board

CHRONIC DISEASE

Description

Chronic disease needs are served by increasing access to primary care physicians and providing coordinated care, education, support, and chronic disease management programs.

- Heart Disease, Cancer, Lower Respiratory Diseases and Diabetes are consistently among the top 10 leading causes of death in Clark County.

Goal

- Decrease in the number of individuals with chronic disease that require emergency room services or treatment because of their chronic disease.
- Earlier identification of Cancer, with specific focus on Bronchial, Lung, Colon and Rectum Cancers

Expected impact

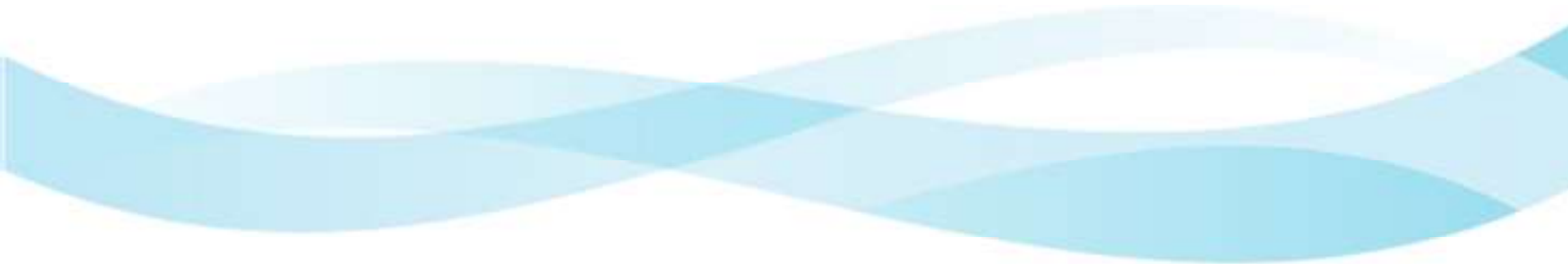
- Positively impact the health and wellness of individuals with chronic disease by decreasing the number of unmanaged chronic disease cases that require emergency room services and/or readmission by enhancing clinical care upon initial hospital stay and handoff protocols upon discharge to improve follow up clinical care.
- Earlier identification of late-stage cancers like Bronchial, Lung, Colon and Rectum Cancers improves prognosis and chance for remission and recovery.

Targeted populations

Those individuals with chronic diseases and cancer.

Strategies

The hospital is creating a Community Health Oversight team to review community health needs and create strategies within the Mercy Health system to combat these issues. From here, the Community Health Oversight team will pull together work groups of individuals with the right core competencies to inform the discussion and decisions around building new programming, supplementing existing programming, supporting new policies and



procedures or possibly adjusting old ones. Additionally, we will look for community partnership opportunities where expertise cannot be found in house.

Strategic measures

1. Create handoff and follow up processes for patients admitted to and discharged from SRMC with chronic diseases to improve long-term outlook
2. Educate on specific types of cancer and what to look for.
3. Do more community-based screenings to raise awareness and educate about Bronchial, Lung, Colon and Rectum Cancers.

Community collaborations

- Collaboration with The Springfield Regional Cancer Center, The Rocking Horse Center and United Senior Services regarding early detection of cancers and management of chronic diseases
- Collaboration with Primary and Specialty Physicians as well as Springfield Regional Weight Management regarding screening interventions and long-term management of chronic diseases

Community resources available

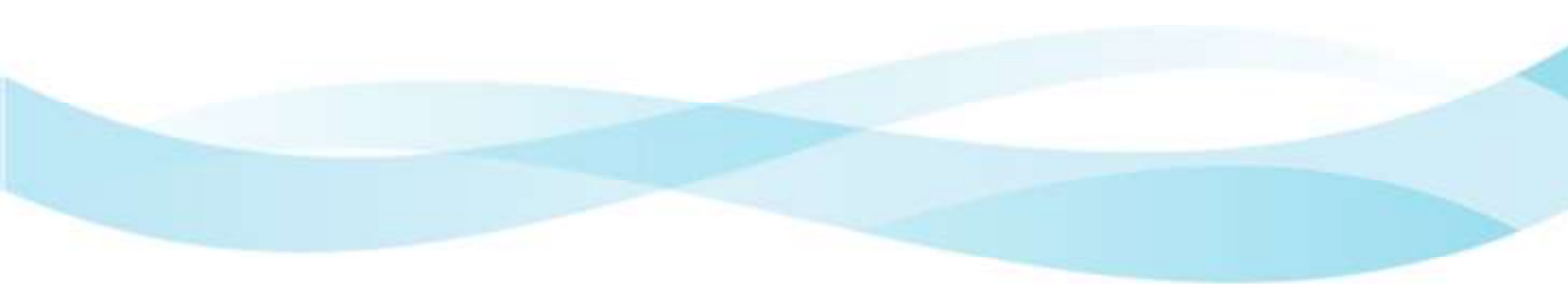
The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:

- Springfield Regional Medical Center
- The Rocking Horse Center
- The Springfield Regional Cancer Center
- United Senior Services
- Springfield Regional Weight Management

MATERNAL/INFANT HEALTH, HEALTHY BIRTHS & INFANT MORTALITY

Description

In recent years, it has been noted in our birthing statistics that pre-term, low birth weight and overall infant mortality in the first year of life are uncomfortably high in Clark County. Additionally, birth rates among teen ages 15 – 17 in Clark County are high. While the data pool here can be somewhat limited, SRMC has some ability to help improve outcomes of Moms and Babies in Clark County through earlier intervention during pregnancy. Coupled with our focus on improving women's health in Clark County, as well as the opportunities we must deliver healthy babies in our birthing center, we hope to improve maternal and infant health in Clark County.



Goal

Improve the health and preparation of mothers in Clark County for the arrival of their baby through earlier prenatal care, birthing education and primary care supports for women of child-rearing age.

Improve the health and thriving of infants born in Clark County by improving the wellness and preparation of their mothers.

Expected impact

Improvement in the wellness of mothers giving birth to babies which would in-turn affect the health of the baby.

Targeted populations

Women of child-bearing and rearing ages and their babies

Strategies

The hospital is creating a Community Health Oversight team to review community health needs and create strategies within the Mercy Health system to combat these issues. From here, the Community Health Oversight team will pull together work groups of individuals with the right core competencies to inform the discussion and decisions around building new programming, supplementing existing programming, supporting new policies and procedures or possibly adjusting old ones. Additionally, we will look for community partnership opportunities where expertise cannot be found in house.

Strategic measures


Numbers of Mothers with prenatal care and education, before their child is born.

Numbers of infants born pre-term and below targeted birth weight.

Community collaborations

- The Rocking Horse Center
- Springfield Regional Medical Center's Birthing Center
- Primary Care Physicians
- Local Pediatricians
- Mercy REACH

Community resources available

- The Rocking Horse Center
 - Springfield Regional Medical Center's Birthing Center
 - Primary Care Physicians
- 

- Local Pediatricians
- Mercy REACH

