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 Plan indicates which needs Lourdes Hospital will address and how, as well as which needs Lourdes Hospital won’t address and why.

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 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, 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 to addressing the significant community needs 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 in portions of at least three states. Approximately 89% of patients served reside within the Jackson Purchase Area of western Kentucky.

The “community” served by Lourdes Hospital was defined by reviewing the origin of the inpatient population. Lourdes Hospital admitted more than 11,500 patients in 2017. Based on the patient origin of inpatient discharges from January 1, 2017 to December 31, 2017, management has identified the Kentucky Counties of McCracken, Ballard, Graves and Marshall and the Illinois County of Massac as the defined CHNA Community (community). Patients from these counties represent 72% of inpatient discharges, with McCracken County having the highest percentage of discharges at 36.7%. On a combined basis, the
The CHNA Community has a population of 156,983 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 healing ministry of Jesus by improving the health of our communities with emphasis on people who are poor and under-served.

Mercy Health’s Mission and culture are expressed through the organization’s 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*

Executive Summary

BACKGROUND AND PROCESS
Information for this CHNA came from a variety of primary and secondary sources. Information and data was 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 from twenty-two stakeholders representing public health, local government officials, various nonprofit organizations, local churches through face-to-face meetings. In addition, three focus groups were conducted to obtain input from public health, social service agencies, local governmental agencies, public schools and libraries.

Secondary data was assessed including:
- 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.)

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 focus group 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 1.) health and quality of life; 2.) barriers to improving community health; 3.) health disparities; and 4.) 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.

Lastly, 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.

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 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
Lourdes Hospital 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 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 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.

<table>
<thead>
<tr>
<th>Prioritized significant community health need</th>
<th>Addressed by hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancer</td>
<td>Yes</td>
</tr>
<tr>
<td>Mental Health</td>
<td>Yes</td>
</tr>
<tr>
<td>Substance Use Disorder</td>
<td>Yes</td>
</tr>
<tr>
<td>Chronic Illnesses</td>
<td>Yes</td>
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</tbody>
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IMPLEMENTATION STRATEGIES TO ADDRESS SIGNIFICANT COMMUNITY HEALTH NEEDS

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

CANCER

Description
As detailed in the hospital’s Community Health Needs Assessment Report: Kentucky has the highest number of age adjusted new cancer cases per year in the entire United States, with 194 cases in Kentucky and the service area of Mercy Health – Lourdes averaging 180 cases and the national rate of 156 cases per 100,000 population. Lung cancer places a particular burden on the Commonwealth with 61 cases in Kentucky and averaging 50 cases in the Mercy Health – Lourdes service area compared with 39 cases nationally per 100,000 population. Overall cancer mortality rates of 194 in Kentucky and averaging 180 in the Mercy Health – Paducah service area contrasted with 156 per 100,000 population showing issues with patients having access to appropriate cancer care locally. Mercy Health – Lourdes needs the ability to provide full service seamless and quality cancer care services to build on its largest regional medical oncology program, superior surgical oncology services, and the largest area primary care network and its large clinical integrated network of 11,300.

Goal and Expected Impact
Enhance community opportunities through promotion of healthy living and cancer risk factors

Targeted populations
- Residents in Lourdes CHNA Community are smokers
- Residents in Lourdes CHNA Community with cancer in family history
- Residents in Lourdes CHNA Community of screening age

Strategies
- Continuation of superior oncology surgical services.
- Partnership and alignment with local medical oncology services to ensure quality regional cancer program operations.
• Development of state-of-the-art radiotherapy services to meet the need of the communities served.
• To give primary care providers and patients genetic knowledge to make better decisions on cancer screening for early detection and other interventions to provide protections against cancer
• Continuation of cancer support group
• Continuation of smoking cessation classes for general public
• Enhance communication system to include faith based, military & workforce development.
• Outline which community boards and partnerships are relevant to this body of work.
• Facilitate stronger alignment and representation of Mercy Health and community boards to promote a perception of commitment to the community.

Strategic measures
• Volume of cancer surgeries vs previous year
• Full and successful acquisition of the highest volume and highest quality medical oncology practice in the region – move to hospital – based program with associated quality metrics
• Successful Certificate of Need application for state-of-the-art radiotherapy program that combined with above medical oncology program will offer full-service cancer services to the region.
• Number of eligible patients receiving high risk cancer genetics testing.
• Number of interventions implemented to improve access to care.
• Number of community board appointments involving leaders
• Number of new community partnerships developed

Community collaborations
• Lourdes Hospital will join efforts with health coalitions throughout our service area to impact our population offering free community wide screenings in collaboration with other health systems & health departments.
• The Purchase Area Health Connections coalition began in February 2014 with a grant from University of Kentucky’s Center Community and Economic Development Initiative received by the Purchase District Health Department. The coalition began to gather in 2014 and since then has diligently worked to address the social determinants of health in our area. PAHC has had various accomplishments and is constantly working on new community health initiatives.
• As part of Lourdes’ commitment to fostering healthy communities, Lourdes is pleased to announce a free smoking cessation series, beginning in June, for those interested in quitting smoking. 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.

