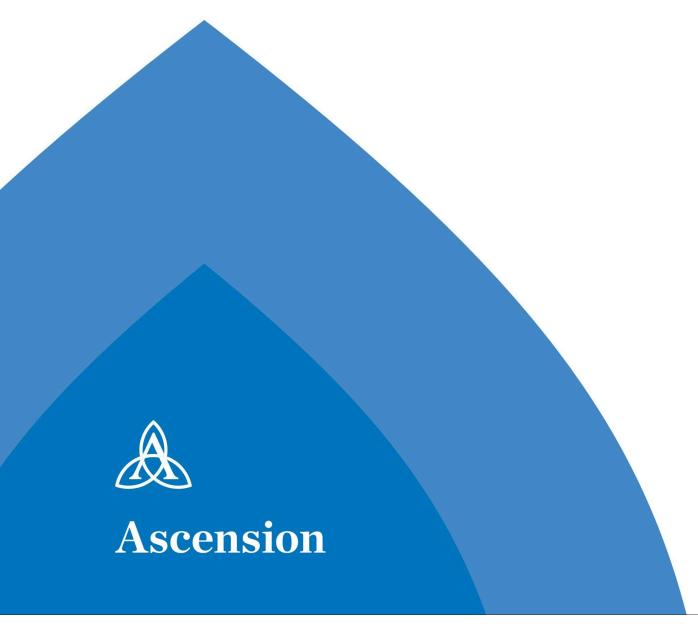
Ascension St. Vincent Randolph

Implementation Strategy for the 2024 CHNA Randolph County, Indiana



© Ascension 2025. All images, photos, text and other materials are subject to copyrights owned by Ascension, or other individuals or entities which are used with their permission, and are protected by United States copyright laws. Any reproduction, retransmission, distribution or republication of all or part of any images, photos, text, and other materials is expressly prohibited without the express written approval and under the approved format of Ascension.

Ascension St. Vincent Randolph



The purpose of this Implementation Strategy (IS) is to describe how the hospital plans to address prioritized health needs from its current Community Health Needs Assessment (CHNA). The significant health needs the hospital does not intend to address are identified, and a rationale is provided. Special attention has been given to the needs of individuals and communities at increased risk for poor health outcomes or experiencing social factors that place them at risk.

Ascension St. Vincent Randolph Hospital 473 SE Greenville Ave Winchester, IN 47394 (765)584 - 000435-2103153

The Ascension St. Vincent Randolph Board of Directors approved the 2024 Implementation Strategy on [MO, DAY, YEAR] (2024 tax year) and applies to the following three-year cycle: July 2025 to June 2028 (FY 2026 - FY 2028). This report, as well as the previous report, can be found on our public website.

We value the community's voice and welcome feedback on this report. Please visit our public website (https://healthcare.ascension.org/chna) to submit your comments.



Table of Contents

Introduction	4
About Ascension	4
Ascension St. Vincent Indiana	4
Ascension St. Vincent Randolph	5
Overview of the Implementation Strategy	6
Needs Prioritization	6
Needs That Will Be Addressed	7
Needs That Will Not Be Addressed	8
Written Comments	9
Approval and Adoption of the IS by Ascension St. Vincent Randolph	9
Action Plans	10
Evaluation	15



Introduction

As one of the leading non-profit and Catholic health systems in the United States, Ascension is committed to delivering compassionate, personalized care to all, with special attention to impoverished and vulnerable persons.

About Ascension

Ascension is one of the nation's leading non-profit and Catholic health systems, with a Mission of delivering compassionate, personalized care to all, with special attention to those most vulnerable. In FY2024, Ascension provided \$2.1 billion in care of persons living in poverty and other community benefit programs. Across 16 states and the District of Columbia, Ascension's network encompasses approximately 99,000 associates, 23,000 aligned providers, 94 wholly owned or consolidated hospitals, and ownership interests in 27 additional hospitals through partnerships. Ascension also operates 30 senior living facilities and a variety of other care sites offering a range of healthcare services.

Ascension's Mission provides a strong framework and guidance for the work done to meet the needs of communities across the US. It is foundational to transform healthcare and express priorities when providing care and services, particularly to those most in need.

Mission: Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually-centered, holistic care which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

For more information about Ascension, visit https://www.ascension.org/.



Ascension St. Vincent Indiana

Ascension St. Vincent operates 19 hospitals in addition to a comprehensive network of affiliated joint ventures, medical practices and clinics serving Indiana and employs more than 13,000 associates. In Fiscal Year 2024, Ascension St. Vincent provided more than \$357 million in community benefit and care of persons living in poverty throughout the state.

