COMMUNITY HEALTH NEEDS ASSESSMENT
IMPLEMENTATION STRATEGY

Mercy Health – West Hospital

IDENTIFYING INFORMATION

Hospital Name: Mercy Hospitals West dba Mercy Health - West Hospital, Mercy Health – Mt. Airy Hospital, and Mercy Health – Western Hills Hospital

Primary Address: 3300 Mercy Health Boulevard, Cincinnati, OH 45211
Implementation Strategy Tax Year: 2014
Tax Identification Number: 31-1091597
Chief Executive Officer: Michael Stephens, President, and Market Leader-West Region
Date Implementation Strategy Approved by Board: ________
Due Date for Form 990 Filing that Includes Implementation Strategy: ________

PRIORITIZATION OF HEALTH NEEDS

The county level results of HCAN’s A Community Health Needs Assessment for Southwest Ohio and Southeast Indiana were supplemented with additional data from the following sources:

- “By the Numbers,” Mental Health Advocacy Coalition.
- Cancer Incidence and Mortality; Ohio Cancer Incidence Surveillance System.
- Chronic Disease Indicators; State/Area Profile; CDC’s National Center for Chronic Disease Prevention and Health Promotion; http://apps.nccd.cdc.gov accessed September 4, 2012.
- Clermont County Vital Statistics; Clermont County General Health District.
- County Health Rankings & Roadmaps; www.countyheathrankings.org
- Diagnoses for All Hospital Admissions per Service Area (by zip code); Ohio Hospital Association.
- Policy Brief: Mental Health in Ohio; Health Policy Institute of Ohio, September 2009.

Priorities were established among identified health needs using a multi-level process incorporating the perspective of major stakeholders in the local community as defined in the IRS Notice and are relevant to the hospital’s defined service area. Local community leaders were invited to join hospital leaders and regional representatives for one scoring session. They were provided a list of health needs, conditions, or issues with data from HCAN’s report and the sources above, as relevant.

This process involved the scoring of each identified health need based on selected key criteria. Each criterion was also assigned a weight based on its relative importance in relation to the other key criteria. This scoring method created a rank order among the identified health needs.
IDENTIFIED COMMUNITY HEALTH PRIORITIES

- Mental Health
- Dental Health
- Heart Disease
- Access To Care
- Diabetes

**Mental Health**

Initiate a collaborative care model structured like the IMPACT program as developed by The University of Washington. This model will be developed and implemented within the 2013/2014 time frame.

The model consists of five essential elements:

**Collaborative care is the cornerstone of the IMPACT model**

- The patient's primary care physician works with a care manager to develop and implement a treatment plan (medications and/or brief, evidence-based psychotherapy)
- Care manager and primary care provider consult with psychiatrist to change treatment plans if patients do not improve

**Depression Care Manager** - This may be a nurse, social worker or psychologist and may be supported by a medical assistant or other paraprofessional. The care manager:

- Educates the patient about depression
- Supports antidepressant therapy prescribed by the patient's primary care provider if appropriate
- Coaches patients in behavioral activation and pleasant events scheduling
- Offer a brief (six-eight session) course of counseling, such as Problem-Solving Treatment in Primary Care
- Monitors depression symptoms for treatment response
- Completes a relapse prevention plan with each patient who has improved
**Designated Psychiatrist:**

- Consults to the care manager and primary care physician on the care of patients who do not respond to treatments as expected

**Outcome measurement:**

- IMPACT care managers measure depressive symptoms at the start of a patient's treatment and regularly thereafter. Consideration will be given to the PHQ-9 as a measurement tool.

**Stepped care:**

- Treatment adjusted based on clinical outcomes and according to an evidence-based algorithm
- Aim for a 50 percent reduction in symptoms within 10-12 weeks
- If patient is not significantly improved at 10-12 weeks after the start of a treatment plan, change the plan. The change can be an increase in medication dosage, a change to a different medication, addition of psychotherapy, a combination of medication and psychotherapy, or other treatments suggested by the team psychiatrist.

Source: [http://impact-uw.org](http://impact-uw.org)

**Dental Health**

Access to dental health services was identified as a priority in the Community Health Needs Assessment conducted by Mercy Health – West Hospital. While this is a legitimate community concern, Mercy Health – West Hospital has chosen to not focus their efforts on this need. Neither access to nor provision of dental care is a core competency of the hospital and should be considered to be outside the hospital’s sphere of community influence. Our community benefit resources would be far better deployed by focusing these resources on the remaining four priority areas.

