

2016 CHNA Executive Summary Recommendations

Need	1. Dental Care and Preventive screenings are available for all
Factors	Both communities are in dental HPSA areas, 66.66% of CHNA respondents reported “Not Correct or Not at all Correct” to the question, <i>Dental care and preventive screenings are available for all</i> , 45.11% CHNA survey respondents reported “poor” access to dentists
Problem statement	There are currently no dentists in either of the core communities.
GCHS current efforts	GCHS has worked with two dentists with local ties in an attempt to establish a part time dental service without success.
Strategy and Resources	Each school system does provide a free preventive dental visit for each child at least once annually.
Leading indicators	# of residents who report no dental care
Lagging indicators	Health concerns relating to poor dental care
Local resources	Explore new dental partnerships with local and regional partners. School systems continue current efforts. Evaluate opportunities for preventive care such as dental sealants to be used in primary care offices.
Board member – please prioritize	Significant Need, GCHS has implementation responsibility _____ Significant Need, GCHS does NOT have implementation responsibility _____ Other Need, GCHS DOES have implementation responsibility _____ Other Need, GCHS does NOT have implementation responsibility _____

Need	2. Alcoholism and Drug Dependence are recognized and treatment is available
Factors	55.71% of CHNA respondents reported “Yes this is still a major concern for our community” to the question, <i>Alcoholism and Drug Dependence are recognized and treatment is available</i> , 92.19% of respondents report “Somewhat a problem or Major Problem” to the question <i>How much of a problem is drugs and alcohol in your community?</i> , Both communities are higher than state average for excessive drinking and alcohol impaired driving deaths.
Problem statement	The use of alcohol and drugs in our rural communities remains a health and public safety concern for our residents.
GCHS current efforts	GCHS has partnered with Compass Behavioral Health to staff a licensed drug and alcohol addictions counselor one day each week in the Tribune location. Additionally, this service is available in both clinics daily through telemedicine. GCHS clinicians also participate in an annual or bi-annual education event in each school system to discuss dangers of drug and alcohol use among other health concerns.
Strategy and Resources	Continue with current behavioral health partnering efforts. Work more closely with local law enforcement and community groups for greater community education.
Leading indicators	Number of Emergency room visit with an alcohol or drug related diagnosis codes - 2
Lagging indicators	County health rankings for alcohol impaired driving deaths – GC-67%, WC 100% County health rankings for excessive drinking – GC-16%, WC 15%
Local resources	School systems, county health fairs, local law enforcement, local community support groups
Board member – please prioritize	Significant Need, GCHS has implementation responsibility _____ Significant Need, GCHS does NOT have implementation responsibility _____ Other Need, GCHS DOES have implementation responsibility _____ Other Need, GCHS does NOT have implementation responsibility _____



Need	3.Housing is a limiting factor in attracting new residents
Factors	73.79% report that “Yes, this is still a major community concern” to the question <i>Housing is a limiting factor in attracting new residents</i>
Problem statement	Affordable housing is difficult to find in many rural communities.
GCHS current efforts	This 2013 CHNA concern continues in the 2016 survey results. Although this remains a large problem for our community, it is difficult for GCHS to have a major role in resolving the issue.
Strategy and Resources	Greeley County Community Development has debuted an aggressive housing approach by building four duplexes in the community. These were completed in 2013. However, housing remains a large concern. GCHS remains supportive of community efforts and will partner when possible.
Leading indicators	N/A
Lagging indicators	N/A
Local resources	Community development organizations
Board member – please prioritize	Significant Need, GCHS has implementation responsibility _____ Significant Need, GCHS does NOT have implementation responsibility _____ Other Need, GCHS DOES have implementation responsibility _____ Other Need, GCHS does NOT have implementation responsibility _____

Need	4. Obesity education, nutrition and preventive medicine are needs in our communities
Factors	2016 CHNA respondents indicated concern for these areas through the following statistics: 90% indicated “Somewhat a problem or major problem” to the question <i>how much of a problem is obesity</i> , in that same question the percentages were 93.15% cancer, 92.2 diabetes and 88.4 heart disease, many answered “yes” to the question <i>What areas need additional education or attention in our community</i> 77.08% obesity, 76.43% preventive medicine, 71.33% wellness education, 72.14% nutrition and 61.43% chronic disease
Problem statement	The need continues for effective chronic disease and wellness education in our communities.
GCHS current efforts	GCHS was awarded a HRSA Small Health Care Provider Quality Improvement Grant in 2016. This 3 year grant includes a new strategy to the primary care approach towards chronic disease and includes wellness and education efforts.
Strategy and Resources	HRSA Health COACH grant, annual county fair partnering, utilizing staff and community resources for wellness education
Leading indicators	Number of programs that promote healthy behaviors in 2016 / 2017
Lagging indicators	Percent of population 20+ with BMI > 30
Local resources	GCHS HRSA Health Coach grant, Greeley and Wallace County Health Departments, Greeley and Wallace County Extension Departments, School systems, County Health Fairs
Board member – please prioritize	Significant Need, GCHS has implementation responsibility _____ Significant Need, GCHS does NOT have implementation responsibility _____ Other Need, GCHS DOES have implementation responsibility _____ Other Need, GCHS does NOT have implementation responsibility _____

