

ADDENDUM:

2016 GREATER DAYTON CHNA

Soin Medical Center

PRIORITIZATION OF COMMUNITY HEALTH NEEDS

Introduction

In 2015 Soin Medical Center 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, Soin Medical Center 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, Soin Medical Center 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 Soin Medical Center were:

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

Consideration of community input

The Soin Medical Center committee received detailed information about the health issues identified in Clark, Greene, and Montgomery Counties by Health Commissioners, 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 Soin Medical Center were:

- Obesity (score = 210)
- Diabetes (score = 209)
- Heart disease (score = 207)
- Mental health/Substance abuse (score = 202)

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.

SIGNIFICANT ISSUE	Score by Issue	Average Score
Access to care/services	190	38.0
Cancer	188	37.6
Chronic disease	206	41.2
Diabetes	209	41.8
Heart disease	207	41.4
Infant mortality	172	34.4
Mental health/Substance abuse	202	40.4
Obesity	210	42.0

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
Diabetes	From 2014-2016, increase by 2% annually the number of diabetes screenings provided to adults ages 18+ who attend education and outreach initiatives implemented by a partnership between the Joslin Diabetes Center and Community Outreach by Soin Medical Center.	Promote healthy lifestyles and increase diabetes education to improve overall health and mitigate the effects of diabetes.	<p>Screenings increased by 34% from 2013 to 2014. There were 506 screenings performed between 1/1/2014 and 7/31/2016. In the first half of 2016, 16 of 56 screenings revealed high risk results (28%), and there were two high urgent results (3.5%).</p> <p>There were 36 screening/education events in 2015, attracting 624 participants. In the first half of 2016 there were 4 screening/education events, which attracted 84 people.</p> <p>In 2015 there were 50 occasions when an educational display or booth was visited, for a total of 2,778 contacts. In the first half of 2016, there were 17 occasions with an educational display or booth resulting in 1,777 contacts. Community outreach included Greene Memorial Hospital.</p>

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Priority Issue	Objective	Strategies	Status
Heart Disease	From 2014-2016, successfully screen blood pressure for 70% of adults attending community outreach "heart health" events. Refer to follow-up care 100% of people determined to be hypertensive.	Increase health education and promote preventive screenings to improve heart health.	<p>Preventive clinical services, including cardiovascular disease detection and risk reduction education, were provided in outpatient and community settings. From 2014 through the first half of 2016, there were performed: 127 Lipid Screens; 383 Coronary Artery Calcium Scoring CTs; 155 Vascular Ultrasounds; and 9 Heart Print EKGs, for a total of 674 screenings. 228, or 34%, of screenings revealed a high risk.</p> <p>From 1/1/14 through 6/30/16, 181 received counseling about Cardiovascular Disease at Soin Medical Center or Beavercreek Seventh Day Adventist Church; 50 attended a heart health display at the Wingate Inn-Fairborn or the Soin Medical Center; 28 attended a presentation at the Soin Medical Center.</p>

11 / 3 / 2016

Date adopted by Board of Directors of Kettering Health Network