Ascension St. Vincent Randolph

As a Ministry of the Catholic Church, Ascension St. Vincent Randolph is a non-profit hospital governed by a local board of trustees represented by community members, medical staff, and sister sponsorships. For many years, the hospital has provided medical care for the residents of Randolph County, Indiana and neighboring areas.

Randolph County's first hospital, established in 1915, was called the Hettie Vorhis Home for Aged Women. Over the years, the hospital underwent major renovations and was renamed St. Vincent Randolph in 2000. Ascension St. Vincent Randolph is a 25-bed critical access healthcare facility located in Winchester, Indiana. The hospital offers a wide range of services, including blood disorder treatment, cancer care, diabetes care, digestive health, emergency medicine, home care, hospice, laboratory services, long-term acute care, maternity services, medical imaging, nutrition support, primary care, rehabilitation services, respiratory care, sleep disorder treatment, spiritual care, surgery, urology, wellness medicine, women's health, and wound treatment. The hospital primarily serves Randolph County in northeast Indiana.

For more information about Ascension St. Vincent Randolph, visit

https://healthcare.ascension.org/locations/indiana/inasc/winchester-ascension-st-vincent-randolph



Overview of the Implementation Strategy

Needs Prioritization

Included in Code Section 501(r)(3) is the requirement that hospitals must provide a description of the process and criteria used to determine the most significant health needs of the community identified through the CHNA, along with a description of the process and criteria used to determine the prioritized needs to be addressed by the hospital. Accordingly, Ascension St. Vincent Randolph used a phased prioritization approach to identify the needs of Randolph County. The first step was to determine the broader set of identified needs. The CHNA assessment narrowed identified needs to a group of significant needs determined most crucial for community stakeholders to address.

After completing the CHNA assessment, significant needs were further narrowed down to prioritized needs that the hospital will address within the IS. To arrive at the prioritized needs, Ascension St. Vincent Randolph used the following process: hospital leaders and board members reviewed the 2024 CHNA significant health needs and the data used to define each as significant, then voted on the top three needs they determined the hospital could respond to within its IS during the next three years. The criteria used to prioritize the significant needs were:

- Organizational capacity The hospital facility has the capacity to respond to the issue.
- Existing infrastructure The hospital facility has programs, systems, staff and support resources in place to respond to the issue.
- **Established relationships** There are established relationships with community partners to respond to the issue.
- Ongoing investment There are existing resources committed to the issue. Staff time and financial resources for this issue are counted as part of the community benefit effort.
- Focus area The hospital facility has acknowledged competencies and expertise to respond to the issue and the issue fits with the organizational mission.
- Magnitude of the problem The number of and/or disparities among people
- Severity of consequences The potential for mortality or morbidity
- Feasibility of intervention The available resources and evidence-based solutions
- Alignment with organizational or community goals The response would fit with strategic plans



Needs That Will Be Addressed

Following the completion of the current CHNA, Ascension St. Vincent Randolph has selected the prioritized needs outlined below for its 2024 IS. Ascension has defined "prioritized needs" as the significant needs that the hospital has prioritized to address through the three-year CHNA cycle:

- Access to Care This need was selected because access to care indicators such as adults reporting fair or poor health, low birthweight babies, per capita supply of healthcare providers, preventable hospital stays, and/or core preventive services compared unfavorably to peer counties or U.S. averages and because community meeting participants identified access to care (including preventive services) as a priority.
- Behavioral Health (includes Mental Health and Access to Mental Health Services and Subustance Use Disorders, including Nicotine) - This need was selected because mental health indicators such as number of poor mental health days, number of mental health providers per population, depression rate and/or suicide rate compared unfavorably to peer counties or U.S. averages and because community meeting participants identified mental health as a priority. Substance use disorder is included because indicators such as drug poisoning deaths, percentage of tobacco and/or e-cigarette users, opioid-related deaths, and/or the percentage of alcohol-impaired driving deaths compared unfavorably to peer counties or U.S. averages and because community meeting participants stressed the prevalence of SUD and mental health as co-occurring health issues and identified them as priorities.
- Social Drivers of Health (including Poverty, Affordable Housing, Food Insecurity, and Transportation) - This need was selected because contributors to health outcomes include access to social and economic opportunities. Indicators such as children in poverty, food deserts and food insecurity, and percentage of Asset Limited, Income Constrained, Employed (ALICE) households exceed Indiana and/or national averages.

Ascension St. Vincent Randolph understands the importance of all the community's health needs. It is committed to playing an active role in improving the health of the people in the communities it serves. For this implementation strategy, Ascension St. Vincent Randolph has focused its efforts on the above priorities.



