

2020-2022 Community Health Needs Assessment — Implementation Plan

Adopted by the Mercy Health – Lourdes Hospital Board of Trustees, November 21, 2019

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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 Mercy Health – Lourdes Hospital's Community Health Needs Assessment Report which is available at mercy.com.

This Community Health Needs Assessment Implementation Plan will address the significant community needs identified through the CHNA. The Implementation Plan indicates which needs Lourdes Hospital will address and how.

Beyond the programs and strategies outlined in this plan, Lourdes Hospital will address the health care needs of the community by continuing to operate in accordance with its mission to 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. 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, Lourdes Hospital anticipates that some of the strategies, tactics and even the needs identified will evolve over that period. Lourdes Hospital plans a flexible approach that will allow for adaption to changes and collaboration with other community agencies.

COMMUNITY SERVED BY HOSPITAL

Mercy Health - Lourdes Hospital in Paducah, Kentucky, serves a population of more than 200,000 people within its seven-county primary service area. Within its entire service area, Lourdes serves patients in at least three states (Kentucky, Illinois, and Tennessee).

The community served by Lourdes Hospital was defined by reviewing the origin of the inpatient population. Lourdes Hospital admitted more than 11,804 patients in 2019. Based on the patient origin of inpatient discharges from January 1, 2019 to December 31, 2019, management has identified the Kentucky counties of McCracken, Marshall, Graves, and Ballard and the Illinois county of Massac as the defined CHNA Community ("community"). Patients from these counties represent 69.8% of inpatient discharges, with McCracken County having the highest percentage of discharges at 37.6%. On a combined basis, the CHNA Community has a population of 155,444 persons. The CHNA community was

determined by geography and is inclusive of medically underserved, low-income, minority populations and people with limited English proficiency. All counties examined for this CHNA are medically underserved areas as designated by the Health Resources & Services Administration (HRSA).

A review of pertinent demographic and socioeconomic data for the five counties in Lourdes Hospital's CHNA Community reflected no significant shift from a similar examination three years ago. Below is a summary of the community profile:

- The largest age group in the community's population is between the ages of 35 and 54. This age group represents 25.9% of the population.
- 18.8% of the population 65 years of age or older. This percentage is higher than state and national percentages.
- The white non-Hispanic population makes up 88% of the population, with black non-Hispanic population accounting for 7%, Hispanic 3% and all others at 2%.
- The percentage population with a disability residing in the community is higher than the national percentage with Massac County reporting over 20% of its population with a disability.
- Average household income for the community ranges from \$53,296 to \$65,626.
- 25,349 individuals in the community live in households with income below the Federal Poverty Level.
- 58% of students (14,708 students) in the community are eligible for free/reduced price lunch.
- 4,600 households in the community do not have a motor vehicle.
- The percent uninsured population in the community is favorable to state and national percentages at 8.92%. 13,776 individuals are uninsured in the community.

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 is expressed through the organization's core values: Human Dignity

We commit to uphold the sacredness of life and to be respectful and inclusive of everyone. Integrity

We commit to act ethically and to model right relationships in all of our individual and organizational encounters.

Compassion

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

Stewardship

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

Service

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

Executive Summary

BACKGROUND AND PROCESS

Information for this CHNA came from a variety of primary and secondary sources. Information and data were gathered by Crowe LLP ("Crowe"). Crowe is one of the largest public accounting, consulting, and technology firms in the United States. Hired by Lourdes Hospital, the firm also presented the final report to the hospital's board of directors and explained the process and resources.

Lourdes Hospital obtained input through face-to-face meetings with stakeholders and three focus groups.

One-on-one interviews were performed with leaders from 22 community organizations/agencies representing public health, local government officials, various nonprofit organizations, local churches and Lourdes Hospital. Interviews were conducted between October 29 and November 13, 2018. To ensure consistency in the topics covered, a semi-structured interview guide was used. All interviews were conducted by Crowe. Feedback was gathered on pressing health care concerns, access challenges and identification of populations with serious unmet health care needs. Approaches to improve the community's health were also solicited.

