

Community Health Needs Assessment

MAY 2019

Implementation Strategy

Noland Hospital Montgomery



Implementation Strategy

Noland Health will engage key community partners in implementing evidence-based strategies across the service area. Acknowledging the many organizations and resources in place to address the health needs of our communities, Noland Health has strategically reviewed both internal and external resources. This portion of the CHNA, the Implementation Strategy, will explain how Noland will address health needs identified in the CHNA by continuing existing programs and services, and by implementing new strategies. It will reflect back on the previous CHNA and do an Evaluation of the Impact of previous set strategies. In addition, the implementation plan will explain why the hospitals cannot address all the needs identified in the CHNA, and if applicable, how Noland will support other organizations in doing so.

Health Priorities

As afore mentioned in the CHNA report, the following are the needs Noland Health has chosen to address. It will also outline why we chose to address this need, how we will address the need, who the responsible party will be, and any goals that will be set forth from the beginning, as well as time frame for achieving those goals.

Prioritization was developed and presented to Noland Hospital Administrators and other hospital division leadership. Criteria used included importance to the service area (elderly residents with acute needs), relevance of the health issues to the population served, and the ability of Noland to effectively impact and improve the health issue.

The following five categories were identified as priorities of issues to be addressed. Issues in these categories were brought up numerous times and serve as a framework for each facility's implementation strategies.

#1. Education and Awareness: Lack of education and awareness was targeted as a major issue from community input. Lack of education covers all areas from patient and family education to education of resources and options in understanding the role of LTACHs in the continuum of care.

- Overall Health Education: Disease identification, prevention, and chronic management
- Education with hospital staff, patient and family on care options and accessing appropriate care
- Education and resources to access affordable meals

#2. Access to Appropriate Resources: The top access issues mentioned in community input are uninsured/underinsured, financial barriers, time, transportation, and appropriate referrals. The uninsured and underinsured not only have access problems in seeing physicians and receiving necessary tests, but also issues in receiving their proper medications primarily due to cost and transportation. Education on resources such as Senior Services can help. This of course "piggy backs" off the #1 issue of Education and Awareness. Pharmacies are becoming new valuable resource in drug cost reduction and helping patients overcome insurance barriers.



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#3. Prevention & Screening: Prevention and screening for disease becomes increasingly important as people age. However, Noland Montgomery feels that its ability to impact health needs is limited or better accomplished by other organizations in the community.

#4. Health Issues Impacting the Elderly: Pneumonia and UTIs were both mentioned frequently in community input concerns across multiply Noland locations even though the majority of the issues did not rise to the top of 3 or more mentions. It is noted that these are interrelated and can fall under several other groups of concerns.

#5. Health Issues of LTACH Patients and Families: Through administrators, Case Workers and physician expertise in the LTACH setting, a number of issues were identified across all Noland facilities in the community input phase that dealt specifically with LTACH patients and their families. Family support and education was found to be a critical need because of the family's integral role in the decision making process and successful patient outcomes. Many of the issues that arise in LTACH facilities directly affect the family as much as the patient. Knowledge of the LTACH environment is crucial for a family. The understanding of how LTACHs fit in the continuum of care is also important, not only for the families, but for discharge planners and other acute care staff.

As required by proposed IRS regulations, each of the following individual facilities of Noland Health created their own implementation strategies:

- Noland Hospital Anniston
- Noland Hospital Birmingham
- Noland Hospital Dothan
- Noland Hospital Montgomery
- Noland Hospital Tuscaloosa

The implementation strategies were developed for these priority areas by hospital. Each hospital did not address every area, but rather selected those areas of priority that it deemed it could have the greatest impact.



Each facility filled out the following table for each priority area they would address.

Noland Facility:			
Specific Needs Identified in the CHNA:			
Goals:			
Strategy:			
Action Step	Accountability	Timeline	Desired Outcome
Strategy:			
Action Step	Accountability	Timeline	Desired Outcome

Those areas not addressed were included in a section "Needs Not Addressed". Most common reasons for not addressing a need were lack of resources, other local organizations already addressing the need, and needs falling outside the general scope of an LTACH facility.



Noland Hospital Montgomery- 2016 Implementation Strategies

In the previous Community Health Needs Assessment conducted in 2016, Noland Hospital Montgomery chose 4 areas to address in their implementation strategies. Below is an update with an Evaluation of Impact for those 4 areas.