Community resources available
The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:
- Kentucky Cancer Program
- Lourdes Hospital
- Baptist Health Paducah
- Purchase District Health Department
- Kentucky Cancer Link
- Local, regional health committees and coalitions

MENTAL HEALTH

Description
Kentucky ranked 19th in the country for suicides with a rate of 15.5 per 100,000 making it the tenth leading cause of death overall. The national rate for 2016 was 12.6 per 100,000 in the United States. Suicide is the second leading cause of death in the 15 – 34-year-old age group and the third leading cause of death in the 35 – 54-year-old age group.

Goal
Improve access to mental and behavioral health through collaborative partnerships.

Expected impact
- Enhance community partnerships to strengthen community priorities.
- Improve early intervention
- Continue positive advocacy efforts around mental health well being

Targeted populations
General Public; WKY has the highest suicide rate per capita than any other region across the Commonwealth.
Strategies

- Outline which community boards and partnerships are relevant to this body of work.
- Facilitate stronger alignment and representation of Mercy Health and community boards
- Continuing development and growth of West Kentucky Mental Health Work Group to impact vulnerable populations
- Work to improve access in Marshall, McCracken, Ballard & Graves Co Schools
- Develop a sub-committee for advocacy at local, state, & federal level though West Kentucky Mental Health Work Group – PAHC Committee
- Enhance communication strategy around positive mental health advocacy.

Strategic measures

- Number of community board appointments involving leaders
- Number of new community partnerships developed
- Number of students, faculty & staff trained in SP
- Increase the number of external partners combating mental health epidemic
- Increase number of discussions with key community stakeholders & elected officials.

Community collaborations

- To Improve early intervention, the West Kentucky Mental Health Work Group (WKMHWG) and the Mental Health Workshop Task Force(s) throughout our service area will develop efforts to improve early intervention to impact the young population. Mercy Health developed work group committee in collaboration with Four Rivers Behavioral Health & American Foundation for Suicide Prevention. Work group originated in fall 2016. Since 2016 to current date, our work group has raised near 200,000 to combat the negative stigma associated with mental health,
- In collaboration with our WKMHWG; Lourdes Hospital is planning the first 2020 Day at the Capitol in Frankfort, KY. The goal is to change and strengthen the broader system: policies, laws, and culture.
- Camp Robin – The program provides treatment resources for adolescents with behavioral health issues in Western Kentucky through initiatives focused on coordination of care.
• Survivors of Suicide Loss Group - Assist in providing additional resources for anyone whose experienced loss by suicide with development and creation to Western Kentucky's Mental Health Work Group.
• Continue participation in “A Day of Healing” International Survivors of Suicide Loss Day.

**Community resources available**
The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:
• Four Rivers Behavioral Health
• Pathways Behavioral Health Services
• Mercy Behavioral Health Specialists
• Christian Counseling Center
• Purchase Youth Village
• Merryman House
• Lotus
• Emerald Therapy
• Community Alternatives of Kentucky
• Mountain Comprehensive Care
• Faith Based Organizations

**SUBSTANCE USE DISORDER**

**Description**
As detailed in the hospital's Community Health Needs Assessment Report: The epidemic of opioid abuse has become the major cause of accidental death in Southwest Ohio. Patients are more likely to enter rehabilitation following appropriate withdrawal in a monitored setting. An evidence-based opiate withdrawal protocol for patients admitted with medical illness could link them to internal and external medication-assisted therapy. This is key to success and lasting sobriety. Mercy Health partners with Brightview, which is an outpatient addition medicine practice based on clinical best practices and outcomes measures.

**Goal**
Provide communities with resources to prevent and recognize substance use disorder throughout Ballard, Marshall, McCracken & Graves Counties.
**Expected impact**

- Outline which community boards and partnerships are relevant to this body of work.
- Facilitate stronger alignment and representation of Mercy Health and community boards to promote a perception of commitment to the community.
- Development of Substance Use Disorder program in collaboration with University of Kentucky, local enforcement and health care system
- Focus on improving infant mortality in western Kentucky – Community Baby Shower event scheduled for October 17, 2020.
- Provide resources and education to these communities at targeted events – Presenting sponsor of Paducah Housing Authority’s Community Day held on July 26, 2019. Mercy provided physical fitness activities for the youth as well as provided information on skin cancer and mental health services
- Focus on improving Harm Reduction Training across service area in collaboration with KY CARE—FQHC and Purchase District Health Department
- Enhance access to overdose prevention medication, also known as Narcan.

