

# 2017-2019 Community Health Needs Assessment Implementation Plan

ADOPTED BY THE MARKET PARENT BOARD OF TRUSTEES, OCTOBER 2016

**MERCY HEALTH — LOURDES HOSPITAL**

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# Introduction

Mercy Health — Lourdes Hospital (“Lourdes Hospital” or “Lourdes”) is a 359-bed, full-service hospital providing inpatient, outpatient and ancillary healthcare services. Lourdes, along with local health, education, social service, nonprofit and governmental agencies participated in a Community Health Needs Assessment (“CHNA”) conducted for McCracken County and surrounding areas. The detailed process, participants and results are available in Lourdes’ Community Health Needs Assessment Report, which is available at [mercy.com](http://mercy.com).

This Community Health Needs Assessment Implementation Plan will address the significant community needs identified through the CHNA. The plan indicates which needs Lourdes will address and how, as well as which needs Lourdes won’t address and why.

Beyond the programs and strategies outlined in this plan, Lourdes will address the healthcare 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 2017 and 2019. However, Lourdes anticipates that some of the strategies, tactics and even the needs identified will evolve over that period. Lourdes plans a flexible approach to addressing the significant community needs that will allow for adaptation to changes and collaboration with other community agencies.

## COMMUNITY SERVED BY HOSPITAL

For the purposes of the CHNA, Lourdes used McCracken County, Kentucky, as the main service area. Lourdes Hospital in Paducah, Kentucky, serves a population of more than 200,000 people in portions of at least three states. Approximately 89% of patients served reside within the Jackson Purchase area of western Kentucky.

Lourdes Hospital admitted more than 10,000 patients and processed more than 400,000 patient visits/procedures in 2014. While total admissions have trended down over the past three years, the total number of patient visits and outpatient registrations has increased. These patients represent 31 different counties in Kentucky, Tennessee and Illinois. 41% of patient discharges were residents of Paducah/McCracken County, Kentucky. The other counties in the service area include Marshall, Graves, Livingston, Ballard and Calloway. Five of the six counties (excluding Calloway) examined for this CHNA are medically underserved areas (MUA).

A review of pertinent demographic data for the seven counties in Lourdes Hospital’s service area reflected no significant shift from a similar examination three years ago. The population in the hospital’s service area continues to be:

- Primarily Caucasian
- Equally split between male and female
- Stable in its population base/trends
- Of modest economic means, with the median household income ranging from \$35,000 to \$45,000

In addition, Marshall County still maintains the highest percentage of “65 and over” population. Marshall and Graves counties still maintain a disproportionately high number of Hispanic residents. The Graves County Hispanic population is attributed by local stakeholders to the large number of poultry operations in the county.

Other demographic factors showed no remarkable change in the past three years. Population, high school graduates rates, and per capita and household incomes showed modest increases.

# Executive summary

## MISSION

We extend the healing ministry of Jesus by improving the health of our communities with emphasis on people who are poor and under-served.

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

### Compassion

Our commitment to serve with mercy and tenderness

### Excellence

Our commitment to be the best in the quality of our services and the stewardship of our resources

### Human Dignity

Our commitment to value the diversity of all persons and to be respectful and inclusive of everyone

### Justice

Our commitment to act with integrity, honesty and truthfulness

### Sacredness of Life

Our commitment to reverence all life and creation

### Service

Our commitment to respond to those in need

## BACKGROUND AND PROCESS

Information for this CHNA came from a variety of primary and secondary research sources. Information and data was gathered by Consult Associates, a consultant firm based out of Murray State University Campus.

The primary sources of data included one-on-one interviews with numerous local stakeholders and civic leaders/servants, a variety of local focus groups with participants generally considered “users” of healthcare, and survey data gathered from individuals within the service area. Much of the secondary data was gathered from: the Foundation for a Healthy Kentucky, the Robert Wood Johnson Foundation, University of Wisconsin Population Health Institute, the Kids Count Data Center from the Annie E. Casey Foundation, Kentucky Office of Vital Statistics, U.S. Census Bureau, U.S. Centers for Disease Control and Prevention (CDC) and the United Way of Paducah-McCracken County's “Impact Poverty” study.

Combined input from pertinent government/organizational websites, plus data from local chambers of commerce, local health departments, social agencies and the Purchase District Coalition for Health provided ample data to create a “snapshot” of health challenges in the Lourdes geographic service region.