Three focus groups were conducted between October 29 and 31, 2018. To assure that medically underserved were included in this CHNA, focus group participants represented agencies serving persons who are homeless, disabled, victims of domestic violence, unemployed and/or persons with low-income. Focus groups were held in McCracken, Marshall and Graves Counties and 42 individuals participated in the sessions.

Focus groups explored four areas to identify significant health needs of the community as well as potential ways to address identified needs. The areas included health and quality of life, barriers to improving community health, health disparities, and significant health issues. Each participant was also asked to provide their opinion as to the top three issues

that Lourdes Hospital should focus its community benefit investments over the next 3-5 years.

Finally, survey results from a 2018 Community Survey conducted by the Purchase District Health Department were reviewed and included in the CHNA. The survey consisted of 12 questions. Specifically, survey results for questions regarding important health issues facing the community and most serious risky behaviors in the community were reviewed.

Information gathered in the above steps was reviewed and analyzed to identify health issues in the community. Additional secondary data was reviewed for each identified health need and a summary of key findings for each identified health need was prepared.

Secondary data assessed included:

- Demographics (population, age, sex, race)
- Socioeconomic indicators (household income, poverty, unemployment, educational attainment)
- Health access indicators
- Community health status indicators (causes of death, chronic conditions, health behaviors, etc.)

Identifying significant needs

After exploring topic areas including barriers to improving health, health disparities, and health needs of the community, focus group participants were asked to identify those issues that were the most serious health issues facing the community. Interestingly, two of the three focus groups identified personal ownership of one's health as being the biggest issue. Participants noted cultural norms surrounding unhealthy behaviors and the need for additional health education and outreach as factors contributing to unhealthy living throughout the community. They expressed challenges with communicating and motivating the community to engage in preventative care and healthy behaviors, including utilization of available resources. Each participant was also asked to provide their opinion as to the top three issues that Lourdes Hospital should focus its community benefit investments over the next 3-5 years.

Mercy Health Community Benefit Committee reviewed survey results, stakeholders focus groups, stakeholder one-on-one interview data, as well as key secondary health data. The committee considered existing local, state and national priorities and existing resources to determine the prioritized health needs of the community served by the hospital before a third party presented data finding to the Mercy Health- Lourdes Hospital Board. Based on

the information gathered through this Community Health Needs Assessment and the prioritization process described above, Lourdes Hospital chose the needs below to address over the next CHIP cycle.

Implementation 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 | Yes |
| Mental Health | Yes |
| Substance Use Disorder | Yes |
| Chronic Illnesses | Yes |

IMPLEMENTATION STRATEGIES TO ADDRESS SIGNIFICANT COMMUNITY HEALTH NEEDS

Lourdes Hospital is continuing to work with other non-profits, county, state, and federal agencies. Lourdes Hospital is committed to developing a region-wide Community Health Improvement Plan in collaboration with our external partners and county agencies. Lourdes Hospital 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 region-wide Community Health Improvement Plan.

CANCER

Description

Kentucky has the highest number of age-adjusted new cancer cases per year in the entire United States, with 194 cases per 100,000 individuals compared to the national rate of 156 cases per 100,000. The Lourdes Hospital service area averages 180 cases per 100,000. Lung cancer places a particular burden on the Commonwealth, averaging 61 cases per 100,000 in Kentucky and 50 cases per 100,000 in the Lourdes Hospital service area. These numbers are above the national lung cancer average of 39 cases per 100,000 population. Overall cancer mortality rates are 194 per 100,000 in Kentucky and 180 per 100,000 in the Lourdes Hospital service area, compared to 156 per 100,000 population nationally. This demonstrates issues with patients having access to appropriate cancer care locally. Mercy Health – Lourdes Hospital needs the ability to provide full-service, seamless and quality cancer care services to build on its superior surgical oncology services and the region's

largest regional medical oncology program, primary care network, and clinical integrated network.

