



**OWENSBORO HEALTH COMMUNITY HEALTH NEEDS ASSESSMENT
IMPLEMENTATION PLAN
Tax Year 2012**

INTRODUCTION:

The Owensboro Health Community Health Needs Assessment (CHNA) was approved on January 28, 2013 by the Owensboro Health Board of Directors. In addition to the CHNA, and in accordance with requirements contained in the Affordable Care Act, the hospital must also adopt an implementation plan which describes how the hospital plans to address the identified health need(s) contained within the CHNA.

BACKGROUND:

Subsequently, Owensboro Health formed an internal implementation strategy team comprised of staff members from across the organization including representatives of: Administration; Cancer Services; Cardiac Care; Respiratory care; Physician Recruiting; Community Health and Wellness; Behavioral Health; Nursing; Quality; Information Systems; Medical Staff; Finance; Strategic Planning; the Owensboro Health Healthpark; Governmental, Community and Legislative Affairs; and, Community Benefit and Outreach.

The purpose in developing an implementation strategy was threefold. First, the team would consider how the hospital would work to address priority health issues as identified by the CHNA. Second, it would work to determine how the hospital will monitor progress on priority health issues identified in the strategy. Finally, the team would make recommendations on the overall direction of the strategy as it relates to addressing health issues. Once developed, the team would provide ongoing evaluation of the hospital's strategy as the follow-up Community Health Needs Assessment is developed in 2016.

AREAS OF NEED IDENTIFIED BY COMMUNITY:

As its starting point, the Owensboro/Daviess County community, through a collaborative effort between the Green River District Health Department, Owensboro Health, and numerous other community stakeholders, selected three priority health areas to address in its Community Health Improvement Plan (CHIP). This CHIP was the culmination of the health department's MAPP process (Mobilizing for Action through Planning and Partnerships).

The following three priority health areas contained in the CHIP were further analyzed then incorporated into Owensboro Health's Community Health Needs Assessment.

1. Substance Abuse (ATOD: Alcohol, Tobacco and other Drugs)
2. Obesity
3. Access to Care

Owensboro Health staff members are serving on, and in some cases, co-facilitating local community health council's subcommittees that were formed from the Community Health Improvement Plan to address each of the three named priority areas.

ADDITIONAL AREAS OF IDENTIFIED NEED:

Additional community health needs were identified from the secondary and primary data analysis conducted by the hospital but not selected as community priorities for Daviess County as part of the MAPP process. Because many of the areas of need were interrelated and influence one another, these additional areas were included in the Owensboro Health CHNA to offer a more complete picture of community needs in Daviess County. Reviewing these additional areas of identified need can result in more informed decisions when developing strategies and planning activities to address community priorities. This is especially pertinent to the area of "Access to Health Services" as it affects and is affected by many of the needs listed below.

- Cancer
- Heart Disease and Stroke
- Immunization and Infectious Diseases
- Maternal, Fetal and Infant Health/Family Planning
- Mental Health and Mental Disorders
- Older Adults and Aging
- Prevention and Safety
- Respiratory Diseases
- Economy: Poverty
- Public Safety

STRATIFICATION OF ADDITIONAL IDENTIFIED NEEDS WITH PRIORITIZED NEEDS:

The Owensboro Health Implementation Strategy team conducted an exercise in which the additional areas of identified need were stratified underneath the three community health issues prioritized in the Community Health Improvement Plan based on a causal-effect relationship. This resulted in the following categorization:

Substance Abuse

(ATOD: Alcohol, Tobacco and other Drugs)

Heart Disease
Cancer
Immunization/Infectious Disease
Prevention and Safety
Respiratory
Maternal Health
Mental Health
Aging
Economy/Poverty

Obesity

Heart Disease
Cancer
Aging
Prevention and Safety
Respiratory
Economy/Poverty

Access to Care

Heart Disease
Cancer
Immunization/Infectious Disease
Prevention and Safety
Respiratory
Maternal Health
Mental Health
Aging
Economy/Poverty
Public Safety