## Identifying significant needs

The CHNA relied heavily on input from local residents and health-related organizations. One-on-one interviews with more than 20 stakeholders and civic leaders/servants provided important information about health needs and the healthcare situation in Lourdes Hospital's service region. Local and county health commissioners (or their delegates) identified critical health needs and community resources to meet these needs. Focus group participants provided input from a consumer perspective on various healthcare topics, including different insurance and payment options, prevalence of certain chronic diseases, perceptions of Lourdes Hospital, and lack of

information, services and support in the community. The one-on-one interviews with healthcare providers, managers and leaders, combined with perceptions of potential consumers, provide an excellent insight into how Lourdes Hospital can better serve its constituency.

The most frequently mentioned needs that surfaced in the one-on-one interviews included:

1. Dental care, including treatment and prevention
2. Health education and information
3. Mental illness
4. Partnerships with area health agencies and organizations
5. Obesity and diabetes

Focus-group feedback yielded the following insights and areas of concern:

1. Lack of Medicaid acceptance
2. Prevalence of diabetes
3. Generally strong perception of Lourdes Hospital’s hospice, home health and emergency department
4. Lack of health education and information, specifically for mental/behavioral health services and obstetrics/gynecology services
5. Lack of healthcare support services

Survey feedback identified seven areas that the respondents thought merited greater attention from Lourdes. Those seven areas are:

1. Cancer-related treatment
2. Rising cost of healthcare
3. Preventing school drop-outs
4. Drug abuse
5. Mental health
6. Child abuse
7. Obesity/diabetes

Many health-related needs in the Lourdes service area are unmet, many of which are beyond Lourdes’ ability to successfully address. Lourdes Hospital’s board of directors elected to focus on four areas (cancer, obesity and diabetes, mental health and substance abuse), due to the alignment of Lourdes Hospital’s strengths and resources and a desire to complement and not duplicate

other community agency work. The board was taken by some of Western Kentucky’s health numbers and felt it was in our community’s best interest to focus on these four areas. The board also agreed it would be in the hospital’s best interest to focus on areas where Lourdes Hospital would have more of an impact and in the more populous counties being served: McCracken, Marshall and Graves. Other counties in the service area range anywhere from 40 to 60 miles away, due to the rural and less-populated nature of the region.

## Implementation Plan

Lourdes 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, Lourdes 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 Community Health Improvement Plan.

### PRIORITIZED SIGNIFICANT COMMUNITY HEALTH NEEDS

The table below lists the significant community needs that were identified through the CHNA and specifies which needs Lourdes Hospital will address.

Prioritized significant community health need	Addressed by hospital
Cancer treatment .....	Yes
Obesity and diabetes .....	Yes
Mental health .....	Yes
Substance abuse .....	Yes

## IMPLEMENTATION STRATEGIES TO ADDRESS SIGNIFICANT COMMUNITY HEALTH NEEDS

### CANCER TREATMENT

#### Description

As detailed in Lourdes' Community Health Needs Assessment Report:

Kentucky has the highest cancer death rate in the country. To increase early prevention, a need exists to enhance community opportunities for participation in educational programs and screenings that promote healthy living and awareness of cancer risk factors.

#### Goal

Enhance community opportunities for participation in educational programs and screening that promote healthy living and awareness of cancer risk factors.

#### Expected impact

Increase early detection of lung, breast, colon and skin cancers

Decrease service-area smoking population

#### Targeted populations

Service-area citizens who smoke

Women age 40 and above

Service-area citizens exposed to sunlight

Men and women age 40 and above who have not received a colonoscopy

#### Strategies

1. Provide community cancer screenings throughout service area.
2. Advocate and assist with planning for activities, legislation and other activist resources that improve cancer prevention throughout service area such as Tobacco Free Kentucky.
3. Join efforts with health coalitions throughout our service area to impact our population.

4. Explore partnerships to provide smoking cessation classes through Kentucky Cabinet for Health and Family Resources and provide Tobacco Prevention and Cessation Program to the community. Continue to partner with Kentucky Cancer Program to provide smoking cessation classes to service area-employers.
5. Improve convenience of mammography service by partnering with Kentucky Cancer Program to offer a Mobile Mammography Van that provides a traveling mammography service to area worksites.

#### Strategic measures

1. Number of CT scans for smokers
2. Number of skin cancer screenings
3. Number of colonoscopies
4. Number of breast cancer screenings

#### Community collaborations

- Kentucky Cancer Program
- Kentucky Cabinet for Health and Family Services
- KentuckyOne Health
- Purchase District Health Department
- Local health coalitions
- Baptist Health of Paducah
- Colon Cancer Prevention Project

### OBESITY AND DIABETES

#### Description

As detailed in Lourdes' Community Health Needs Assessment Report:

The prevalence of adult obesity increased by 17 percentage points (24% to 41%) in McCracken County, while the state rate increased 5 percentage points (from 27% to 32%). A direct correlation exists between obesity and chronic illnesses, such as diabetes. There is a need to engage the community with exercise opportunities and educational programs that promote healthy living and its impact on chronic illness.