Goal

Reduce the number of preventable deaths caused by cancer through increasing access to screening, implementing prevention programs based on risk factors, and promoting healthy living.

Expected impact

- Increased early detection of lung, breast, colon and skin cancers
- Decreased smoking population
- Decreased number of new cancer cases
- Decreased cancer mortality rates

Targeted populations

- Residents in CHNA Community who are smokers
- Residents in CHNA Community with cancer in family history or demonstrating other risk factors
- Residents in CHNA Community of cancer screening age

Strategies

- Successful Certificate of Need application for state-of-the-art radiotherapy program that, combined with medical oncology program, will offer full-service cancer services to the region.
- Ensure patients requiring cancer care have timely access to medical, radiation and surgical oncology services.
- Screen patients for eligibility for high-risk cancer genetics testing and, as eligible, provide testing and follow up counselling
- Offer free community-wide cancer screenings in collaboration with other health systems, health departments, and health coalitions throughout our service area
- Provide free smoking cessation classes, in collaboration with community partners

Strategic measures

- Volume of cancer surgeries
- Number of patients receiving high-risk cancer genetics testing
- Number of patients receiving cancer screenings

Community collaborations

Kentucky Cancer Program

- University of Kentucky Markey Cancer Center Affiliate Network
- American Cancer Society
- Additional community boards and partnerships relevant to this body of work

Community resources available

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

- Mercy Health Physicians
- Kentucky Cancer Program
- University of Kentucky Markey Cancer Center
- Baptist Health Paducah
- American Cancer Society
- American Lung Association
- Kentucky Cancer Link
- Purchase District Health Department
- Purchase Area Health Connections

MENTAL HEALTH

Description

In 2018, Kentucky ranked 21st in the US for suicides with a rate of 17.42 per 100,000, making it the 11th leading cause of death overall. Nationally, the age-adjusted suicide rate in 2018 was 14.2 per 100,000 individuals. In Kentucky, suicide is the second leading cause of death in the 15-34 year-old age group and the fourth leading cause of death in the 35-54 year-old age group. In particular, west Kentucky has the highest suicide rate per capita than any other region across the state. The suicide rate for the CHNA community is nearly double national rates. Marshall County's rate is nearly triple the national rate. Additionally, the ratio of population to Mental Health Providers indicates a shortage of providers for Marshall, Graves and Ballard Counties.

Goal

Improve prevention, early detection, and access to mental and behavioral health resources through collaborative partnerships.

Expected impact

- Decreased suicide rate
- Increased behavioral health resources
- Increased public awareness through early detection and prevention

Targeted populations

Residents in CHNA Community

Strategies

- Increase access to behavioral health services in collaboration with community partners
- Continue to provide Camp Robin program to provide coping and treatment resources for adolescents experiencing the loss of a loved one
- Participate in community events with partner programs focused on suicide awareness and prevention
- Offer QPR (Question, Persuade, and Refer) trainings and other education to relevant staff and community members

Strategic measures

- Number of patients served by behavioral health services
- Number of students, staff, and community members trained in suicide prevention

Community collaborations

- West Kentucky Mental Health Work Group (WKMHWG) and Mental Health Workshop Task Force(s), developed in collaboration with Four Rivers Behavioral Health and American Foundation for Suicide Prevention
- Additional community boards and partnerships relevant to this body of work

Community resources available

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

- Mercy Health Physicians
- Mercy Health Hospice
- Four Rivers Behavioral Health
- Pathways Behavioral Health Services
- Christian Counseling Center
- Purchase Youth Village
- Merryman House
- Lotus
- Emerald Therapy
- Community Alternatives of Kentucky
- Mountain Comprehensive Care
- Faith Based Organizations
- West Kentucky Mental Health Work Group
- Mental Health Workshop Task Force

- American Foundation for Suicide Prevention
- Purchase Area Health Connections
- Purchase Area Mental Health & Aging Coalition

SUBSTANCE USE DISORDER

Description

Substance abuse has a major impact on individuals, families and communities. The effects of substance abuse contribute to social, physical, mental and public health problems. Specifically, the epidemic of opioid abuse has become the major cause of accidental death across the United States. The death rate related to drug poisoning is significantly higher than national rates for McCracken and Marshall Counties.