Need	5. Access to behavioral health and awareness of mental health conditions
Factors	44.53% of CHNA respondents reported “Yes, this is still a major concern for our community” to the question <i>chronic physical and mental illness is a concern</i> , 71.43% answered “Yes” to the question <i>Does mental health need additional education or attention in our community</i> and 50.38% indicated that access to behavioral and mental health services are <i>fair or poor</i> .
Problem statement	Access to mental health services can be difficult in rural communities and may still carry some stigma associated with seeking services.
GCHS current efforts	GCHS has partnered with Compass Behavioral Services to incorporate face to face counseling in our Tribune clinic one day each week and features telemedicine access for both scheduled and emergency services. We have recently partnered with High Plains Mental health in Northwest Kansas to offer telemedicine access in the Sharon Springs clinic. We will also continue clinician and staff education for mental health awareness.
Strategy and Resources	Continue partnership with existing mental health regional agencies. Promote awareness among staff, patients and community members. Incorporate mind and body training in new primary care programming.
Leading indicators	Number of behavioral health visits: 160 Number of mental health telemedicine encounters: 10
Lagging indicators	Rate of residents reporting poor mental health days. GC 2.9 and WC 2.8
Local resources	Area mental health agencies – Compass Behavioral Health and High Plains Mental Health, County health departments, local community based groups
Board member – please prioritize	Significant Need, GCHS has implementation responsibility _____ Significant Need, GCHS does NOT have implementation responsibility _____ Other Need, GCHS DOES have implementation responsibility _____ Other Need, GCHS does NOT have implementation responsibility _____

Need	6. Issues of aging, end of life decision making and elder wellness are a concern
Factors	79.45% of CHNA respondents reported “Yes” to the question <i>As you think about the aging process, what types of information would be important to you – Healthy Aging and Financial Preparation for healthcare expenses</i> , 66.67% reported “Yes” to <i>End of Life Decision making</i> , 78.32% believe aging and dementia require additional education and attention in our communities, 46.92% reported “Fair or Poor” to the <i>How satisfied are you with home health access</i> question. These communities are aging with 20.9% and 21.4% over the age of 65 in Greeley and Wallace Counties respectively
Problem statement	As rural Americans are living longer, more are in need of increased education about the issues of aging and elder wellness.
GCHS current efforts	GCHS has several efforts currently in place including a Patient Financial Assistance Counselor who is quite knowledgeable about many elder issues including Medicare, secondary coverage, and other long term planning. We have also begun to work more diligently at training our staff for caring for patients with aging diagnosis such as Alzheimer’s Disease and Dementia.
Strategy and Resources	We must continue with current efforts and increase community outreach and education. Partnering with community, regional and state organizations will also benefit our residents.
Leading indicators	Number of Community presentations in 2015 - 4
Lagging indicators	Average age of community residents – GC-48.4 , WC-43.4 years Percent of residents over the age of 65 – GC 20.9%, WC 21.4%
Local resources	GCHS LTC, Wallace County Community Care Center, Medicare Ombudsmen, Silver Haired Legislators, GCHS staff, particularly Patient Financial Assistance Counselor, Annual Aging Expo hosted by GCHS



Greeley County Health Services

Board member – please prioritize	Significant Need, GCHS has implementation responsibility _____ Significant Need, GCHS does NOT have implementation responsibility _____ Other Need, GCHS DOES have implementation responsibility _____ Other Need, GCHS does NOT have implementation responsibility _____
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Need	7. Patient care would benefit from additional physicians
Factors	Both Greeley and Wallace Counties are located in HPSA (Health Provider Shortage Area), we currently staff 1.6 FTE physicians for service population greater than 3,000, the current search for a physician has lasted more than 2 years without an on-site interview or a hire
Problem statement	The shortage of Family Physicians will only continue to increase making rural recruitment that much more difficult.
GCHS current efforts	We have worked with two search firms in the past including Delta and Comp Health with no success. We continue with existing agreements with Christian Medical Dental Association, National Health Service Corps and Kansas Recruitment Center. We have an innovative, informal arrangement with a group of mission minded physicians and hospitals in southwest Kansas.
Strategy and Resources	Continue with current recruiting agreements, further develop mission minded recruiting approach, maintain presence at state recruiting venues, and pursue recruiting opportunities with residencies in Pueblo and Amarillo in addition to Kansas residency programs. Develop medical student relationship with Salina Family Medicine School
Leading indicators	On site interviews with physician candidates – 2015 = 0
Lagging indicators	Wait time for an appointment with a physician – 3 weeks HPSA score – WC 16, GC 12
Local resources	GCHS, Community Groups, KUMC, UMKC, GCHS Board of Directors, Southwest Kansas mission minded hospital group
Board member – please prioritize	Significant Need, GCHS has implementation responsibility _____ Significant Need, GCHS does NOT have implementation responsibility _____ Other Need, GCHS DOES have implementation responsibility _____ Other Need, GCHS does NOT have implementation responsibility _____