#### Goal

Engage community with exercise opportunities and educational programs that promote healthy living and its impact on chronic illnesses.

### **Expected impact**

Increase community fitness activity and encourage healthier eating  
Increase youth awareness of healthy lifestyles

### **Targeted populations**

All service-area adults, adolescents and children

### **Strategies**

1. Establish Walk with a Doc event at local parks; give residents a chance to improve health and exercise with a physician.
2. Collaborate with programs offered through community-based educational sessions (churches, wellness programs, community kitchens and school events) to offer free community-education programs on healthy eating and active living.
3. Continue to provide funds and volunteer hours toward construction for the Foundation for a Healthy Kentucky for the multi-use health park.
4. Join efforts with Obesity Workshop Task Force(s) to impact population.

### **Strategic measures**

1. Number and reach of health campaigns to encourage healthy lifestyles and activity
2. Compilation of a healthcare reference guide
3. Community benefit funds (including dollars and volunteer hours) contributed

### **Community collaborations**

- Walk with a Doc program
- Mercy Medical Associates
- Foundation for a Healthy Kentucky
- Local government departments
- Local health departments, businesses, churches, schools and shelters
- Murray Calloway Wellness Consortium's Obesity Workgroup
- KYCARE
- Purchase Area Health Connections

## **MENTAL HEALTH**

### **Description**

As detailed in Lourdes' Community Health Needs Assessment Report:

In 2014, suicide was the 10th leading cause of death in Kentucky. With a rate of 15.5 per 100,000 residents, the state ranked 19th in the country for suicides. The national rate was 12.6 per 100,000. Suicide is the second leading cause of death among 15-to-34-year-old Kentuckians and the third leading cause of death for those ages 35 to 54. The hospital has identified a need for mental health in rural areas, collaboration with other providers, transportation, access to care and health knowledge.

### **Goal**

Improve access to mental health services throughout collaborative partnerships.

### **Expected impact**

Increased behavioral health resources for adolescents  
Increased public awareness and prevention

### **Targeted populations**

Service area population with focus on adolescents  
School-age children grades K-12

### **Strategies**

1. Improve early intervention. Join efforts with Mental Health Workshop Task Force(s) throughout our service area to impact the young population.
2. Work to improve access to resources in schools and communities.
3. Assist in providing treatment resources for adolescents with behavioral health issues in Western Kentucky through initiatives focused on coordination of care.
4. Change and strengthen the broader system: policies, laws, culture

### **Strategic measures**

1. Creation of a taskforce focused on developing and implementing efforts to increase awareness and reduce stigma
2. Development of a training resource program in schools and community for adolescents

3. Suicide-awareness community event
4. Provide a day camp for adolescents dealing with loss at Camp Robin

**Community collaborations**

- Four Rivers Behavioral Health
- American Foundation for Suicide Prevention
- Purchase District Health Department
- Community, hospitals, schools, and local government
- Mental Health Workshop Task Force
- Oscar Cross Boys & Girls Club

**SUBSTANCE ABUSE**

**Description**

As detailed in Lourdes' Community Health Needs Assessment Report:

With the exception of Marshall County, all counties in Lourdes Hospital's service area had rates of binge drinking (defined as consuming five or more drinks in one hour) that were lower than the state rate of 15%. Marshall County's rate was 16%. While drug arrests in Kentucky decreased from 1,430 per 100,000 residents to 1,265, both McCracken and Graves counties saw significant increases. The need for substance abuse awareness and prevention is prevalent throughout the community.

**Goal**

Provide community with resources to prevent and recognize substance abuse throughout service area.

**Expected impact**

Increased substance abuse awareness  
 Decrease in underage drinking, abuse of prescription drugs and other substance abuse activity

**Targeted populations**

Adolescent population in service area  
 Citizens vulnerable to substance abuse pressure

**Strategies**

1. Provide substance abuse-prevention education to parents and youth.
2. Increase prevention and harm reduction through free community programs.
3. Provide support to multi-sector coalitions to collectively impact policy, systems and environmental changes that will reduce youth substance use and prevent opioid overdoses.

**Strategic measures**

1. Development and implementation of awareness strategies in youth groups or community classes through Sources of Strength Program
2. Decrease in underage drinking, abuse of prescription drugs and other substance abuse activity through providing prevention and treatment resources
3. Development and implementation of community-based data and planning groups to promote and maintain a competent workforce specializing in prevention awareness

**Community collaborations**

- PASAC
- KY-ASAP
- Purchase District Health Department
- Purchase Area Health Connections
- Local school districts
- Local Police Departments and emergency responders
- Merryman House