Noland Facility:	Montgomery 2016						
Specific Needs Identified in the CHNA:		Education and Awareness					
Goals:							
Strategy: Plan Events to Educate on Key Issues							
Action Step		Accountability	Timeline	Desired Outcome	Status		
Develop an educational program for churches and groups. Schedule 4 events in 2017. Focus on need particular groups, i.e. respiratory, wound care, nu etc.	ds of	Hospital Leadership and Clinical Liaisons	30-0ct-17	Increased awareness among seniors and families of aging adults.	Ongoing; Addressed in 2019 CHNA Implementation Strategy		
Partner with United Way, the American Heart Asso and the Chamber of Commerce to educate seniors disabled population. Schedule appropriate events throughout the year.	and the	Hospital Leadership and Clinical Liaisons.	30-0ct-17	Increased awareness.	Ongoing; Addressed in 2019 CHNA Implementation Strategy		
Strategy: Create Inservice Learning Opportunit	ties						
Action Step		Accountability	Timeline	Desired Outcome	Status		
Create an inservice to Hospitals and Nursing Home educate on the value of LTACH in the community a quality outcomes. Schedule 2 inservices per quart hospitals and nursing homes.	ind	Hospital Leadership and Clinical Liaisons.	ongoing	Increased awareness among nursing home and hospital physicians, case manager and staff.	Ongoing; Addressed in 2019 CHNA Implementation Strategy		

Noland Facility:	Montgomery 2016						
Specific Needs Identified in the CHNA:		Access to Appropriate Resources					
Goals:	Address	Address barriers of care					
Strategy: Plan and Educate on Coverage							
Action Step		Accountability	Timeline	Desired Outcome	Status		
Plan for admission of unfunded patients		Hospital		Accessible to care	Ongoing; Addressed in 2019		
		Administrator and		for the uninsured	CHNA Implementation		
		clinical liaisons		patient.	Strategy		
					Ongoing; Addressed in 2019		
Educate families on insurance coverage for LTAC	Н	Case manager and	ongoing	Informed families.	CHNA Implementation		
-		clinical liaisons	0 0		Strategy		
					Ongoing; Addressed in 2019		
Education on discharge options for unfunded patient	ients.	Case Manager	ongoing	Informed families.	CHNA Implementation		
		C			Strategy		



Noland Facility:	Montgomery 2016				
Specific Needs Identified in the CHNA:	Health Issues Impacting Elderly				
Goals:	Wound prevention and care				
Strategy: Provide education to patients and car	re giver	s on the prevention	of wounds		
Action Step		Accountability	Timeline	Desired Outcome	Status
Invite family members and care givers to the week Interdisciplinary Team Conference.	ly	Intersiciplinary Team Members	Ongoing	Increased knowledge of patients and care givers	Successfully increased knowledge of wound care among patients and care givers
Provide inservices to Senior Living Groups: person homes, assisted living, etc.	ial care	Wound Care Nurse, members of the nursing staff	31-0ct-17	Increased knowledge of personel, care givers	Successfully increased knowledge of wound care among patients and care givers

Noland Facility:	Montgomery 2016				
Specific Needs Identified in the CHNA:	Health Issues of LTACH Patient and Families				
Goals:	Discharge of the ventilated patients				
Strategy: Coordinate the efforts of the family, ca	are give	ers, and physician,	& home heal	th on dischai	ging vent patients
Action Step		Accountability	Timeline	Desired Outcome	Status
Educate caregivers on the care of the patient on the suctioning, trach care, turning, bathing, etc. Coordir learning activities of the caregivers. Arrange for the medical equipment & training of the medical equipr and supplies needed at home and the timely arrival same.	nate the e ment	RT Supervisor, Case Manager, DCS	ongoing	Smooth transition home	Ongoing; Addressed in 2019 CHNA Implementation Strategy



Noland Hospital Montgomery - 2019 Implementation Strategies

Noland Hospital Montgomery chose 4 areas to address in their implementation strategies. Below is a description of needs and strategies and action steps associated with each.

#1 EDUCATION AND AWARENESS - Implementation Strategy

Noland Facility:	Montgomery 2019				
Specific Needs Identified in the CHNA:	Education and Awareness				
Goals:	Increase health literacy in the community and awarene available resources / care options				
Strategy: Plan Events to Educate on Key Issues					
Action Step		Accountability	Timeline	Desired Outcome	
Increase participation in health fairs for churches a senior groups. Schedule 4 events in 2021. Focus o needs of particular groups, i.e. respiratory, wound nutrition, etc.	Hospital Leadership and Clinical Liaisons	Ongoing	Increased awareness among seniors and families of aging adults.		
Partner with United Way, the American Heart Asso American Lung Association, and the Chamber of Commerce to educate seniors and the disabled pop Schedule appropriate events throughout the year.	Hospital Leadership and Clinical Liaisons.	Ongoing	Increased awareness.		
Strategy: Create Inservice Learning Opportunit	ties				
Action Step		Accountability	Timeline	Desired Outcome	
Create an inservice to Hospitals and Nursing Homes to educate on the value of LTACH in the community and quality outcomes. Schedule 4 inservices per year for hospitals and nursing homes.		Hospital Leadership and Clinical Liaisons.	Ongoing	Increased awareness among nursing home and hospital physicians, case manager and staff.	