Need	8. There is a need for additional healthcare resources in our community such as dental care, home health options, and optometrists
Factors	66.66% of CHNA respondents reported “poor or fair” to the question <i>how satisfied are you with the following-dental care</i> . 54.96% and 46.92% answered the same to eye doctor and home health respectively, our aging population finds it difficult to travel out of town for care
Problem statement	The GCHS population is interested in expansion of services. Recruiting specialties and maintaining a sufficient patient load for profitability is an even greater challenge than recruiting primary care.
GCHS current efforts	GCHS remains open to partnering with outside specialists and maintains a good referral relationship whenever possible to local outside specialists.
Strategy and Resources	GCHS will continue to work with area agencies such as Centura Health in Garden City to explore partnering opportunities. We will also explore opportunities for new service delivery for our population.
Leading indicators	Number of partnering conversations with existing specialists –
Lagging indicators	
Local resources	GCHS, GCHS Board of Directors, Quorum Health Resources, local, regional and state partners
Board member – please prioritize	Significant Need, GCHS has implementation responsibility _____ Significant Need, GCHS does NOT have implementation responsibility _____ Other Need, GCHS DOES have implementation responsibility _____ Other Need, GCHS does NOT have implementation responsibility _____

Other Needs Identified During CHNA Process

9. **HEALTH EDUCATION/DISEASE PREVENTION**
10. **HOUSING CONCERNS**
11. **SOCIAL VULNERABILITY**
12. **ACCESS TO EXERCISE OPPORTUNITIES**
13. **SOCIAL SUPPORT**

Overall Community Need Statement and Priority Ranking Score

Significant needs where hospital has implementation responsibility

Need # 2 - Alcoholism and drug dependence are recognized and treatment is available

Need # 4 - Obesity education, nutrition and preventive medicine are needs in our communities

Need # 5 - Access to behavioral health and awareness of mental health conditions

Need # 6 - Issues of aging, end of life decision making and elder wellness are a concern

Need # 7 - Patient care would benefit from additional physicians

Need # 8 - There is an expressed need for additional healthcare resources in our community such as dental care, home health options and optometrists

Significant needs where hospital did not develop implementation strategy

Need # 3 - Housing is a limiting factor in attracting new residents

Other needs where hospital developed implementation strategy

Other Need # 13 - Social vulnerability and social support

Other needs where hospital did not develop implementation strategy

Other Need # 12 - Access to Exercise opportunities

Resolution to Approve the Community Health Needs Assessment Implementation Plan

Whereas the Greeley County Health Services (GCHS) approved of and oversaw the implementation of the Community Health Needs Assessment process for the purpose of improving community health status and meeting the Internal Revenue Service mandates enacted through the Patient Protection and Affordable Care Act;

Now therefore be it resolved that the board of GCHS does hereby adopt this resolution to accept the Community Health Needs Implementation Strategy presented on this day to address the following prioritized health needs:

Significant needs where hospital has implementation responsibility

- Need # 2 - Alcoholism and drug dependence are recognized and treatment is available
- Need # 4 - Obesity education, nutrition and preventive medicine are needs in our communities
- Need # 5 - Access to behavioral health and awareness of mental health conditions
- Need # 6 - Issues of aging, end of life decision making and elder wellness are a concern
- Need # 7 - Patient care would benefit from additional physicians
- Need # 8 - There is an expressed need for additional healthcare resources in our community such as dental care, home health options and optometrists

Significant needs where hospital did not develop implementation strategy

- Need # 3 - Housing is a limiting factor in attracting new residents

Other needs where hospital developed implementation strategy

- Other Need # 13 - Social vulnerability and social support

Other needs where hospital did not develop implementation strategy


- Other Need # 12 - Access to Exercise opportunities

Upon vote taken, the following voted:

For:

Against:

Whereupon said Resolution was declared duly passed and adopted this 27th day of October 2016.



GCHS Board Chair



Attest: Board Secretary