Mercy Medical Center - North Iowa
Community Health Needs Assessment Implementation Strategy
Adopted in FY 2017 for FY 2018-2020

Mercy Medical Center - North Iowa (MMCNI) completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Trustees on June 7, 2017. MMCNI 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 http://www.mercynorthiowa.com/community-health-needs-assessment or printed copies are available by contacting Mercy Medical Center - North Iowa’s Community Benefit Ministry Officer.

Hospital Information and Mission Statement

At Mercy Medical Center – North Iowa, we continually achieve remarkable results for our patients through the unlimited power of teamwork, the highest standards of quality, dynamic partnerships, and advanced technology. Mercy operates from several sites in Mason City and is licensed for 342 beds. In addition to the hospital, the east campus of Mercy includes McAuley Hall, Forest Park Medical Building, and Mason City Clinic. The west campus, located in Mason City, includes a 22-bed skilled nursing unit, an 8-bed acute rehabilitation unit, Mercy Home Care, and numerous ambulatory services. The Ambulatory Surgery Center, located at 990 4th Street SW, is a joint venture between Mercy and area specialty physicians.

As the premier rural health care delivery network in northern Iowa and southern Minnesota, Mercy Health Network - North Iowa spans 14 counties across northern Iowa and consists of a secondary referral medical center (Mercy Medical Center - North Iowa), a network of eight rural primary care hospitals, Mercy Clinics (a primary care and specialty physician network), a home health agency, a hospice, a senior services agency, a regional...
referral laboratory, regional rehabilitation and diagnostic technology services, pharmacies, an emergency services network, and a variety of other health care services.

Mission
We, Mercy Medical Center – North Iowa, along with Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

Health Needs of the Community

The CHNA conducted June 7, 2017, identified 10 significant health needs within the Mercy Medical Center - North Iowa community. Those needs were then prioritized based on the number of responses from each group received during the community input process. Participants agreed upon the identified criteria:

- Severity, magnitude, urgency
- Feasibility and effectiveness of possibility intervention
- Potential impact on greatest number of people
- Importance of addressing the need
- Outcome within 3 years can be measurable and achievable

The total scores were averaged for each group and then added together to determine the priority of each health need identified. The 10 significant health needs identified, in order of priority, include:

1. Lack of Mental Health Providers/Support Services
   - Our region is identified as a mental health provider shortage service area.

2. Diabetes
   - The number of individuals with diabetes continues to rise.

3. Cost of Health Care
   - Inability to afford co-pays/co-insurance and medications.

4. Obesity
   - Continued rise of unhealthy eating habits amongst the population as a whole.

5. Heart Disease
   - This is a chronic care management condition that continues to appear in the community.

6. Healthy Food Not Available
   - Nutritious fresh whole foods are too costly.

7. Elder Care
   - Services are not well identified and not readily available.

8. Lack of Medical Providers
   - Recruitment to the area is difficult due to our rural location and lack of amenities.

9. Lack of Social/Emotional Support
   - Service area is lacking resources to support patients and their families socially and emotionally.

10. Transportation to Health Appointments
    - Deficit area for those who rely on public transportation services to obtain basic health care and activities of daily living.
Hospital Implementation Strategy

Mercy Medical Center - North Iowa’s resources and overall alignment with the hospital’s mission, goals and strategic priorities were taken into account when considering significant health needs identified through the most recent CHNA process.

**Significant health needs to be addressed**
Mercy Medical Center - North Iowa will focus on developing and/or supporting initiatives and measure their effectiveness, to improve the following health needs:

- **Lack of Mental Health Providers/Support Services** - Detailed Implementation Strategy on page #5.

**Significant health needs that will not be addressed**
Mercy Medical Center - North Iowa 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. MMCNI will not take action on the following health needs:

- **Diabetes** - Although MMCNI will not take additional steps to address diabetes, it will continue its work from previous CHNA Implementation Strategy (2014-2016) surrounding chronic care management of those with Diabetes. Cerro Gordo County Department of Public Health (CGCDPH) has identified Diabetes as Goal #5 on their Community Health Improvement Plan (May 13, 2016-May 12, 2017). MMCNI entered into a collaborative partnership in 2017 with the CGCDPH and the Family YMCA to increase awareness by educating citizens on the prevention of Diabetes using Life Coaches. This is also an Iowa statewide initiative in which Cerro Gordo County and collaborative partners are taking part.