Further, this need is currently being addressed by the CincySmiles Foundation, formerly known as the Greater Cincinnati Oral Health Council, whose primary focus is one of creating access to dental care for needy populations. This organization implements innovative public programs including:

- OPTIONS/ Donated Dental Services
- School- Based Dental Disease Prevention Program
- The Dental Road Crew, a state-of-the-art dental office on wheels
• Head Start – Early Childhood Initiative

• Lincoln Heights Dental Center - This 8-chair dental facility provides comprehensive dental care to 3,500 low income children and adults from Hamilton, Butler and Warren Counties. This is one of the few places the working poor can go to get quality dental care at fees based on their income level. The Center serves 8-10 people with dental emergencies every day in addition to scheduled appointments. It is associated with the HealthCare Connection, a federally funded health clinic with a 20-year history of serving low income Valley residents

• Mercy Health West Hospital is providing assistance in the form of rent subsidies to the Crossroads Health Center to allow them to maintain their services at our Western Hills campus. In addition to medical services for indigent patients, basic dental services are offered as well.

Heart Disease

The existing Mercy Health - Mt. Airy and Western Hills hospitals historically have not maintained a comprehensive cardiovascular program. Early planning for the new replacement hospital, as well as these most recent efforts in the community health needs assessment, underscored this area as a true health need priority. The new Mercy Health – West Hospital (opening October 2013) will host a comprehensive cardiovascular program that will feature the following services:

• Cardiac catheterization labs
• Cardiac peripheral procedures
• Coronary artery bypass grafts
• Coronary and peripheral angioplasty
• Coronary stents
• Angioplasty stents
• Diagnostic imaging
• Open Heart Surgery
• Defibrillator implants and replacements
• Pacemaker implants
• Heart value repair and replacement
• Stress tests
• Surgical treatment of atrial fibrillation
• Surgical treatment of congenital heart defects
• Thoracic aortic procedures

• The new Mercy Health – West Hospital will also offer a cardiac rehabilitation program. The cardiac rehabilitation program helps cardiac patients lead better, healthier lives through education and exercise. The program is staffed by cardiac nurses, dietitians and exercise specialists. They provide direction and support in exercise, low-fat diets, stress reduction, smoking cessation and other healthful practices. Programs are customized to meet the needs of each patient. The cardiac rehabilitation program is for patients recovering from coronary bypass surgery, angina (chest pain), angioplasty and heart attacks. It’s also beneficial for patients dealing with circulation problems, diabetes, lung problems and valve disorders.

• The Heart Institute of Mercy Health has teamed with HealthFair, the national leader in mobile screening services, to deliver affordable and convenient mobile heart screenings and extend Mercy Health’s network of care throughout Cincinnati. HealthFair is the only mobile screening company with Joint Commission Accreditation, ensuring superior quality and dedication to customer service. This mobile service offers several screening packages to test people for their risk of heart attack, stroke, aneurysm and other major diseases.

• Continue the ongoing Mercy Health Physician community seminar series and ensure sufficient program content on cardiovascular issues

• Provision of community health fairs / screening events that include screening for blood pressure and cholesterol levels.

• Promote healthy lifestyles, wellness and fitness through our HealthPlex facility. Plans are being made to expand service locations beyond the Western Hills campus to include the new Mercy West Hospital campus.

• Mercy Health is a corporate sponsor of the Heart Mini-Marathon that raises community awareness and support for heart disease and stroke.
**Access to Care**

- **Health Partnership Program** – This program links the uninsured working poor (<200% FPL) with physicians in private practice who agree to treat patients for a modest co-pay. An annual pharmaceutical benefit is provided, also with a small co-pay, at a discount through The Kroger Company. The Program staff conducts all eligibility screening and provides a membership card. The membership card is recognized by the staff in the physician's office and at the pharmacy, and so there is no stigma of a patient being treated as a “charity case.” The primary beneficiaries are the working poor, between the ages of 19 and 65. For the majority of Health Partnership Program members, their only recourse is an Emergency Department in a hospital or, in some communities, a clinic. Not all communities in greater Cincinnati have a local clinic. Many members were previously turned away by physicians and/or clinics when they could no longer pay their bills. The enrollment process is easy and simple. A new member can access the prescription benefit on the day of enrollment. Physicians like the program because patients have prescription assistance and because there is no paperwork for their office staff. The members like it because they can maintain or improve their health and they are treated no differently than other private-pay patients. Most members participate temporarily. By staying healthy, they are able to improve their employment status. They move on to better jobs with health care insurance and retain the same physician. The Program counts non-traditional sources of income, like unreported pay from home-based businesses. The members receive assistance from a 'partner' who educates and advocates on their behalf. Members receive personal help to access pharmaceutical products/discounts; specialty clinics; social services; mental health services; and hospital services.

