COMMUNITY HEALTH IMPROVEMENT STRATEGIES 2017-2019 Premier Health



Upper Valley Medical Center is a full-service hospital located along the Interstate 75 corridor at exit 78, between Troy and Piqua. The 193-bed hospital is Miami County's largest employer and is operated by the Dayton-based nonprofit Premier Health system.

Mission

We will improve the health of the communities we serve with others who share our commitment to provide high quality, cost-competitive health care services.

Commitment to Improving Community Health

Premier Health hospitals are dedicated to building stronger and healthier communities. This dedication is demonstrated by:

- Community Service Programs: A healthy community is made up of healthy individuals flourishing in a safe environment. Premier Health supports programs aimed at improving community health in a variety of ways, including education and community safety. The system is committed to improving the health of the communities it serves through a variety of programs focused on investment in the community, prevention and wellness, commitment to the under-served, health improvement, and community engagement.
- Commitment to Diversity: Diversity brings fresh perspectives and new ideas to our work. Diversity is an essential asset to the organization. Premier Health embraces the unique skills and perspectives that come from individuals of all backgrounds and beliefs.
- Commitment to the Under-Served: The ability to pay shouldn't determine the quality of care received. Premier Health is committed to providing excellent health care to those in need.

Communities Served

The primary service areas identified for Upper Valley Medical Center are Darke, Miami, and Shelby counties in Ohio.

Prioritized List of CHNA Community Health Needs

Criteria for Prioritizing

The Community Benefits subcommittee of Premier Health designed and executed a prioritization process that included a review of internal and external data and reports. The sources included the collaborative CHNA, county health departments, and Ohio Health Department priorities.

The primary criteria for inclusion were the:

- level of agreement among public health departments and the CHNA, and the
- presence of community-based coalitions designed to address these issues.

Collaboration around shared priorities is very important, because no one entity can singlehandedly effect dramatic change in these serious areas within the three-year timeframe of the CHNA process.

Prioritization Process

The Community Benefits subcommittee of Premier Health designed and executed the prioritization process that included a review and comparison of the following:

- 2016 Collaborative CHNA for Greater Dayton
- Local county health departments' most recent Community Health Assessments (including Darke, Miami, and Shelby counties)
- Health Policy Institute of Ohio's Health Value Dashboard (state health comparison)

The community health implementation strategies address the collaborative Community Health Needs Assessment (CHNA) conducted in 2016 on behalf of all the hospitals in the region by the Greater Dayton Area Hospital Association.

Priorities

Among the health and non-health needs identified in the CHNA, Premier Health's top three priorities will be:

- Birth outcomes
- Behavioral health/substance abuse
- Chronic diseases

The following sub-categories comprised each priority's scope:

- Birth outcomes
 - Infant mortality
 - Low birthweight
 - Preterm births
- Behavioral health/substance abuse
 - Depression
 - Drug dependence/abuse
 - Drug overdose
 - o Suicide
- Chronic diseases
 - o Breast cancer
 - Diabetes
 - Food insecurity/food deserts
 - Heart disease
 - HIV/ AIDS
 - o Lung cancer
 - o Obesity

Process for Strategy Development

Premier Health's System Director for Community Benefits, Shaun Hamilton, formed an implementation strategies team to prepare for, and serve as resources for, hospital-level conversations. In addition to Shaun Hamilton as chair, the team included:

- Yonathan Kebede, vice president of operations at Fidelity Health Care, the provider of community/home-based services;
- Roopsi Narayan, program manager for Premier Community Health;
- Public health expert, Dr. Marietta Orlowski, who is an Associate Professor at Wright State University and serves on the board's Community Benefits subcommittee;
- Patrick Ray, Premier Health's director, capital reporting & tax compliance; and
- Consultant, Gwen Finegan, who also conducted the CHNA and assisted Premier Health in the development of implementation strategies for each hospital.

