

# ADDENDUM:

## 2016 GREATER DAYTON CHNA

### Greene Memorial Hospital

#### PRIORITIZATION OF COMMUNITY HEALTH NEEDS

##### Introduction

In 2015 Greene Memorial Hospital participated, as part of the Kettering Health Network, in the collaborative development of a Community Health Needs Assessment (CHNA) for Greater Dayton, which incorporated considerable community input. This addendum describes the prioritization process and its results to identify significant health needs, and the addendum also updates the status of the prior Implementation Plan. The addendum will be published with the CHNA Report in 2016.

##### Criteria

A hospital committee scored the community health needs identified in the CHNA by considering the following criteria:

- Cause of hospitalization/ED visits (based on hospital utilization data from the Ohio Hospital Association)
- Feasibility and effectiveness of interventions (per The Community Guide; CDC recommendations; and/or recommendations from hospital physicians and/or leaders)
- Hospital's ability to impact effectively (already positioned to make a difference; and/or addressing issue in strategic or community plan)
- Impact on other health outcomes (based on risk factors associated with issue)
- Importance placed by community (based on community priorities in CHNA report)
- Measurable outcome exists (based on CHNA's data sources)
- Opportunities for meaningful collaboration (with current or potential community partners)
- Severity and proportion of population impacted (per incidence rate of new cases; prevalence rate; mortality rate; and/or top cause of death)
- Significant health disparities (by geographic areas of disparity measured by Community Need Index score and/or health issues identified in 2011 and 2013 CDC reports)
- Societal burden (based on education, observation, and/or experience of person scoring)
- Trend: Issue worse over time (based on up to 5 years' trend data collected for CHNA)

## Process

There were three meetings held with professional facilitation by a consultant, Gwen Finegan. Kettering Health Network offered two meeting options, on April 18 and April 27, for hospital leaders to convene, discuss, and determine the prioritization process. At a meeting on June 13, 2016, Greene Memorial Hospital leaders scored the health issues according to criteria determined by consensus at the April meetings.

In order to determine the most significant priorities among all the CHNA issues, Greene Memorial Hospital used a grid with a scoring scale of 1 to 5. For the CHNA prioritization process, a low numerical score denoted that the criteria did not provide enough reasons to elevate an issue as a significant priority, while a high numerical score meant that the criteria gave evidence of an issue meriting 'high priority.' A blank scoring sheet is provided as an example.

Kettering Health Network's experience with both mental health and substance abuse also led their combination into one category, since mental health issues are a root cause for most substance abuse disorders. In the CHNA cancer, diabetes, heart disease, and obesity were mentioned individually as well as mentioned within the broader category of chronic disease. During the prioritization process, these were considered both together and separately.

## Participants

The people who scored the community health needs for Greene Memorial Hospital were:

- Jeff Brock, President, Foundation, Greene Memorial Hospital
- Tonya Chambers, Community Outreach Coordinator, Greene Memorial Hospital
- Ron Connovich, Vice President, Greene Memorial Hospital
- Rick Dodds, President, Greene Memorial Hospital
- David Small, MD, Chief Medical Officer, Greene Memorial Hospital

## Consideration of community input

The Greene Memorial Hospital committee received detailed information about the health issues identified in Greene County by the Health Department, individual consumers, nonprofit agencies serving vulnerable populations, and focus group participants. The issues mentioned most often during the CHNA process were:

- Access to care/services
- Cancer
- Chronic disease
- Diabetes
- Heart disease
- Infant mortality
- Mental health
- Obesity
- Substance abuse

### Top four priorities

The top priorities for Greene Memorial Hospital were:

- Obesity (score = 218)
- Diabetes (score = 216)
- Heart disease (score = 209)
- Mental health/Substance abuse (score = 207)

Chronic disease was considered with the prioritization of Diabetes, Heart disease, and Obesity.

The list of prioritized health issues, and their scores, is provided below.

<b>SIGNIFICANT ISSUE</b>	<b>Score by Issue</b>	<b>Average Score</b>
Access to care/services	194	38.8
Cancer	188	37.6
Chronic disease	209	41.8
Diabetes	216	43.2
Heart disease	209	41.8
Infant mortality	170	34.0
Mental health/Substance abuse	207	41.4
Obesity	218	43.6

# Sample Scoring Sheet

## Priorities

Criteria	Access to care/services	Cancer	Chronic disease	Diabetes	Heart disease	Infant mortality	Mental health/ Substance abuse	Obesity
Feasibility and Effectiveness of Interventions								
Cause of Hospitalization/ED Visits								
Impact on Other Health Outcomes								
Importance Placed by Community								
Hospital's Ability to Impact Effectively								
Measurable Outcomes								
Opportunities for Meaningful Collaboration								
Severity & Proportion of Population Affected								
Significant Disparities								
Societal Burden								
Trends: Issue Getting Worse over Time								
TOTAL								

Low				High
1	2	3	4	5
Not a Priority	Low Priority	Mild Priority	Moderate Priority	High Priority

## EVALUATION OF IMPACT OF 2014-2016 IMPLEMENTATION STRATEGIES

Priority Issue	Objective	Strategies	Status
Breast Cancer	From 2014-2016, increase by 2% annually the number of women ages 40-69 years obtaining a screening mammogram, as a result of education and outreach to the community.	1) Educate women at a younger age about the importance of breast health and increase mammography screenings for women who meet the age guidelines; and 2) Increase mammography screenings among the at-risk population.	There were 3,182 screenings in 2014, and 3,398 screenings in 2015 (6.8% increase from 2014 to 2015). The number of screenings for 2016, as of June 30, was 2,706.  In 2014, there were 12 breast cancer education events with 1,335 attendees. In 2015 there were 12 education events with 1,460 attendees; and in the first half of 2016, there were 5 events with 535 attendees. These events were held in collaboration with Soin Medical Center. In addition, five nationally certified oncology RNs developed a presentation on "Myths & Misconceptions about Breast Cancer," and it was delivered on 8/26/15 at Greene and on 9/17 at Soin Medical Center for 28 people.
Heart Disease	From 2014-2016, successfully screen blood pressure for 70% of adults attending community outreach "heart health" events in Greene County. Refer to follow-up care 100% of people determined to be hypertensive.	1) Increase health education and promote preventive screenings to improve heart health; and 2) As medically appropriate, conduct health screenings such as cholesterol and blood glucose tests while patients are in the hospital for other health services.	Preventive clinical services were provided via risk reduction education, in both outpatient and community settings. From 1/1/14 through 6/30/16, 27 people attended a presentation at the Little Art Theatre or at the hospital.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

*Date adopted by Board of Directors of Kettering Health Network*