





St. Mary's Hospital

Community Health Needs Assessment Implementation Strategy

Fiscal years 2016-2019

St. Mary's Hospital (STMH) completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Directors on April 26, 2016. STMH performed the CHNA in adherence with certain federal requirements for not-for-profit hospitals set forth in the Affordable Care Act and by the Internal Revenue Service. The assessment took into account input from representatives of the community, community members, and various community organizations.

The complete CHNA report is available electronically at <http://www.stmarysathens.org/about-us/community-benefit/>, or printed copies are available at St. Mary's Hospital.

Hospital Information and Mission Statement

St. Mary's Hospital is located in Athens-Clarke County and serves a multi-county area in Northeast Georgia. Athens-Clarke County, comprised of 121 square miles, is the smallest in land area of Georgia's 159 counties. It is located approximately 65 miles northeast of Atlanta and is 94 percent urban. The U.S. Census Bureau estimates the 2010 population of Athens-Clarke County to be 116,714, making it the 19th most populous county in the state.

Among counties with a population of at least 100,000, Athens-Clarke County has the third lowest median age in the United States (25.9). Of the 2010 Census population: 17.5 percent of the population was under 18 years of age; 74.0 percent were between the ages of 18 and 64; and 8.5 percent were age 65 or older. The gender distribution of the county was 52.5 percent female and 47.5 percent male.

The residents of Athens-Clarke County come from a myriad of ethnic, cultural and socioeconomic backgrounds. The majority of the population is white (61.9%), followed by black or African-American (26.6%). From 2000 to 2010, the Hispanic population in the county increased 4.1 percent.

The residents of Athens-Clarke County exceed the state average in education attainment levels, both in terms of high school completion and four or more years of college education. Of the population age 25 years and over in Athens-Clarke County, 41.2 percent have at least

a bachelor's degree compared to 15.8 percent in the average county in Georgia. According to the Georgia Department of Labor, the average unemployment rate in the county fell to 6.5 percent in 2012.

Despite the high number of educated citizens in the local workforce and a relatively low unemployment rate, Athens-Clarke County has a very high poverty rate. In 2010, the per capita income in Athens-Clarke County was \$25,309 and the median household income was \$34,000. At 33.3 percent, the poverty rate in Athens-Clarke County is nearly double the Georgia average of 18.0 percent. Poverty levels are particularly striking for children in the county; 35.5 percent of the population under age 17 lives below the poverty level.

Mission

We, St. Mary’s Hospital and Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

Health Needs of the Community

The CHNA conducted in 2015/2016 identified 10 significant health needs within the St. Mary's Health Care System community. Those needs were then prioritized based on the reaction and reflection to the following questions: What is the severity or prevalence in your community?

Is this a health need you can address? Do you have the needed expertise, resources, and partners? Are you already addressing this need? And do you have the ability to make and show impact? The 10 significant health needs identified, in order of priority include:

HIV/AIDS & STD's	<ul style="list-style-type: none"> Despite the fact that fewer people are being screened for HIV in the region than in the state, both HIV and chlamydia prevalence are increasing in the hospital service area over time.
Cerebrovascular Health	<ul style="list-style-type: none"> Regionally, there was a 32% increase in ER visits for stroke since 2013, speaking to the need for greater community-based prevention strategies targeted at the primary risk factors for stroke.
Access to Care	<ul style="list-style-type: none"> The region lacks adequate and affordable healthcare options in the areas of primary, dental, and mental health, especially for those without adequate insurance.
Diabetes & Obesity	<ul style="list-style-type: none"> In Clarke Co. 27 % of population is overweight and 25% are obese. Additionally, there is inadequate access to healthy foods and decreasing access to recreational and fitness facilities across the region.
Cardiovascular Disease	<ul style="list-style-type: none"> #1 Cause of death in Clarke County.
Cancers	<ul style="list-style-type: none"> Significant race-based cancer mortality disparities were documented in this region.

Respiratory Health	<ul style="list-style-type: none"> Clarke Co. has a higher rate of tobacco use than at the state and national level.
Mental Health & Substance Abuse	<ul style="list-style-type: none"> The region suffers from a severe lack of mental health providers and is a federally designated mental health provider shortage area.
Injury Prevention & Safety	<ul style="list-style-type: none"> Poisonings, including alcohol and unintentional drug overdoses, account for a significant portion of preventable deaths in the region. Similar to the state and nation, motor vehicle crashes account for more deaths in young males than other groups.
Maternal & Infant Health	<ul style="list-style-type: none"> Clarke Co. is above the nation average in infant mortality and low birth rate.

Hospital Implementation Strategy

St. Mary's Hospital resources and overall alignment with the hospital's mission, goals and strategic priorities were taken into consideration of the significant health needs identified through the most recent CHNA process.

