Mercy Medical Center – New Hampton
Community Health Needs Assessment Implementation Strategy
Fiscal years 2017-2019

Mercy Medical Center – New Hampton completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Directors on June 27, 2016. Mercy – New Hampton performed the CHNA in adherence with certain federal requirements for not-for-profit hospitals set forth in the Affordable Care Act and by the Internal Revenue Service. The assessment took into account input from representatives of the community, community members, and various community organizations.

The complete CHNA report is available electronically at www.mercynewhampton.com, or printed copies are available at Mercy – New Hampton.

Hospital Information and Mission Statement
Mercy Medical Center-New Hampton, a member of Mercy Health Network, is a faith-based, not-for-profit community health care system that offers comprehensive health care services. Mercy is licensed for 18 beds and has 20,000 outpatient visits each year. Located in New Hampton, Iowa, Mercy serves 17,000 residents in and around Chickasaw County.

Mercy Medical Center-New Hampton offers a full range of services in an inpatient and outpatient setting as well as 24 hour emergency care, surgical services, obstetrics and family health, therapy and rehabilitation, diagnostic services, health education and wellness promotion. Mercy also offers convenient access to 17 different specialties from a 55 member medical staff. Mercy Family Clinic – New Hampton is a department of Mercy. No other facilities are owned or operated by Mercy – New Hampton.

Mercy – New Hampton’s service area is predominately rural and heavily dependent on agriculture. Mercy Medical Center – New Hampton serves patients in Chickasaw County and bordering counties as well. Due to over 80% of Mercy’s market share coming from patients in Chickasaw County and for accuracy in data collection, Chickasaw County was the focus of the assessment. The county’s population dropped to 12,264, which was a 1.4% decrease from 2010 to 2014; by comparison, Iowa’s population grew 2% over the same time period. As an indicator, population trends are relevant because a shrinking population base affects healthcare providers and the utilization of community resources.

In general, rural populations are older, poorer and less educated than their urban counterparts, with higher prevalence of chronic diseases. Chickasaw County is no exception. The county’s population is predominately white (98.3%). And, though median household income of $43,971 is only 85% of the Iowa state average, the 10.3% of persons below the poverty level is better than the Iowa average of 12.4%. 19.4% of the population
is 65 years and over, compared to 15.8% in Iowa. Only 13.8% of the population has a Bachelor’s degree or higher, compared to 25.7% in Iowa.

Mission
We serve together at Mercy Medical Center - New Hampton with Trinity Health in the spirit of the Gospel, to heal body, mind and spirit, to improve the health of our communities and to steward the resources entrusted to us.

Health Needs of the Community

The CHNA conducted from November 2015 to June 2016 identified five significant health needs within the Mercy – New Hampton community. Those needs were then prioritized based on what would have the greatest positive impact on the identified community health needs. The five significant health needs identified, in order of priority include:

<table>
<thead>
<tr>
<th>#1 Primary Care Access</th>
<th>Patients have had difficulty accessing their primary care medical clinic for health needs. Increasing access will improve continuity of care, chronic disease management and provider/patient trust. Mercy – New Hampton is the only hospital in Chickasaw County which is designated by HRSA as medically underserved.</th>
</tr>
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<tbody>
<tr>
<td>#2 Behavioral Health/Chemical Dependency</td>
<td>Building the communities capacity to address mental health issues by improving access to available services and health improvement options/opportunities, using new communication channels and technologies. Under the theory that mental health issues have been pushed to the county level with no added resources to provide much needed services, MMC-NH will identify key county stakeholders to form or strengthen a county behavioral coalition.</td>
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<tr>
<td>#3 Area Pharmacy Demand Exceeds Availability</td>
<td>One of the three local pharmacies closed in October 2015 and the remaining two pharmacies have not been able to successfully meet the needs of our patients.</td>
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<td>#4 Maintain/Increase Specialty Services</td>
<td>The communities’ access to specialty services delivered locally has decreased over the past couple of years.</td>
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Hospital Implementation Strategy

Mercy – New Hampton resources and overall alignment with the hospital’s mission, goals and strategic priorities were taken into consideration of the significant health needs identified through the most recent CHNA process.
Significant health needs to be addressed
Mercy – New Hampton will focus on developing and/or supporting initiatives and measure their effectiveness, to improve the following health needs:

- **Primary Care Access** – Detailed need specific Implementation Strategy on pages 5.
- **Behavioral Health/Chemical Dependency** – Detailed need specific Implementation Strategy on page 7.
- **Maintain/Increase Specialty Services** – Detailed need specific Implementation Strategy on page 9.

