

Implementation Strategy Summary
Community Health Needs Assessment
FHN Memorial Hospital

November 28, 2016

FHN CHNA Implementation Strategy

The following chart represents the services, programs and partnerships FHN Memorial Hospital will use to address the four major categories of community health needs identified in the FHN Community Health Needs Assessment (CHNA) 2016. The four major categories of need are:

- Health and Well Being
- Chronic Disease Management
- Barriers to Healthcare
- Poverty/Economic Burden of Disease

Action Items may address one or more categories of need. The listed Action Items are in no order of priority, address all populations, are designed with the continuum of care in mind and will be executed when appropriate.

Action Items	Categories			
	Health & Well Being	Chronic Disease Management	Barriers to Healthcare	Poverty/ Economic Burden of Disease
FHN Community Screenings Integrating Physical & Behavioral Health <ul style="list-style-type: none"> • Diagnostic testing and screening • Provide additional tools/human resources • Add locations • Collaborate with partners 	X	X	X	X
Expand FHN Walk In Services <ul style="list-style-type: none"> • Walk In Mammograms • Primary Care • Urgent Care • Behavioral Health Walk In Clinic 	X		X	X
Expand Hours and Days for Care at FHN facilities <ul style="list-style-type: none"> • Palliative/Supportive care • Ambulatory sites • Saturday Behavioral Health care 	X	X	X	X

<p>FHN Nutrition Outreach</p> <ul style="list-style-type: none"> • Partner with Community Food Service programs: <ul style="list-style-type: none"> ○ Meals on Wheels ○ Golden Meals ○ Food Banks ○ Grocery stores ○ Community Garden(s) ○ Win with Wellness • Partner with FHN service area school districts to provide nutrition education <ul style="list-style-type: none"> ○ FHN nutrition educators <ul style="list-style-type: none"> ▪ Address obesity ▪ Healthy eating 	X	X	X	X
<p>Financial Resources</p> <ul style="list-style-type: none"> • Financial assistance through FHN and other resources <ul style="list-style-type: none"> ○ Pharmaceutical programs ○ Insurance Coverage ○ Create FHN Database for available community resources <ul style="list-style-type: none"> ▪ Community residential resources for discharge coordination ○ FHN Financial Assistance Program ○ FHN Prompt Pay Discount ○ FHN Hospital Uninsured Discount ○ FHN Financial Counselors access ○ Partner with Stephenson County Health Departments to enroll patients in coverage 			X	X
<p>Manage Transitional Care Effectively</p> <ul style="list-style-type: none"> • FHN Community Health Center Scheduling post discharge • FHN Supportive/Palliative Care • FHN formalized Care Coordination • FHN remote monitoring • Enhance opportunities with nursing home facilities <ul style="list-style-type: none"> ○ FHN Nurse Practitioner role ○ Improve internal/external communication/coordination • Identify Home Care Opportunities 		X	X	X

<p>Increased external promotion of FHN service information</p> <ul style="list-style-type: none"> • Providers, hours, locations • Specialty services • Tele-Health (e.g. e-ICU, Behavioral) • Linkage to community partners • Support groups • FHN Community Health Clinic 	X	X	X	X
<p>Explore Transportation Opportunities</p> <ul style="list-style-type: none"> • Identify forms of transportation: taxi, bus, AMS • Partner with facilities that have their own transportation system • Create and disseminate listing of transportation resources 		X	X	X
<p>Behavioral Health</p> <ul style="list-style-type: none"> • Substance Abuse (Outpatient services, strategic intervention in Acute setting) • Gerontology services and education to support Nursing Home primary care efforts, whole person health, family support • Integration with primary care • Screenings to enhance prevention and wellness efforts • Education- enhanced efforts for providers and community (eg churches) • Additional Community Partnerships w/ other Providers <ul style="list-style-type: none"> ○ Schools/Universities/Colleges ○ Health Department ○ Police and First responders • Technology – use of technology to increase access and efficiency of care 	X	X	X	X
<p>Improve Cultural & Diversity Awareness</p> <ul style="list-style-type: none"> • Understanding concept of Cultural Competency • FHN staff/provider Education • Develop and enhance relationships with community partners <ul style="list-style-type: none"> ○ Community liaisons <ul style="list-style-type: none"> ▪ Religious organizations ▪ Schools ▪ Civic organizations ○ Provide healthcare support ○ Partner with Healthy Neighborhood Project 	X		X	X
<p>Improve Chronic Disease Management</p> <ul style="list-style-type: none"> • Create specific evidence-based outreach, education, resources, and plans of care <ul style="list-style-type: none"> ○ Cancer ○ CHF 	X	X	X	X

<ul style="list-style-type: none">○ COPD○ Diabetes○ ESRD○ Heart Disease○ Hypertension○ Obesity○ Stroke				
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