Goal

Provide community with resources to prevent and recognize substance use disorder.

Expected impact

- Increased education and prevention efforts around substance abuse
- Decreased underage drinking, abuse of prescription drugs and other substance abuse activity
- Decreased drug-related death rate

Targeted populations

- Residents in CHNA Community
- Adolescents in CHNA Community
- Law enforcement in CHNA Community

Strategies

- Work with community partners and law enforcement to raise awareness on western Kentucky drug trends and combating the opioid epidemic in our community, with a focus on adolescents and parents.
- With local health agencies, provide overdose prevention trainings and outreach programs
- Enhance access to overdose prevention medication to combat the opioid epidemic.
- Provide drug disposal collection box in Emergency Department and other safe locations throughout community
- Provide Deterra pouches through Hospice/Homecare and Inpatient Pharmacy for safe disposal of prescription opioids

Strategic measures

- Safe medication disposal program outcomes
- Number of patients served by behavioral health services
- Number of people participating in programs, trainings, and education opportunities

Community collaborations

- Multi-county Agency for Substance Abuse Policy/ Prevention (ASAP) groups
- Four Rivers Behavioral Health
- Four Rivers Regional Prevention Center
- Additional community boards and partnerships relevant to this body of work

Community resources available

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

- Mercy Health Physicians
- Agency for Substance Abuse Policy/ Prevention (ASAP)
- Fuller Substance Abuse Treatment Center
- The Family Connection
- CenterPoint Recovery for Men
- Ladies Living Free
- Kentucky Safety & Prevention Alignment Network
- Kentucky Moms MATR (Maternal Assistance Toward Recovery)
- Sources of Strength
- Purchase Area Health Connections
- Four Rivers Behavioral Health
- Four Rivers Regional Prevention Center

CHRONIC ILLNESS

Description

Chronic diseases such as diabetes and heart disease disproportionately impact the population over 65 years of age. Additionally, mortality rates related to chronic diseases in the community are significantly higher than national rates. The Lourdes Hospital CHNA Community has high incidence of diabetes among the adult population, as 10% of the adult population has diabetes (14,306 persons). Heart disease affects 4.9% of the adult population. Over 33% of the adult population in the community has high blood pressure with rates for the adult and Medicare populations coming in higher than national rates.

Goal

Prevent and reduce chronic disease by focusing on risk factors and healthy behavior changes.

Expected impact

- Reduced cases of high blood pressure, high BMI, and chronic diseases
- Reduced readmission rate
- Increased self-management, education and awareness to create healthy behavior changes in adults.

Targeted populations

 Residents in CHNA Community with diabetes, heart disease, high blood pressure, and/or other risk factors

Strategies

- Continue partnership with the Community Health Worker program, run through Purchase Area Health Connections and Purchase District Health Department, focused on reducing readmissions for chronic diseases
- Collaborate with community partners to provide opportunities and education promoting healthy living
- Increase access to health screenings
- Increases access to diabetes education and management services
- Become an active partner in community groups focused on gaps in care, resources for vulnerable populations, and promotion of healthy living.

Strategic measures

- Number of readmissions
- Number of patients referred to Community Health Worker program
- Number of patients in CHF Program/Clinic

Community collaborations

- Community Health Worker program, in partnership with Purchase Area Health Connections and the Purchase District Health Department
- Purchase Area Diabetes Connection
- Additional community boards and partnerships relevant to this body of work

Community resources available

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

Mercy Health Physicians

- Psychological Wellness Group, LLC
- Diabetes Prevention Program
- Purchase Area Diabetes Connection
- Public Health Departments
- Baptist Health Paducah
- Jackson Purchase Medical Center
- Heart USA
- Heartland Cares Foundation
- Healthy Paducah
- Marshall County Health Coalition
- Get Fit Graves
- Purchase Area Health Connections