




Community Health Needs Assessment

Implementation Strategy Executive Summary

Indiana Regional Medical Center 2018-2020

Improving the health and well-being of our community through the coordinated delivery of high-quality, cost-effective and compassionate care.





METHODOLOGY

Indiana Regional Medical Center offers its Community Health Needs Assessment (CHNA) Implementation Strategy for 2017-2019. The implementation strategy is the result of the hospital's CHNA adopted by Indiana Regional Medical Center's Board of Directors on June 14, 2018. Indiana Regional Medical Center's CHNA identified thirty-four (34) Areas of Opportunity. These areas were determined after consideration of various criteria, including: standing in comparison with benchmark data (particularly national data); the preponderance of significant findings within topic areas; the magnitude of the issue in terms of the number of persons affected; and the potential health impact of a given issue. Complete details are available within Indiana Regional Medical Center's 2018 CHNA, which may be viewed at <https://www.indianarmc.org/about-us/community-health-needs-assessment/>. This implementation strategy plan was approved by the hospital's Board of Directors on October 11, 2018.

PRIORITIZATION CRITERIA

The Steering Committee ranked the identified needs based on four criteria:

1. Accountable Organization – the extent to which the issue is an important priority to address in this action planning effort either for the hospital or the community.
2. Magnitude of the Problem – the degree to which the problem leads to death, disability, or impaired quality of life and/or could be an epidemic, based on the rate or % of population that is impacted by the issue.
3. Impact on Other Health Outcomes – the extent to which the issue impacts health outcomes and/or is a driver of other conditions.
4. Capacity (Systems and Resources to Implement Evidenced-Based Solutions) – this would include the capacity to

OUTCOMES AND IMPACT WILL BE MEASURED BY:

- Increased ease of access to care
- Events and educational outreach programs and services provided
- Participation in screening events
- Referrals for services, interventions, or higher levels of care based on screening outcomes
- Increase in community's knowledge base and intent to change behavior
- Creation of protocols for certain programs
- Collaborations

PRIORITIZATION OF RESULTS

- Cardiovascular Disease/Stroke
- Diabetes
- Overweight/Obesity
- Breast Cancer
- Lung Cancer
- Substance Use Disorder
- Prenatal Care
- Screenings
- Colorectal Cancer
- Women's Health

While the hospital will likely not implement strategies for all of the prioritized health issues, the results of this prioritization exercise will be used to inform the development of Indiana Regional Medical Center's Implementation Strategy to address the top health needs of the community in the coming years.

KEY FINDINGS

Data Sources: PA Department of Health, County Health Rankings	Service Area	vs. PA	vs. US	vs. HP 2020
CHRONIC DISEASE				
Overweight (BMI 25+)	69.0%	65.0%	65.4%	
Obese (BMI 30+)	35.0%	30.0%	30.1%	30.5%
Late Stage Breast Cancer Rate per 100,000	53.8	44.5		42.2
Bronchus and Lung Cancer Mortality Rate per 100,000	39.2	40.9	34.7	45.5
Colorectal Cancer Rate per 100,000	43.8	41.9	33.7	39.9
Prostate Cancer Mortality Rate per 100,000	27.1	19.2	19.1	21.8
Heart Disease Mortality Rate per 100,000	181.7	175.8	218.0	
Coronary Heart Disease Mortality Rate per 100,000	117.7	107.6	126.2	103.4
Cardiovascular Mortality Rate per 100,000	228.3	225.8	285.6	
Cerebrovascular Mortality Rate per 100,000	33.9	36.8	47.8	34.8
Diabetes Mortality Rate per 100,000	36.3	20.2	21.0	
Lyme Disease Rate per 100,000	262.8	89.5		
INFECTIOUS DISEASE				
Ever Tested for HIV, Ages 18-64	27.0%	39.0%		
MENTAL HEALTH AND SUBSTANCE USE DISORDER				
Mental & Behavioral Disorders Mortality Rate per 100,000	78.4	42.7	48.0	
Drug-Induced Mortality Rate per 100,000	60.1	38.5		11.3
Alcohol Impaired Driving Deaths	40.0%	30.1%	28.0%	
Adults Who Reported Binge Drinking (5 drinks men/4 for women)	18.0%	16.9%	24.2%	
PHYSICAL ACTIVITY AND NUTRITION				
No Leisure Time/Physical Activity in the Past Month	28.0%	24.0%		32.6%
Food Insecurity	13.9%	13.1%	12.5%	6.0%
Limited Access to Healthy Foods	9.1%	4.6%		

The below table illustrates the areas of high need identified by the Indiana University of Pennsylvania's 2018 Community Survey that are not currently being managed in the community, which include: illegal drugs, prescription drugs, obesity, and childhood obesity.

		MANAGED	
		HIGH	LOW
P R O B L E M	H I G H		<ul style="list-style-type: none"> Illegal Drugs Prescription Drug Obesity Childhood Obesity
	L O W	<ul style="list-style-type: none"> Childhood immunizations Adult Immunizations Prenatal Care Access to Health Screenings Women's Health Care 	

IMPLEMENTATION STRATEGY ACTION PLAN

Indiana Regional Medical Center (IRMC) is committed to achieving the “triple aim:” improved health through better quality of care at lower costs. To that end, to address the needs of the community, IRMC is committed to the following strategies. Per IRS requirements that the implementation strategy needs to have a financial budget included, the proposed implementation strategy budget for IRMC over the next three years is \$953,472

Goal 1: Improve Health Status through Chronic Disease and Care Management Across the Continuum by Increasing Participation in Education and Wellness, Focusing on Overweight/Obesity, Diabetes, Breast and Lung Cancer, Cardiovascular Disease and Stroke

1. Continue to offer the Wellness Program to IRMC employees
2. Promote Corporate Wellness Program to local businesses and industries
3. Promote health and wellness to the community at-large
4. Increase education, awareness and improve knowledge and health status of persons with diabetes
5. Improve outreach and care management to persons with breast cancer
6. Improve outreach and care management to persons with lung cancer
7. Improve outreach, screening and care management to patients with cardiovascular disease; stroke prevention

Goal 2: Increase Awareness and Outreach for Preventable Care and Access to Health, including Community Health Screenings

1. Improve outreach, education and mammogram screenings for breast cancer
2. Improve outreach, education and low-dose CT scans for lung cancer
3. Improve outreach, education and PSA screenings for prostate cancer
4. Improve outreach, education and PAP screenings for cervical cancer
5. Improve outreach, education, and colonoscopies/FIT testing for colon cancer
6. Continue collaboration with the Open Door for screenings

Goal 3: Decrease Drug and Alcohol Use in Indiana County by Continuing to Collaborate with the Armstrong-Indiana-Clarion Drug & Alcohol Commission and ARMOT on Prevention, Education and Intervention Strategies

1. Continue to partner with the Armstrong-Indiana-Clarion Drug and Alcohol Commission and ARMOT (Addiction Recovery Mobile Outreach Team) and Overdose Task Force
2. Decrease substance abuse related visits to the Emergency Department and inpatient departments through the Warm Hand-Off Program

