

# Community Health Needs Assessment

## Action Plans for 2013-2015

### Implementation Strategies

Approved by the HCHC Board of Trustees  
on 6/27/2013

The final step in the Community Health Needs Assessment is the establishment of action plans for the items identified in the plan that the hospital chooses to address. All items identified in the plan have been approved for action by the HCHC Board of Trustees.

#### # 1. Established Community Priority : More Free/Reduced Health Screenings

**Background:** Only slightly more than 1 in 2 (57%) women in Hillsdale over the age of 40 have had clinical breast exam in the last year and less than 1 in 2 (45% ) of men have had a PSA to screen for prostate cancer. Both of these cancers are shown to have high survival rates if detected early. With 1 in 6 Hillsdale residents living at or below the federal poverty level, access to reduced or no cost health screenings can be vital to the very survival of many of our residents. The 2013 Hillsdale County Community Health Needs Assessment identified access to health screenings as a high priority in improving the health of Hillsdale County.

**Recommendation:** HCHC can expand several service areas to provide more reduced/no cost health screenings to the service area of the hospital. HCHC will offer the following services under this plan:

- Monthly Free Walk-in BP's screens at HCHC 168 S. Howell Campus and 3 Meadows Facility
- Bi-annual Cholesterol Screens at HCHC 168 S. Howell Campus and 3 Meadows Facility
- Prostate Screens – Bi-annual screens at HCHC 168 S. Howell Campus and 3 Meadows Facility
- Expand free Mammograms to bi-annual; South Howell St. main campus

**Education** - (materials- pamphlets, brochures, printed materials) will be provided to patients with elevated cholesterol levels identified during testing as well as providing patient with HCHC list of "accepting new patients" providers.

**Cost:** Estimated cost – \$5,000 (staffing, supplies). Radiology professional interpretation costs to be donated

**Evaluation:** HCHC will track results of screenings over time to assess ‘value’ of services provided and the impact on morbidity and mortality rates over time.

**Board Response: Approved**

## **#2. Established Community Priority: Educate on Free/Reduced healthcare options**

Background: With Hillsdale County unemployment ranging between 9 and 10 percent (compared to the national rate of just over 7%, as well as uninsured estimates ranging from 11% to 15% of the Hillsdale County population, identifying eligibility for Medicaid and other assistance programs is critical for not only access to care, but for payment of services. Hillsdale Community Health Center currently contracts with the Department of Human Services for the services of a Financial Counselor to assist uninsured and self pay patients in accessing existing financial assistance they may otherwise not obtain. This program can be expanded as it does not currently meet all the needs of our patient base.

**Recommendation:** Expand Financial Counselor hours to evenings and weekends with cooperative arrangements thru local Department of Human Services(DHS). HCHC currently contracts with the Michigan Department of Social Services to provide a financial counselor for hospitalized who have no insurance or who will be self-pay patients who cannot afford services. The existing counselor assists patients and families to assure access to all existing State resources available. In addition the existing counselor administers the HCHC Charity Care Program. The current Counselor is at capacity and HCHC still experiences unmet needs in this area.

**Partnership:** HCHC will investigate with DHS to expand this program to provide staffing in the evening and on weekends, as there is currently no coverage or assistance during these times.

**Cost:** Staffing for the expansion of this program could actually be provided in 2 part time positions that cover these expanded times. HCHC could add these 2 positions at an estimated cost of \$40,000.

**Evaluation:** HCHC will evaluate the ratio of bad debt vs. charity care and the overall increase in Medicaid percent paid to determine if this program is effective.

**Board Response: Approved**

### **#3. Established Community Priority: Partnering with other community service providers to reduce unnecessary hospital readmissions.**

**Background:** In 2012/13, CMS began making adjustments to payments to hospitals based on expected versus actual rates of admission for selected diagnoses. While HCHC's rate of readmission currently is below Michigan rates (7.8% vs. 10.5%), we lag behind our competitors of equal size (small rural). The rate of readmission for small rural hospitals in Michigan is 5.4%. Looking forward, we realize that in the 'not too distant future' we will probably begin to be compared to hospitals of like size and volume and not just the State rate. As such, HCHC is beginning to look at best practice strategies to reduce our rates of readmission. This issue was also identified as a community priority by the 2013 Hillsdale County Community Needs Assessment. This is now an identified priority of both CMS and our local community. Unnecessary readmissions are bad for hospitals as well as patients, involving excess costs and unnecessary strain on the local healthcare system and on patients and their families.

**Recommendation:** Seek partnership with other community service providers to reduce hospital readmissions. Potential partners include the Hillsdale County Sr. Center (Perennial Park) and the Regional Area Agency on Aging, both of whom have an active relationship with many of our seniors. These organizations can help to facilitate dissemination of information as well as communication with this key population.

**Cost:** Cost for partnership with these organizations is unknown and most certainly tied directly to the level of involvement sought and ability to provide a tangible service by the organization. Estimates for year one would be minimal – \$5,000 – \$10,000

**Evaluation:** Any contracted service thru either Perennial Park or the Area Agency on Aging would be subject to a performance improvement contract relationship with established benchmarks and metrics that would be expected to be met. Evaluation will be annual and on-going.

**Board Response: Approved**

### **# 4. Established Community Priority: Establishment of an Urgent Care Clinic**

**Background / Recommendation:** With the establishment of a Hospitalist model of care, with designated physicians now working exclusively in the hospital setting, Hillsdale County should/is seeing an influx of available physician time within the communities of the county. While much of Hillsdale County is designated as a Health Professional Shortage Area by the Federal

Government, much of the capacity of local physicians has been occupied by providing both care to their patients in their practices, but also providing hospital care and call coverage for HCHC. Until the spring of 2013 when HCHC adopted a Hospitalist model of patient care, physician time was at a premium. Since this time, several key practices within the county have already begun to increase existing office hours and/or establish new clinics to see more patients in the outpatient setting. This should provide welcome relief for the HCHC Emergency Department volume as well as a welcome relief for patients who often have long wait times to obtain an appointment with a local provider. This was identified as an issue thru the Community Health Needs Assessment; however this occurred prior to HCHC adopting a Hospitalist model of care. HCHC will not address this issue of an Urgent Care clinic as the expansion of the private market may very well address this perceived problem without hospital involvement.

**Board Response: Approved**

**# 5. Established Community Priority: Establish Women's Healthcare clinic:**

**Background:** In 2009, the local Public Health Agency ceased to provide title 10 Family Planning Services to Hillsdale County. Along with this program, other much needed women's health services were greatly reduced within the County. The void of this service elimination has not been filled since 2009. The need for women's health services remains high within the county. The 2013 Hillsdale County Community Needs Assessment identified this as a high priority.

**Activity.** Hiring New Family Practice physician who will be focusing on women's health issues; to be located at 3 Meadows. This physician will provide family practice services as well as address issues specific to women's health. The new provider is already scheduled to be in Place and will begin seeing patients in September of 2013 and no action by the Board of Trustees is necessary for implementation of this service.

**Evaluation:** As an employed physician of the Hillsdale Community Health Center, HCHC will monitor service level and continue to monitor need within the community to assess if service levels are meeting demand.

**Board Response:**

**# 6. Established Community Priority: Create Mental Health Awareness Education Program – Funding /capacity not available at this time.**

**Board Response: Concurrence**

**# 7. Established Community Priority: Address Substance Abuse issues with adults and minors  
– funding / capacity not available at this time.**

**Board Response: Concurrence**

This issue will be forwarded to the local Substance Abuse Prevention Coalition for potential action.