Significant health needs to be addressed

St. Mary's Hospital will focus on developing and/or supporting initiatives and measure their effectiveness, to improve the following health needs:

- **Access to Care** – Detailed need-specific Implementation Strategy on pages 5-6
- **Cerebrovascular Health, Diabetes & Obesity, Cardiovascular Health, and Respiratory Health** – Detailed need-specific Implementation Strategy on pages 7-9

Significant health needs that will not be addressed

St. Mary's Hospital acknowledges the wide range of priority health issues that emerged from the CHNA process, and determined that it could effectively focus on only those health needs which it deemed most pressing, under-addressed, and within its ability to influence. STMH will not take action on the following health need:

- **HIV/AIDS & STD's** – STMH: This priority is addressed by AIDS Athens, Inc. This non-profit organization serves all 10 counties in the Northeast Health District (District 10) of Georgia. This community organization addresses the needs of individuals infected and affected by HIV/AIDS through supportive services and to prevent the spread of the disease through education and outreach. The hospital provides treatment and referrals as appropriate.
- **CANCER** – STMH: The hospital is not a Cancer Center and does not have an oncology practice; resources are limited to address this need. Additionally, the hospital does not want to duplicate services. There is another hospital in the

community with a cancer center. However, the hospital continues conducting screenings and referrals.

- **INJURY PREVENTION & SAFETY – STMH:** The hospital has a variety of services and programs in this area such as helmet safety and car seat safety, and high school CPR education as well as CPR classes for local industries. There is a partnership with the University of Georgia on Sport Injury prevention education. There are other local organizations providing safety and injury prevention education in the community.
- **MATERNAL & INFANT HEALTH – STMH:** This health need is already been addressed by St. Mary’s Family Birth Center and the pediatric hospice care. Also, there is a strong local WIC clinic in the county.
- **MENTAL HEALTH & SUBSTANCE ABUSE– STMH:** The hospital is participating in a county-wide initiative to comprehensively address this need in the community.

This implementation strategy specifies community health needs that the Hospital has determined to meet in whole or in part and that are consistent with its mission. The Hospital reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During the three years ending in 2019, other organizations in the community may decide to address certain needs, indicating that the Hospital then should refocus its limited resources to best serve the community.

CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2016-2019

HOSPITAL FACILITY:	St. Mary's Hospital		
CHNA SIGNIFICANT HEALTH NEED:	Access to Care		
CHNA REFERENCE PAGE:	Page 132	PRIORITIZATION #:	9
BRIEF DESCRIPTION OF NEED: The region lacks adequate and affordable healthcare options in the areas of primary, dental, and mental health, especially for those without adequate insurance.			
GOAL: By June 30, 2019, increase access to care education and resource outreach events to Athens-Clarke County communities and identify individuals for further care.			
OBJECTIVE: Bring at least 18 education and resource outreach events to Athens-Clarke County communities and reach a minimum of 500 individuals annually. From the outreach events, identify and enroll a minimum of 30 eligible individuals into insurance programs and connect at least 30 individuals with Primary Care Physician (PCP) resources.			
ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:			
<ol style="list-style-type: none"> 1. Engage local community partners to annually host/co-host events bringing outreach education to their communities on the following topics: <ul style="list-style-type: none"> • Appropriate ER utilization • Benefit of having a PCP and available provider resources • Insurance Enrollment Opportunities 2. Follow up with community events participants to assist them in navigating the applicable insurance enrollment process. 3. Identify at least 3 primary care provider resources—with capacity and collaboration interest in outreach program—to collectively care for identified patients from annual outreach events. 			
ANTICIPATED IMPACT OF THESE ACTIONS:			
<ol style="list-style-type: none"> 1. At least 2 community partners and 6 outreach events held in Clarke County communities that will reach at least 500 individuals annually. 2. A minimum of 10 participants enrolled in insurance annually. 3. A minimum of 10 participants will be connected with Primary Care Providers annually. 			
PLAN TO EVALUATE THE IMPACT:			
<ul style="list-style-type: none"> • Outreach events reach target number each year: # of events and # of attendees. • Count the number of participants enrolled in insurance programs as a result of outreach events with identification of challenges to insurance enrollment and follow up. • Follow-up with patients connected with PCP resources to help navigate any challenges. 			

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Staff Time – at least 2 staff per event.
 - Clinical
 - Non-Clinical
- Materials/Supplies.
- Approximately \$2000 a year out of community benefit.