Significant health needs that will not be addressed
Mercy – New Hampton acknowledges the wide range of priority health issues that emerged from the CHNA process, and determined that it could effectively focus on only those health needs which it deemed most pressing, under-addressed, and within its ability to influence. Mercy – New Hampton will not take action on the following health need:

- **Area Pharmacy Demand Exceeds Availability** – Mercy – New Hampton has been working closely with the New Hampton Economic Development office on recruiting another pharmacy to the area. New Hampton had 3 pharmacies (Bennett’s, Shopko and Tom’s Family Pharmacy). In October 2015, Shopko bought Tom’s Family Pharmacy but has not been able to meet the demand. The Tom's pharmacy property, which includes a robotic Rx filling system, remains vacant and with Shopko’s purchase agreement of the pharmacy business, the property cannot be sold for 5 years to a competing pharmacy.

Mercy – New Hampton and the New Hampton Economic Development office continue to work closely with pharmacies in northeast Iowa about the opportunities available in New Hampton. In particular, the potential opportunity for tele-pharmacy as it is brought to Iowa in 2017.

This implementation strategy specifies community health needs that the Hospital has determined to meet in whole or in part and that are consistent with its mission. The Hospital reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During the three years ending June 30, 2018, other organizations in the community may decide to address certain needs, indicating that the Hospital then should refocus its limited resources to best serve the community.
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<td><strong>CHNA SIGNIFICANT HEALTH NEED:</strong></td>
<td>Primary Care Access</td>
</tr>
<tr>
<td><strong>CHNA REFERENCE PAGE:</strong></td>
<td>14</td>
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**BRIEF DESCRIPTION OF NEED:**
Patients have had difficulty accessing their primary care in the service area. Patients sometimes have to wait one week to see their primary care provider due to lack of any appointment openings. Patients report having a difficult time getting to the clinic for appointments between traditional hours of 8-5 and are interested in extended clinic business hours.

**GOAL:** Improve health status by removing barriers to care.

**OBJECTIVE:** Increase the amount of patient appointment times and hours so that 98% of patients can schedule a same day appointment with their primary care provider, which will improve continuity of care, chronic disease management and provider/patient trust.

**ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:**
- Create 8 blocks per day for each provider that will be reserved for same day appointments
- Develop and use scripting with registration staff to ensure patients are seeing PCP

**ANTICIPATED IMPACT OF THESE ACTIONS:**
- Improve continuity of care
- Improve chronic disease management
- Improve provider/patient trust
- Decrease wait time
- Increase openings for short notice appointments which will reduce ER visits
- Improved staff, provider and patient satisfaction

**PLAN TO EVALUATE THE IMPACT:**
- Establish baseline number of patients who did not get an appointment with their primary care provider when requested and compare to actual on a monthly basis
- Health coach tracking of chronic health treatment compliance (A1C levels, BP checks, etc.)
- Monitor number of patient visits
- GEMBA with patients for their visit experience
- Evaluate provider satisfaction

**PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:**
- Health Coach to closely monitor chronic health patients and ensure they are being seen by their PCP
- Health Navigator to monitor patient visits and work with schedulers to fit in annual exams, re-
checks and preventative wellness testing with their PCP.

- Process Excellence to assist with tracking our metrics and outcomes.