The Vice President & System Chief Nursing Officer for Premier Health, Sylvain Trepanier, convened the meeting for senior hospital leaders and subject-matter experts to examine best practices and existing strategies to recommend the 2017-2019 Implementation Strategies. In addition to addressing the prioritized needs, the meeting participants considered the following parameters for successful strategies:

- Strategies designed to improve the health of individuals and, ultimately, the community
- Access by members of the community, especially vulnerable populations, who will participate in, or benefit from, strategies
- Feasible scope that can result in measurable impact
- Sufficient resources, including community partnerships, to ensure that activities and/or services will achieve their goals

Participants at the February 27, 2017 meeting included:

- Terry Fry, chief nursing officer
- Shaun Hamilton, system director for community benefits
- Jennifer Hauler, chief medical officer
- Sarah Jones, manager, APN/Infusion Services
- Yonathan Kebede, vice president of operations, Fidelity Health Care
- Sue McGatha, president & CEO, Samaritan Behavioral Health, Inc., and system vice president of behavioral health services
- Louanne O'Neal, nurse manager, behavioral health
- Jane Pierce, clinical nurse specialist, women's services
- Diane Pleiman, chief operating officer
- Rebecca Rice, president & CEO
- Lisa Weaver, director of nursing, emergency department & behavioral health

After the meeting, the implementation strategies team followed up with hospital staff and subject-matter experts to obtain metrics and other information contained in this report. A narrative summary and a table with additional information follow.

Description of Strategies

Support for One Wellness Place

Health issue: Behavioral health

<u>Intervention's goal</u>: To improve access to, and integration of, primary care and behavioral health in the tri-county area. One Wellness Place is a planned new facility on County Road 25-A between Troy and Piqua. Developed by the ADAMHS Tri-County Board of Recovery and Mental Health Services, it will house mental health and addiction treatment providers, public health, and an array of wraparound support services in an integrated, easy-to-navigate facility. There may be an opportunity to house UVMC's proposed FQHC in this facility to support both physical and behavioral health issues. UVMC shares many of these clients with the agencies contractually supported by the ADAMHS board.

<u>Background</u>: Upper Valley Medical Center supports the creation of One Wellness Place, a public-private partnership to develop a 'one-stop shop' center for health and human services. The \$6 million proposed project would bring together multiple service providers under one roof. Simultaneously, Upper Valley Medical Center is working to secure an FQHC and has had preliminary discussions with the Tri-County executive director about the possibility of housing the FQHC in the new facility. If in the future the federal government opens their pilot project for behavioral health FQHCs to Ohio, the Tri-County board could seek that designation, and it would also be located in this facility and sponsored by the ADAMHS board. \$2.77 million has already been pledged to the project, which includes construction of a 35,000-40,000 square foot building on 7.7 acres on North County Road 25-A. The UVMC board will be asked to consider a financial contribution.

<u>Partners</u>: Tri-County Board of Recovery and Mental Health Services, Community Housing Inc., NAMI of Darke Miami and Shelby counties, Recovery & Wellness Center of Midwest Ohio, Miami County Recovery Council, Miami County Dental Clinic, Miami County Public Health, and Safehaven Inc. all have signed Memoranda of Understanding to locate services there.

School-based Health

Health issue: Behavioral health

<u>Intervention's goals</u>: Named after the first child killed in the Columbine shooting, the Rachel's Challenge program is designed to make schools safer, more connected places where bullying and violence are replaced with kindness and respect. Upper Valley Medical Center supports delivery of this K-12 program in eight school districts, plus two faith-based schools, for a total of 29-36 school buildings participating, depending upon the year.

<u>Background</u>: Rachel's Challenge nationally receives about 150 letters annually where children report that they would have committed suicide if not for this program. The program content and format varies by year and grade level, with one assembly program for grade school and two different assembly programs for middle and high school – Rachel's Challenge and Rachel's Legacy. High schools also are offered Chain Reaction Days in their second and third years of participation – all-day training for 100 students and 20 adults with two trainers from Rachel's

Challenge. For the 2017-2018 school year, the hospital is planning for Chain Reaction Days at middle and high schools in the eight public school districts. Upper Valley Medical Center has pledged to continue funding this program in area schools through the 2018-2019 academic year.

Premier Health's Samaritan Behavioral Health, Inc., also provides three full-time mental health therapists who work in Piqua and Milton Union schools to provide behavioral health services for students covered by Medicaid.