#2 ACCESS TO APPRORIATE RESOURCES – Implementation Strategy

Noland Facility:	Montgomery 2019				
Specific Needs Identified in the CHNA:	Access to Appropriate Resources				
Goals:	Address barriers of care				
Strategy: Plan and Educate on Insurance Cover	age				
Action Step		Accountability	Timeline	Desired Outcome	
Plan for admission of unfunded patients		Hospital Administrator and clinical liaisons	Ongoing	Accessible to care for the uninsured patient.	
Educate families on insurance coverage for LTACH	ł	Case manager and clinical liaisons	Ongoing	Informed families.	
Education on discharge options for unfunded pati	ents.	Case Manager	Ongoing	Informed families.	
Strategy: Educate and share resources for heal	thcare fi	inancial assistance	with comm	unity	
Action Step		Accountability		Desired Outcome	
Partner with United Way to educate seniors and the disabled population on financial resources available support uninsured / underinsured patients.		Hospital Leadership and Clinical Liaisons.	Ongoing	Increased awareness.	



#4 HEALTH ISSUES IMPACTING ELDERLY – Implementation Strategy

Noland Facility:	Montgomery 2019				
Specific Needs Identified in the CHNA:	Health Issues Impacting Elderly				
Goals:	Educate	elderly population	on disease pro	evention	
Strategy: Provide education to patients and car	re giver:	s on the prevention	n of UTIs and	Pneumonia	
Action Step		Accountability	Timeline	Desired Outcome	
Invite family members and care givers to the week Interdisciplinary Team Conference.	ly	Intersiciplinary Team Members	Ongoing	Increased knowledge of patients and care givers	
Provide inservices to Senior Living Groups: person homes, assisted living, etc.	al care	Members of the nursing staff	Ongoing	Increased knowledge of personel, care givers	

#5 HEALTH ISSUES OF LTACH PATIENT AND FAMILIES – Implementation Strategy

Noland Facility:	Montgomery 2019				
Specific Needs Identified in the CHNA:	Health Issues of LTACH Patient and Familie				
Goals:	Continute education and care in the discharge of the ventilated and respiratory patients and families.				
Strategy: Coordinate the efforts of the family, or discharging vent and respiratory patients	care give	ers, and physician,	, & home heal	th on	
Action Step		Accountability	Timeline	Desired Outcome	
Educate caregivers on the care of the vent and respiratory patients: suctioning, trach care, turning, bathing, etc. Coordinate the learning activities of the caregivers.		RT Supervisor, Case Manager, DCS	Ongoing	Smooth transition home	
Continue ease of transition by arranging for the m equipment & training of the medical equipment ar supplies needed at home and the timely arrival of same.			Ongoing	Smooth transition home	



A few needs outlined in the CHNA processes have not been addressed in this plan. In initial discussion and subsequent prioritization, the Community Needs Assessment Team considered the levels to which some needs were already being addressed in the service area. Additionally, some community needs fall out of the scope of expertise and resources of the hospital. The following addresses these needs.

#3 PREVENTION AND SCREENING

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Noland Facility:	Montgomery 2019
Specific Needs Identified in the CHNA:	Prevention and Screening
Goals:	Prevention and Screening is not addressed due to lack of resources and sufficiently supported by larger community organizations and healthcare facilities.



Noland Health- Board Approval

Treasury Regulation Section 1-501(r)-3(c)(5)(i):

For purposes of paragraph (a)(2) of this section, an authorized body of the hospital facility must adopt the implementation strategy on or before the 15th day of the fifth month after the end of the taxable year in which the hospital facility completes the final step for the CHNA described in paragraph (b)(1) of this section, regardless of whether the hospital facility began working on the CHNA in a prior taxable year.

Noland Health's Board of Directors approves the Implementation Strategy for addressing priorities identified in the most recent Community Health Needs Assessment completed FYE June 30, 2019. This report was approved by the Noland Health Board of Directors at its meeting held on May 8, 2019.