**Targeted populations**

- General Public
- Housing Authority Population
- Law Enforcement
- Adolescent
- Work Force

**Strategies**

- Enhance community partnerships to strengthen community priorities.
- Enhance parent/youth Substance Use Disorder education
- Provide guidance and resources to vulnerable population to ensure positive health outcomes.

**Strategic measures**

- Number of community board appointments involving leaders
- Number of new community partnerships developed
- Number of Parents/Youth intervention's through evidence-based programs
- Increase the number of Kentucky Moms MATR programs on our campus.
- Number of interventions
Community collaborations

- Drug Alcohol Tobacco Don’t Fit Conference - High School Students from 13 different High Schools across Lourdes Service Area in attendance. Conference was planned over a year and Lourdes provide funding to assist in youth presenter's fee. Substance Abuse presenter came into Paducah Market from Boston, MA to speak to our service area adolescents on substance abuse. This conference also had break out session that provided cyber bullying and social media, dangers of e-cigarettes and how to say no to drugs.

- Not My Kid - This forum has been organized to raise awareness on western Kentucky drug trends, combating opioid epidemic and healthy mental health coping mechanisms in our community. With a focus on adolescents and parents.

- Sources of Strength - A best practice youth suicide prevention project designed to harness the power of peer social networks to change unhealthy norms and culture, ultimately preventing suicide, bullying, and substance abuse. The mission of Sources of Strength is to prevent suicide by increasing help seeking behaviors and promoting connections between peers and caring adults. Sources of Strength moves beyond a singular focus on risk factors by utilizing an upstream approach for youth suicide prevention. This upstream model strengthens multiple sources of support (protective factors) around young individuals so that when times get hard, they have strengths to rely on.

- Overdose Prevention Trainings - Opioid Epidemic overdose Outreach Program trained over 305 first responders in "train the trainer" with collaboration from Kentucky Harm Reduction Coalition--Louisville KY.-- Mercy Health funds 50 Narcan kits to region annually.

- Agency of Substance Abuse Policy & Prevention & Kentucky Safety & Prevention Alignment Network PROGRAM(S) - Developed, Implemented & Maintained multiple regional and statewide substance use disorder prevention and/or crisis recovery programs with partnering agencies.

Community resources available

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

- ASAP-Agency for Substance Abuse Policy/ Prevention
- Wm. H. Fuller Substance Abuse Treatment Center
- Fuller Center
- The Family Connection
- CenterPoint Recovery for Men
As detailed in the hospital’s Community Health Needs Assessment Report: Lourdes Hospital invests in strategies and initiatives that encourage healthy behaviors. Our organization works with other community partners to strengthen resources available to address healthy behaviors. The CHNA Community has high incidence of diabetes among the adult population. Almost 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. Chronic diseases such as diabetes and heart disease disproportionately impact the population over 65 years of age.

**Goal**
Prevent and reduce chronic disease by focusing on risk factors.

**Expected impact**
- Enhance community partnerships to strengthen community priorities.
- Engage community opportunities promoting healthy living and access
- Provide guidance and resources to vulnerable population to ensure positive health outcomes.

**Targeted populations**
Adult population with diabetes, heart disease, and high blood pressure.

**Strategies**
- Outline which community boards and partnerships are relevant to this body of work.
- Facilitate stronger alignment and representation of Mercy Health and community boards
- Collaborate with external partners by offering community based educational sessions.
- Continue to provide monetary contribution to toward Purchase Area Health Connection Coalition, Community Health Work Program based out of Purchase District Health Department.
- Becoming an active partner in focus group(s) to determine the gaps in care and resources for vulnerable population.
Strategic measures
• Number of interventions implemented to improve access to care.
• Access to care by connecting at risk patients to CHW Program
• Decreases number of readmissions
• Number of community board appointments involving leaders
• Number of new community partnerships developed

Community collaborations and resources available
The existing healthcare facilities and other resources in the community that are available to meet the prioritized need include:
• Psychological Wellness Group, LLC
• Diabetes Prevention Program
• Purchase Area Diabetes Connection
• Public Health Departments
• Baptist Health
• Jackson Purchase Medical
• Mercy Health
• Heart USA
• Heartland Cares Foundation