<u>Partners</u>: Eight local public school districts, two faith-based schools, Samaritan Behavioral Health, Inc.

School-based Health

Health issue: Chronic diseases - obesity

<u>Interventions' goals</u>: There are two programs; schools can choose to participate in one or both. The Drinking Water Challenge (also known as "Cavity-Free Kids") is a public oral health educational campaign focused on drinking water instead of sugar-sweetened beverages (soft drinks, sports drinks, and fruit juices). CATCH (Coordinated Approach To Child Health) is an evidence-based, coordinated school health program designed to promote physical activity and healthy food choices and to prevent tobacco use in children from preschool through grade eight.

<u>Background</u>: The Drinking Water Challenge leverages the hospital's relationship with the Miami County Dental Clinic and their Traveling Smiles Program to introduce the "Cavity-Free Kids" initiative. The Public Education Campaign includes billboards, news articles, local radio stations, PSAs, and flyers. The initiative will engage schools, local dentists, dental clinics, pediatricians and family practice physicians, local communities, etc.

The CATCH program is currently being implemented in more than 7,500 schools and afterschool programs across the USA and Canada. By teaching children that eating healthy and being physically active every day can be fun, the CATCH program has proven that establishing healthy habits in childhood can promote behavior changes that can last a lifetime. For more than 25 years, the CATCH platform has been proven to launch kids and communities toward healthier lifestyles. Originators of the "Go, Slow and Whoa" food categories, CATCH is the most costeffective means of preventing childhood obesity, in an environment that is fun and easy to sustain. CATCH is supported by more than 120 academic papers, indicating as much as an 11 percent decrease in overweight and obese individuals in the environments in which it has been implemented.

<u>Partners</u>: Eight local public school districts, two faith-based schools, and the Miami County Dental Clinic

Opioid Disease Education

Health issue: Behavioral health/substance abuse

<u>Intervention's goal</u>: To provide education that addiction is a disease and to change perceptions, first of hospital personnel and medical professionals, and then of the community. The objectives are 1) to provide CEUs for education on this topic, with curriculum delivered by ADAMHS; and 2) to offer education in the community.

<u>Background</u>: In 2015, the *Washington Post* called Dayton the epicenter of the heroin problem. From 2011 to 2015, heroin-related deaths increased by 225 percent, one of the highest rates in the nation, according to statistics from the U.S. Centers for Disease Control and Prevention. The rate of unintentional prescription drug overdose deaths also has risen. Front-line health workers are overwhelmed by the number of overdoses, and they can become judgmental when they do not understand the nature of opioid addiction. Such attitudes can impair successful referral to treatment.

<u>Partners</u>: ADAMHS board, Samaritan Behavioral Health, physician practices, and the Heroin Coalitions of Darke, Miami, and Shelby counties

Food for Health

Health issue: Chronic diseases - food insecurity/food deserts

<u>Interventions' goals</u>: To increase the amount of healthy food available for people with healthrelated nutritional needs. The short-term objectives are 1) to ensure that all eligible patients are signed up for SNAP and/or WIC benefits; and 2) to increase the availability of fresh produce in partnership with local food pantries, area farmers, and/or community gardens. The hospital may begin screening for hunger to ascertain the scope of the problem. If determined feasible, Premier Health would like to create a food pharmacy, or similar prescription for food program by 2019.

<u>Background</u>: According to the Food Research & Action Center, Dayton ranked 11th out of 109 metropolitan areas for households experiencing food hardship. If determined feasible, Premier Health would like to move toward the best practice model of a food pharmacy, pioneered by Boston Medical Center more than ten years ago with its preventive food pantry and replicated in Toledo, Ohio in 2015 on the campus of ProMedica Toledo Hospital. A food pharmacy accepts people with a physician referral and offers two to three days' worth of food per visit. Patients can return to the food pharmacy once per month for up to six months, at which time they can return to their physician for another referral if they are still in need. Other services may include nutrition counseling, cooking classes, and connection to community resources.

