**2014 Community Health Needs Assessment Implementation Strategy Plan**

Madison County Memorial Hospital selected three corresponding significant health need goals the hospital will address based on the identified community health needs from the Community Health Needs Assessment (CHNA) and the Community Health Needs Summit. The three goals are as follows:

* Bring in two additional primary care physicians into the area in the next three years
* Develop infrastructure that allows mental health patients to be evaluated via telemedicine by 2016. Utilize telemedicine to evaluate and transfer to another level of care if needed.
* Enhance community education awareness on decreasing the incidence of complications of diabetes

**Access to Primary Care and Mental Health Services**

Bring in two additional primary care physicians into the area in the next three years

Suggested Action 1: Apply for grants to finance office space and own and operate the practices for them to occupy

Suggested Action 2: Develop/redevelop infrastructure for managing/owning physicians’ practices

Suggested Action 3: Explore the National Health Service Corp working with local kids to attend medical school.

Suggested Action 4: Increase community support for new physicians involving the community in the recruitment process, welcoming the physician to the community and using the physician(s) for medical care.

Suggested Action 5: Change the zoning to get more doctors into the area around the hospital

**Background information:**

Primary Care Providers offer routine medical care for the prevention, diagnosis, and treatment of common medical conditions. Primary care providers often serve as “gatekeepers” for the health care system, as they are intended to be the entry point into the health care system for non-emergent services, and refer

patients requiring additional care to specialists for treatment.

Due to their central role in the health services system, a shortage of primary care providers can negatively impact the health of a community.

Local hospital Emergency Room (ER) utilization rates can be an indicator of the availability and accessibility of health care services within an area. Many ER visits are preventable, or involve conditions that may be more appropriately cared for in a

primary care setting.

Madison County has no adult psychiatric hospital beds or dedicated mental health facility. Apalachee Center, located in Madison, offers residential living for mental health patients.

**Action Plan:**

* Assist new physician with a specialty in geriatrics in utilizing hospital space temporarily to practice – majority of buildings available in Madison County are currently zoned for residential use. Work with City to help with re-zoning.
* Research USDA grants to obtain funds to outfit an existing block building for a primary care physician and/or specialist care medical office building
* Develop partnership with FSU College of Medicine for successive physician recruitment planning for aged medical staff
* Invite FSU College of Medicine students to tour new facility
* Seek legislative request for recruitment of a Physician
* Expand emergency room services via telemedicine for specialist care
* Hold meetings with CRMC /TMH to establish psychiatric services via tele-psyche to treat emergency room patients appropriately based on recommendation from telephysiatrist and to timely transition patient to mental health facility for safe care
* Continue work with the Apalachee Center for mental health needs of Madison County
* Continue to work with law enforcement for crisis intervention for Baker Acts

**Anticipated results:**

Through the above tactics we expect to recruit a physician, establish infrastructure to establish a telemedicine program, access to mental health care will be timely and that improved coordination of care will occur between Madison County Memorial Hospital emergency room and the receiving mental health facility.

**Chronic Disease: Diabetes**

Goal #1:

Decrease the incidence of newly diagnosed diabetes

Suggested Action 1: Increase education for individuals at risk for diabetes

Suggested Action 2: Increase community education

Suggested Action 3: Increase screening for individuals at risk for developing diabetes

Goal 2:

Decrease the incidence of complications of diabetes

Suggested Action 1: Provide education on early identification, prevention of complications associated with diabetes (Marketing campaign – posters, symptoms, contact numbers, warning signs) Suggested Action 2: Implement diabetes self-management program with providers

Suggested Action 3: Monitor patients’ adherence to the diabetes standard of care

Suggested Action 4: Create a diabetic cookbook rehabbing familiar recipes

**Background information:**

Diabetes Mellitus is a group of diseases characterized by high levels of blood glucose resulting from defects in insulin production, insulin resistance, or both. Madison County has a high rate of diabetes. Overall the prevalence of diabetes among adults in Madison County is higher that the state prevalence. Diabetes can be associated with serious complications and premature death, but people with diabetes can take steps to control the disease and lower the risk of complications.

**Action Plan:**

* Partner with local gyms to establish increased options for health and wellness to employees and community
* Increase support of educational opportunities related to healthy lifestyle choices
* Provide education on how to maintain and control diabetes and perform diabetes screenings at community health fairs
* Promote awareness of Senior Citizens wellness programs
* Promote and support a workforce that is trained as diabetes educators to offer at no charge services to community in minimizing risk of complications of diabetes
* Develop a hospital wellness program to promote a healthy lifestyle
* Promote walking and biking in already established designated safe areas in the community to maintain healthy lifestyles
* Develop partnerships with local restaurants to provide and promote healthy options

**Anticipated results:**

Through these activities, Madison County Memorial Hospital intends to increase awareness and help drive behavior change that will lead to decrease risk of complications related to diabetes.

**Team Members to implement and monitor action plans:**

Senior Management

Chief Medical Officer

**Timeline for those previously not identified:**

No later than December 2017

Madison County Memorial Hospital will monitor the progress through the Hospital’s Executive Team and will at least annually report the progress to their Board and the community. The other priorities identified in the 2014 Community Health Needs Assessment Report will not be addressed by Madison County Memorial Hospital due to lack of financial resources. See attached.

**2014 Community Health Needs Assessment**

**Suggested Goals Not Addressed**

**By Madison County Memorial Hospital**

**Obesity**

Goal # 1:

Obesity – Reduction of children with BMI greater than 35 by 2% by 2016

The hospital does not specialize in pediatric or obstetrical care and does not have the financial resources to accomplish this goal.

Goal # 2:

Reengage churches that receive funding from the disbanded Disparities Task Force coalition. Re-engage Health Disparities Task Force

The hospital does not have the personnel and financial resources to accomplish this goal.

Goal # 3:

Determine feasibility of a Farmers Market for Madison County by December 2015

The hospital does not have the personnel and financial resources to accomplish this goal.

**Poverty and Education**

Goal #1:

Increase High School completion rate

The hospital does not have the financial resources to assist in this goal.

Goal #2:

Improve overall health education and literacy

The hospital does not have the personnel and financial resources to assist in this goal.

**Sexual Responsibility**

Goal#1: Reduce sexually transmitted disease rates in Madison County

The hospital does not have the personnel or financial resources to assist in these goals.

Goal #2: Reduce teenage birth rates from 13% to 10%

The hospital does not have the personnel or financial resources to assist in these goals.

**Insurance**

Goal #1:

Educate the uninsured and underinsured about health insurance options

The hospital does not have the personnel or financial resources to assist in this goal.

Goal #2:

Assist the uninsured and underinsured with obtaining insurance

The hospital does employ a financial counselor and is available during normal business hours; however, this is not done at point of care due to limited financial resources.

Goal #3:

Recruit insurance professionals or access trained people to educate people who are uninsured

The hospital does not have the personnel or financial resources to assist in this goal.

**Tobacco**

Goal #1 Reduce smokeless tobacco in young population

While we do not have the personnel or financial resources to accomplish this goal, in August 2014 the hospital became a Tobacco Free Campus when the hospital moved to its new building. A non-hospital group for access to Tobacco Cessation Classes is held at the hospital.