OWENSBORO HEALTH IMPLEMENTATION STRATEGY:**Strategy One**

Identification and inventory of existing activities and programs addressing targeted indicators

- **Completion date: September 30, 2013**

As part of the Green River District Health Department MAPP process, the assets, resources and gaps pertaining to the three prioritized needs within the Daviess County, Kentucky “public health system” were identified. Subsequently, goals and objectives pertaining to these needs were determined and included as part of the Community Health Improvement Plan. Similarly, the first strategy of the hospital’s implementation plan is to identify all existing programs and activities in which the hospital specifically is currently engaged, that address the prioritized health areas. This will be achieved through a thorough inventory process including but not limited to IRS 990 Schedule H Community Benefit tracking reports, departmental inventories and other reports indicating resources allocated to targeted indicators.

Strategy Two

Identification of gaps in activities and programs addressing targeted indicators

- **Gaps identified: 12/31/2013.**
- **Analysis of findings, recommended programs and resource allocation: 01/2014 - 09/2014**
- **Budget consideration to address identified gaps: 10/2014 - 02/2015**

Once current resources allocated to targeted indicators are determined, then the Identification of gaps in activities, programs, partnerships and resources provided by the hospital to address these needs will be conducted.

After the inventory and gaps review has been completed, hospital leadership can determine if it wishes to maintain existing programs, develop new ones, and/or develop additional partnerships to support the goals and objectives set forth in the community health improvement plan. Included in Strategy Two is ample time for consideration of any new initiatives and the planning for resource allocations that may be needed for such initiatives.

Strategy Three

Development of a written action plan for addressing targeted indicators

- **Full implementation of plan: 06/2015**
- **New assessment process begins, community forums, data collection: Fall 2015**
- **New CHNA approved, implementation plan revisions, ongoing monitoring: 01/2016 – 05/2016:**

When approvals for programs and activities have been made, a written plan of implementation will be developed and stage three of the plan will be initiated with measurable goals and objectives for each strategy.

Strategy Four

Ongoing evaluation, development and refinement

Utilizing the Healthy Communities Institute CHNA System's dashboard of health indicators we will annually monitor these prioritized areas and the impact of the hospital's strategy. Additional internal data will assist us in measuring hospital specific activities; use of additional community data will be a resource as well. This serves as stage four of the plan.

IMPLEMENTATION STRATEGY IMMEDIATE NEXT STEPS:

- Development of an internal hospital inventory of programs and activities addressing priority health issues.
- Changes to our Community Benefit grant program to financially support programs whose proposed projects support the community health improvement plan by addressing the named community health priorities and/or related indicators. The projects which we fund will be included in the inventory we complete.
- The hospital currently provides programs and services that address the named health issues and we will do further exploration to determine if those programs or activities need any alteration or further expansion.
- Ongoing participation in the Daviess County community health council and its subcommittees.

The hospital implementation team, along with Community Benefit staff will evaluate progress and look at outcomes between the Tax Year 2012 Community Health Needs Assessment and the follow-up Community Health Needs Assessment to be completed and approved in Tax Year 2015 no later than May 31st, 2016. During this time a revised implementation strategy will also be drafted and approved.

CLARIFYING NOTE:

The IRS final guidelines on the Community Health Needs Assessment and Implementation Strategy for Nonprofit Hospitals had not yet been issued at the time of this plan's development. Operating under the guidance provided in the Affordable Care Act, IRS Notice 2011-52, the Catholic Healthcare Association, VHA and the American Hospital Association, the previous timeline for the Owensboro Health Implementation Plan was developed. We believe the work described herein will allow for appropriate strategic and implementation planning necessary to address identified prioritized health needs going forward.

This plan has been reviewed and approved by the Owensboro Health Community Needs and Accountability Committee on March 20, 2013, and the Owensboro Health Board of Directors on April 22, 2013.