<u>Partners</u>: The largest food pantries in Miami County are: New Path associated with Ginghamsburg United Methodist Church in Tipp City; First Place associated with First United Methodist Church in Troy; St. Patrick's Food Pantry associated with St. Patrick's Catholic Church in Troy; Green Street Food Pantry associated with the Green Street Methodist Church in location; and the Salvation Army Food Pantry in Piqua. After initially focusing on Miami County, Shelby and Darke counties could possibly be added in future years.

Implementation Strategies

			Resources			
Health Issue	Strategy	Evaluation of Impact (Measures)	Financial Value	Staffing	Timing	Partners
Behavioral health and chronic diseases	One Wellness Place	There are three possible outcomes. At a minimum, the one-stop shop will be constructed. The next level of success would be having an FQHC on site. The optimal scenario is to also have a behavioral health FQHC. Any of these outcomes would be great for the community.	UVMC's board is considering its financial contribution to the project, amount TBD.	0.075 FTE of UVMC's President & CEO	Groundbreaking occurred January 26, 2017. Funds from the Dayton Development Coalition's Priority Development and Advocacy Committee would be available through FY 2017-18's state capital budget bill.	Tri-County Board of Recovery and Mental Health Services, Community Housing, NAMI, Recovery & Wellness Center of Midwest Ohio, Miami County Recovery Council, Miami County Dental Clinic, Miami County Public Health, and Safehaven Inc.
Behavioral health and chronic diseases- obesity	School-based health	Continue Rachel's Challenge in all Miami County schools. Build on relationships with those schools and SBH relationships to develop a wellness challenge, such as CATCH and/or the Drinking Water Challenge.	Annual support of Rachel's Challenge = \$95,000 in year 1; \$80,000 in year 2; & \$90,000 in year 3. Annualized value of school-based counseling services = \$175,000	0.013 FTE 2.7 FTE mental health therapists from SBH	UVMC pledges support for Rachel's Challenge through 2018-19 school year. Wellness initiative will be planned in 2018 and implemented by 2019.	Eight public school districts, two faith-based schools, Samaritan Behavioral Health, Inc., and Miami County Dental Clinic

Health Issue	Strategy	Evaluation of Impact (Measures)	Resources			
			Financial Value	Staffing	Timing	Partners
Chronic diseases – food insecurity/ food deserts	Food for Health	<pre># people enrolled in SNAP +/or WIC # complete hunger screenings Creation of new program for hospital to help provide food</pre>	\$5,000 for program development \$6,250 value of staff time	0.05 FTE director, community benefits	Year 1: Design program model for Miami County and implement benefit enrollment & hunger screening. Year 2: Increase access to fresh produce Year 3: Create Rx for food or food pharmacy. Expand to other counties as feasible.	Major food pantries in Miami County: First Place, New Path, Bethany Center, St Pat's
Behavioral health/ substance abuse	Opioid disease education	 #/% front-line staff trained # /% trained in nursing division #/ % MDs trained # people receiving training in community 	\$5,000 for program development \$6,250 value of staff time	0.05 FTE director, community benefits	Year 1: Train ED and critical care personnel. Year 2 +/or 3: Train additional hospital staff and/or community members.	ADAMHS Board, Samaritan Behavioral Health, Inc.

Accountability

The chief operating officer is responsible for ensuring that strategies occur which meet the community's needs, as outlined in this document. The system director for community benefits will assist as a community liaison in collaborative efforts and will help coordinate system-wide initiatives.

Significant Health Needs Addressed

Implementation strategies, listed on the preceding pages, address these prioritized health needs:

- Behavioral health/substance abuse
- Chronic diseases food insecurity/food deserts

Significant Health Needs Not Addressed

Birth outcomes were not addressed, because although infant mortality rates are high in the Greater Dayton area, Upper Valley Medical Center has not experienced this issue as acutely among its patient population in Miami County. The low birth weight rate is 5.8 percent, compared to Ohio's rate of 8.5 percent. The percentage of mothers who smoked during pregnancy has decreased from 22.5 percent to 18.2 percent. The hospital continues to monitor health outcomes related to birth and pregnancy, and it remains a member of the Ohio Perinatal Quality Collaborative and shares its goals and objectives, as well as those of the Ohio Hospital Association's plan to reduce infant mortality.

Board Approval

Premier Health's board of directors approved the implementation strategies in March 2017.