- **Cost of Health Care** - Although MMCNI will not take additional steps to address cost of health care, it will continue to support and sustain the safety net care coordination model initiated in early 2014 in partnership with Iowa Primary Care Association, Iowa Department of Public Health and local community partners (Cerro Gordo County Department of Public Health, Prairie Ridge Integrated Behavioral Healthcare, North Iowa Community Action Organization, and WellSource).

- **Obesity** - Although MMCNI will not take additional steps to address obesity, current Blue Zone efforts across the community, coupled with employer sponsored wellness initiatives have increased awareness of dietary modification by eating more whole foods, increasing movement and getting enough rest. There have been significant improvements within Cerro Gordo County of walking/bike paths/park enhancements. Pending Diabetes Prevention programming will duplicate efforts in this arena for the adult populations.
Public and private schools are leading efforts for Childhood Obesity of which MMCNI will assist to support efforts to address.

- **Lack of Medical Providers** - Although MMCNI will not take additional steps to address the lack of medical providers, MMCNI has recruitment initiatives in place to recruit and retain medical providers within the community of which it will sustain while focusing on provider satisfaction.

- **Heart Disease** - Although MMCNI will not take additional steps to address heart disease, MMCNI continues support and efforts to address in chronic care management of heart disease initiated in previous CHNA Implementation Strategy (2014-2016).

- **Transportation to Health Appointments** - Although MMCNI will not take additional steps to address transportation to health appointments, MMCNI supports and contributes financially to our community partner, The Salvation Army. The Salvation Army provides leadership and oversight in partnership with other local community agencies within Cerro Gordo County. MMCNI, The City of Mason City, Region II Transit, and NIACOG collaboratively address this social determinate of health that affects many citizens across our local and 14-county region.

- **Healthy Food Not Available** - Although MMCNI will not take additional steps to address healthy, unprocessed, fresh, nutritious, natural foods at this time, MMCNI will continue with community collaborative events such as farmers markets, community supported agriculture (CSA), Meals on Wheels, and Community Kitchen.

- **Elder Care** - Although MMCNI will not take additional steps to address elder care, MMCNI continues to collaborate with community partners: Aging Services Coalition, Elderbridge Agency on Aging, local nursing homes, Community Care Coordination Program, Mercy Home Care, area Public Health Departments, North Iowa Community Action Organization, and North Iowa Area Community College.

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 2020, 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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<th>HOSPITAL FACILITY:</th>
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<td>CHNA SIGNIFICANT HEALTH NEED:</td>
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**BRIEF DESCRIPTION OF NEED:** Across the US, there is a shortage of psychiatrists and other mental health providers. The North Iowa area has been identified as an area where there is a lack of mental health providers and is underserved. Add this shortage in with a statewide decline of psychiatric beds available to meet patient and family needs for emergent/crisis care leaves communities inept to deal with this population.

**GOAL:**
- Expand the services to the adult and adolescent population by increasing the number of Inpatient and Outpatient Mental Health Providers.
- Create a "Public Community Help Center" that includes education and awareness of behavioral health issues for the public, outpatient counselling and connection to community services.

**OBJECTIVE:**
1. Reduce unnecessary psychiatric admissions and improve the discharge planning process for patients and families.
2. Expand physical space and services to include an outpatient "Public Community Help Center."
3. Increase inpatient beds to 24 private adult and 10 semi-private adolescent beds for a total of 34 beds.
4. Construct a new Behavioral Health Center for counseling and intensive outpatient and partial hospitalization programs.

**ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:**
1. Contract with Vendor to supply after hours/technology for psychiatric triage.
2. Proposed new construction of Behavioral Health Units, outpatient programs and Public Community Help Center with capital of $9.78M plus $900,000 philanthropy donation to be used exclusively for Public Community Help Center.
3. Add two additional Clinician FTEs for IOP/PHP program.
5. Host two Rapid Improvement Events surrounding medication reconciliation and discharge process.
6. Provide and utilize Telehealth technology.
**ANTICIPATED IMPACT OF THESE ACTIONS:**
1. Reduce unnecessary admissions/readmissions.
2. Create a physical space to promote integration with community partners to meet with patients and families to provide the right care at the right time.
3. Expanded services for adult and adolescent patients and families.
4. Increased retention of psychiatric providers and mental health professionals.

**PLAN TO EVALUATE THE IMPACT:**
1. Track walk-ins and referrals monthly using a metric yet to be developed.
2. Problem solve real-time readmissions.
3. Review provider satisfaction survey results annually.
4. Track the number of Telehealth consults and support therapies.

**PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:**
1. Contract with Vendor to supply after hours/technology for psychiatric triage - $150,000
2. Construct new Behavioral Health Units, outpatient programs and Public Community Help Center with capital of $9.78M plus $900,000 philanthropy donation to be used exclusively for Public Community Help Center - $10.68M
3. Add two additional Clinician FTEs for IOP/PHP program - $160,000
4. Psychiatric Nurse Practitioner loan forgiveness for ARNP discipline - $12,000
5. Host two Rapid Improvement Events surrounding medication reconciliation and discharge process) - $24,000
6. In-Kind Donations - $4,000

**COLLABORATIVE PARTNERS:**
1. North Iowa Transition Center
2. Prairie Ridge Integrated Behavioral Healthcare
3. Crisis Intervention
4. Community Counselors
5. Francis Lauer Youth Services
6. Mason City Police Department (MCPD)
7. National Alliance for the Mentally Ill (NAMI)
8. Four Oaks of Iowa
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**BRIEF DESCRIPTION OF NEED:** It was identified that the service area is lacking social and emotional support for patients and families. Many patients do not have family close or have community connections during times of crisis.

**GOAL:**
- Address the gap in access and quality of support services we often see in psychiatric care.
- Maximize service availability for those with social/emotional needs which not only benefits the patients that we serve but our healthcare system and community as a whole.

**OBJECTIVE:**
1. Offer 1:1 assistance for patients or families in crisis.
2. Increase the number of classes/group sessions for IOP/PHP.
3. Create a Public Community Help Center to support collaboration with community partners in order to ensure quality/patient-centered care.
4. Decrease the number of crisis calls.
5. Improve overall safety for patients and colleagues by offering sensory or calming rooms.
6. Improve inpatient groups and activities.

**ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:**
1. Construct new Behavioral Health Units, outpatient programs and Public Community Help Center with capital of $9.78M plus $900,000 philanthropy donation to be used exclusively for Public Community Help Center.
2. Develop a community education series.

**ANTICIPATED IMPACT OF THESE ACTIONS:**
1. Create a physical space to promote integration with community partners to meet with patients and families to provide the right care at the right time.
2. Educate the public on the availability of integrated holistic care.
PLAN TO EVALUATE THE IMPACT:
1. Track walk-ins and referrals monthly using a metric yet to be developed.
2. Track number of community partners accessing the Public Community Help Center for patient-centered care.
3. Assess customer satisfaction.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:
1. Construct new construction of Behavioral Health Units, outpatient programs and Public Community Help Center with capital of $9.78M plus $900,000 philanthropy donation to be used exclusively for Public Community Help Center - $10.68M
2. MMCNI - Operating Budget - $50,000
3. In-Kind Donations - $4,000

COLLABORATIVE PARTNERS:
1. North Iowa Transition Center
2. Prairie Ridge Integrated Behavioral Healthcare
3. Crisis Intervention
4. Community Counselors
5. Francis Lauer Youth Services
6. Mason City Police Department (MCPD)
7. National Alliance for the Mentally Ill (NAMI)
8. Four Oaks of Iowa

Adoption of Implementation Strategy

On September 6, 2017, the Board of Trustees for Mercy Medical Center - North Iowa met to discuss the 2018-2020 Implementation Strategy for addressing the community health needs identified in the August 16, 2016, Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy and the related budget.

[Signature]
Name & Title

[Signature]
Date