COLLABORATIVE PARTNERS:

- Mercy Health
- Athens Land Trust
- Clarke County School District
- Clarke County Housing Authority
- Athens Neighborhood Clinic

CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2016-2019

HOSPITAL FACILITY:	St. Mary's Hospital		
CHNA SIGNIFICANT HEALTH NEED:	Cerebrovascular Health, Diabetes & Obesity, Cardiovascular Health, and Respiratory Health		
CHNA REFERENCE PAGE:	Page 142	PRIORITIZATION #:	6
	Page 146		4
	Page 135		1
	Page 162		2

BRIEF DESCRIPTION OF NEED: Regionally, there was a 32% increase in ER visits for stroke since 2013, speaking to the need for greater community-based prevention strategies targeted at the primary risk factors for stroke. Cardiovascular disease is the #1 cause of death in Clarke County; and Clarke County has a higher rate of tobacco use than the state and national levels. 27 % of population is overweight and 25% are obese in Clarke County.

GOAL: By June 30, 2019, empower individuals to better manage chronic conditions by increasing awareness and education on etiology, prevention, and intervention.

OBJECTIVE: Improve the health condition of the community by increasing the number of individuals receiving health screenings by collaborating with community partners to annually establish one 12 week educational program focused on disease management to decrease participant biometric - anthropometric levels by 10%, and by increasing participation in disease management support groups by 20% over a three year period.

ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

Activity 1: Provide and expand community outreach events, such as health fairs/screenings. Expand on screening events by identifying high risk populations (i.e.)

- Blood Glucose > 300 mg/dl in the participants with diabetes population.
- Blood Glucose > 140 mg/dl in the participants without diabetes population – identify prediabetes and prevent diabetes.

Activity 2: Explore community health activity with community partners to re-establish Hope for Health Program, a 12 week educational program focusing on the health needs identified by our disease management group.

Activity 3: Expand hospital disease management support group into the community by identifying partner sites for disease management groups to meet outside of hospital and establishing pilot group from the following offerings. Choice will be based on need of partnering site, classes may include: Cardiac Rehab, Pulmonary Rehab, Smoking Cessation Class, Healthy Heart Living Class, Wellness Center. Support Groups possibilities are: Diabetes, Stroke Survivors, Heart Success, Better Breathers.

ANTICIPATED IMPACT OF THESE ACTIONS:

Activity 1: Enhance community outreach events.

- STMH participation at 10 health fair/screening events each year.
- Increase in the number of individuals screened by 10% each year (baseline of 1500).
- Increase in the early identification of high risk diabetes population.
- Creation of a method to identify and assess high risk populations for access to healthcare and self-management skills and a process to assist these patients with access to care and follow-up education.

Activity 2: Reestablish Hope for Health Program.

- Establish a partnership with one community partner and implement a program per year.
- Improve disease management in participants by 10%.

Activity 3: Expand hospital disease management support group into the community.

- Increase participation in program over a three year period of 20% (baseline to be determined in year 1).

PLAN TO EVALUATE THE IMPACT:

Activity 1: Enhance community outreach events.

- Establishment of metrics to identify high risk population.
- Development of a tool to assess individuals for access to healthcare and self-management skills:
 - # of people screened
 - # of individuals identified as high risk
 - # of individuals assessed using tool
 - # of individuals assisted with access to care and follow-up education

Activity 2: Reestablish Hope for Health Program.

- The number of successful partnerships.
- Track # of participants attending each session: 10% of participants will see a decrease in their biometric/anthropometric data and 20% of participants will score higher on the posttest.

Activity 3: Expand hospital disease management support group into the community.

- Monthly track: # of referrals and # of attendees.
- Patient attendance rate vs patient no-show rate.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

Activity 1: Enhance community outreach events.

- Staff from various departments
- Supplies
- Diabetes Education staff hours
- Additional staff will be needed at health screenings to facilitate assessment of identified patients.
- Possible additional DM Education resource to assist with increased patient education and follow-up.

Activity 2: Reestablish Hope for Health Program.

- Staff hours
- Funds through Community Benefit

Activity 3: Expand hospital disease management support group into the community

- Programs are already in place
- Staff Hours
- Outside facility

COLLABORATIVE PARTNERS:

Activity 1: Enhance community outreach events.

- Walton EMC
- Jackson EMC
- Athens Clarke County

Activity 2: Reestablish Hope for Health Program.

- Faith-based organizations
- Corporations
- Clarke County Housing Authority
- Clarke County School District

Activity 3: Expand hospital disease management support group into the community.

- Mercy Clinic
- Clarke County Housing Authority
- Clarke County School District
- Athens Neighborhood Clinic
- Athens Nurses Clinic

Adoption of Implementation Strategy

On [April 26, 2016](#), the Board of Directors for [St. Mary's Hospital](#), met to discuss the [2016-2019 Implementation Strategy](#) for addressing the community health needs identified in the [2015/2016 Community Health Needs Assessment](#). Upon review, the Board approved this Implementation Strategy and the related budget.

Name & Title

____/____/____
Date