**COLLABORATIVE PARTNERS:**

- Area nursing homes and mental health care facility
- Public health
- Local pharmacies
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**BRIEF DESCRIPTION OF NEED:** Building the communities capacity to address mental health issues by improving access to available services and health improvement options/opportunities, using new communication channels and technologies. Under the theory that mental health issues have been pushed to the county level with no added resources to provide much needed services, MMC-NH will identify key county stakeholders to form or strengthen a county behavioral coalition. MMC-NH will support this coalition in developing and implementing programs to support local mental health issues.

**GOAL:** Improve support for mental health and chemical dependency services.

**OBJECTIVE:** Collaborate with key stakeholders within the county to address the mental health and chemical dependency issues facing Chickasaw county by creating a Behavioral Health Coalition to develop community capacity to increase mental health and chemical dependency services.

**ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:**

1. Identify key hospital staff to work with key stakeholders to continue the current meetings being held to address mental health issues.
2. Work with the current mental health professionals to investigate forming a stronger coalition and organizational structure to develop the capacity to create local and collaborative action around these issues.
3. Investigate funding sources to support behavioral health programs.
4. Identify key mental health gaps within the community.
5. Investigate opportunities for Mental Health Consults within the ER to reduce potentially unnecessary transfers outside of the community.

**ANTICIPATED IMPACT OF THESE ACTIONS:**

1. Organizational capacity and outside funding to support the needs of the county as it relates to mental health issues.
2. Improve access to needed mental health care locally.
3. Better treatment of mental health before patients they are in crisis.
4. Decrease the economic impact caused by committals outside of the county.
### PLAN TO EVALUATE THE IMPACT:
1. Track the number of patients brought into the ER with a primary diagnosis related to mental health.
2. Work with high school counselors to evaluate student mental health and the usage of school provided mental health professionals.
3. Through Chickasaw County Attorney and Sheriff’s office, track the number of committals overall.

### PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:
Aaron Flugum, Cheryl Haggerty, Jenny Monteith will be working to support a Behavioral Health coalition.

### COLLABORATIVE PARTNERS:
Mercy Medical Center – North Iowa Behavioral Health Services, Pathways, Local law enforcement, Local Mental Health providers.
CHNA IMPLEMENTATION STRATEGY
FISCAL YEARS 2016-2018

HOSPITAL FACILITY: Mercy Medical Center – New Hampton

CHNA SIGNIFICANT HEALTH NEED: Maintain & increase specialty services

CHNA REFERENCE PAGE: 14 PRIORITIZATION #: 5

BRIEF DESCRIPTION OF NEED: The communities’ access to specialty services delivered locally has decreased over the past couple of years. With an increase in population of those over the age of 70 and limited resources for public transportation outside of our community, it is important to offer more services locally. Mercy – New Hampton is the only hospital in our county, which is classified as HRSA as medically underserved.

GOAL: Investigate adding specialty service lines and surgical capacities.

OBJECTIVE: Increase number of specialty physicians.

ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:
1. Identify key hospital staff to work with specialty providers to work on the process of evaluating the need for specialty services, and then evaluating the capacity of and interest in specialty providers in providing those services here.
2. Work with the specialty service providers identified to evaluate equipment and training needs for staff to provide specialty services with identified need and services
3. Perform financial review of services offered to support the identified equipment and resource needs as noted by the specialty providers.
4. Determine feasibility of performing specialty services and implement those deemed viable.
5. Recruit specialty physicians to treat patients in New Hampton.

ANTICIPATED IMPACT OF THESE ACTIONS:
1. Improved continuity of care as patients will get continuum of service locally
2. Increase local capacity to perform surgical procedures and care for patients requiring specialty care

PLAN TO EVALUATE THE IMPACT:
1. Track number of patients seeking care outside of the county for these services
2. Track baseline of specialty providers available

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:
1. Capital resources to purchase needed equipment for developing the service lines
2. Additional staff training as needed for new service lines and procedures.

COLLABORATIVE PARTNERS:
Adoption of Implementation Strategy

On [insert date], the Board of Directors for Mercy Medical Center – New Hampton, met to discuss the FY2017 – FY2019 Implementation Strategy for addressing the community health needs identified in the June 2016 Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy and the related budget.

_________________________________________  ___/___/_______
Name & Title  Date