- **Hospital Eligibility Link Program (HELP) - Financial Help for Patients and Their Families** – We provide financial assistance to uninsured patients through our Hospital Eligibility Link Program (HELP). HELP is a free referral service provided by Mercy Health. We assist patients in obtaining medical benefits through federal, state and hospital programs. If they cannot afford to pay for some or all of their hospital bill, Mercy Health will:
  - Advise where and how to get assistance to pay hospital bills.
  - Assist in finding programs for which they qualify.
  - Sign patient up for state and/or hospital programs that match their need.
• Mercy Health – West Hospital is a continuing sponsor of Healthy Moms & Babes. This program is an outreach ministry whose mission is to increase infant survival as well as foster the health of women, children and families. The program offers comprehensive services including pregnancy testing, prenatal services and first year of life program all offered through both a mobile van and home outreach services. Mercy annually budgets $140,000 to support this program.

• Mercy Health actively supports an existing school based health center targeted at children of low income families (the HANDS Clinic) and will be supporting the development of an additional school based center in 2013.

• Starting with the new hospital opening in October 2013, the Obstetrics program will begin offering childbirth classes. While a charge is usually associated with these classes, Mercy feels strongly about the importance of this education and has made the commitment to provide vouchers to parents unable to afford the classes.

• In conjunction with the opening of the new Obstetrics program and Mercy West, a new OB clinic program will begin operation as collaboration between the hospital, Healthy Mom’s and Babes and the Seven Hills medical group.

• Mercy Health West Hospital is a participant in the Safe Haven / Secret, Safe Place for Newborns program.

• Transition Nurses – Post-hospital follow up of high risk patients and facilitate access to care post discharge.

Diabetes
In greater Cincinnati, as part of the Robert Wood Johnson Foundation’s Aligning Forces for Quality, a special focus has been placed on improving outcomes for people with diabetes. A majority of community based primary care physicians are now voluntarily reporting their population level outcomes for people with diabetes towards the goal of improving A1C scores. As a community, we have moved from 15% compliance with all five measures to 31% compliance.

Diabetes related initiatives specific to Mercy Health – West Hospital include:

• Pre-diabetes classes
  o Pre-diabetes is a condition that forms before diabetes. It means that blood sugar levels are higher than normal but aren’t high enough to be diagnosed as diabetes. Usually a fasting blood sugar level of 100-125 mg/dl indicates pre-diabetes. Pre-diabetes is a warning sign that allows people to take action to prevent or delay the onset of Type 2 diabetes. Diabetes educators who are also registered dietitians teach Mercy Health’s
pre-diabetes classes. Each class includes information on making healthy food choices, exercise and blood sugar control, monitoring blood sugar levels.

- Diabetic screening and treatments for indigent patients are provided through the Health Partnership Program

- The Wellness Discovery Program offered through the HealthPlex is a five-week beginner wellness program that introduces safe and effective movement, nutrition and stress management. Comprised of 10 interactive sessions led by a certified fitness professional, the program gives the guidance, knowledge and confidence a person needs to integrate healthy habits into their lifestyle successfully. Through the program, they will have the opportunity to lose weight, improve your balance and increase your strength.
  - To evaluate its positive impact on health, the program uses metrics including weight, blood pressure, body mass index (BMI), the six-minute walk test, the Patient Activation Measurement (PAM) - a quality of life questionnaire and a PAVS score.
  - After completing the Wellness Discovery program, you can continue your wellness journey in a Be Well support group. These groups, which are open to everyone, provide ongoing guidance, accountability and support in a small group environment. Many graduates of the Wellness Discovery Program have joined the Be Well support groups to continue their wellness efforts.
  - Support groups meet once a week for an hour and highlight a different topic each week. Topics include:
    - How to make exercise fun
    - Nutrition (healthy eating vs. dieting)
    - Diabetes
    - Resistance and strength training
    - Mind/body fitness and emotional wellness