Needs That Will Not Be Addressed

Based on the prioritization criteria, the health needs identified through the CHNA that Ascension St. Vincent Randolph does not plan to address within the hospital's IS at this time include:

- Maternal and Infant Health The hospital, together with AMG, provides health care services to pregnant women, infants, and children. Additionally, the hospital does address this need in various ways including participation in statewide committees and local community coalitions, offering support groups, and/or providing community education. The hospital will remain committed to partnering with community groups to address maternal, infant, and child health -and will continue to seek opportunities to do so. As federal, state, and local authorities, as well as community-based organizations, have focused efforts to improve maternal, infant, and child health, the hospital will not directly address this need in the current Implementation Strategy.
- Obesity, Physical Inactivity, and Associated Chronic Disease The hospital, together with AMG, provides education on various health topics related to obesity, physical inactivity, and associated chronic disease through health fairs and screenings, health education, wellness programs, lectures, school health education programs, and/or community support groups. Additionally, the hospital remains committed to partnering with community groups to address these identified health needs and will continue to seek opportunities to do so. As federal, state, and local authorities, as well as community-based organizations, are working to reduce this need, the hospital will not directly address this need in their current Implementation Strategy.
- Services for Older Adults The hospital, together with AMG, works collaboratively with the Ascension St. Vincent - Center for Healthy Aging to support older adults as they cope with complex health problems that can be associated with aging. Additionally, the hospital remains committed to partnering with community groups to address these identified health needs and will continue to seek opportunities to do so. As federal, state, and local authorities, as well as community-based organizations, are working to address needs of seniors, the hospital will not directly address this need in the current Implementation Strategy...

While these needs are not the focus of this Implementation Strategy, Ascension St. Vincent Randolph may consider investing resources in these areas as appropriate, depending on opportunities to leverage organizational assets in partnership with local communities and organizations. Also, this report only encompasses a partial inventory of everything Ascension Ascension St. Vincent Randolph does to support health within the community.

To find a list of resources for needs not being addressed, please refer to the Ascension St. Vincent Anderson's 2024 CHNA: https://healthcare.ascension.org/2024_CHNA/Randolph.



Written Comments

This IS has been made available to the public and is open for public comment. Questions or comments about this Implementation Strategy can be submitted via the website: https://healthcare.ascension.org/chna.

Approval and Adoption of the IS by Ascension St. Vincent Randolph

To ensure the Ascension St. Vincent Randolph's efforts meet the needs of the community and have a lasting and meaningful impact, the 2024 Implementation Strategy was presented and adopted by Ascension St. Vincent Randolph Board of Directors on [MO, DAY, YEAR]. Although an authorized body of the hospital must adopt the IS to be compliant with the provisions of the Affordable Care Act, adoption of the IS also demonstrates that the board is aware of the IS, endorses the priorities identified, and supports the action plans that have been developed to address prioritized needs.



Action Plans

The IS below is based on prioritized needs from the hospital's most recent CHNA. These strategies and action plans represent where the hospital will focus its community efforts over the next three years.

Access To Care

Hospital(s) Name(s)		
Ascension St. Vincent Randolph Hospital		
Prioritized Health Need		
Access to Care		
Objective 1. By June 30, 2028, Ascension St. Vincent Randolph will increase the 3-year total number of individuals enrolled in public programs through the completion of an Enrollment Pathway by 3% compared to the total enrolled during FY2023-FY2025.		
 By June 30, 2028, Ascension St. Vincent Randolph will increase the 3-year total number of individuals established with a medical home through the completion of a Medical Home Pathway by 3% compared to the total established in FY2023-FY2025. 		
Strategy Provide technical support for individuals when applying for public programs and finding primary care		
Collaborators/Resources Collaborators: FSSA, FQHCs, community groups focused on access to care, referring organizations ASV Department/Program: Health Access/Community Health Worker (CHW) Advocacy, Mission Integration	Associate time to develop materials with updated eligibility requirements. Associate time working with individual to complete a pathway. Printing costs for updated materials.	
ACTION STEPS	ROLE/OWNER	
Establish, or utilize an existing, internal workgroup to identify and implement ways the hospital can support the CHW and increased access to care.	IS Priority Lead (Access)	
Work with Advocacy and Communications to develop materials to inform individuals of new Medicaid eligibility requirements.	IS Priority Lead (Access)	
Complete the Medical Home Pathway through the following steps: assess and address barriers to establishing a medical home, refer patients to a medical home, educate on process, assist with scheduling, confirm attendance at appointment and follow up for ongoing concerns.	Community Health Worker	
Complete the Enrollment Pathway through the following steps: verify appropriate application is completed, review referrals for social drivers of health (SDOH), assess and address barriers, monitor patient progress and provide ongoing management.	Community Health Worker	
Track and report progress via bi-annual IS Tracker Report.	Health Access Director & Community Benefit	



ANTICIPATED IMPACT

The anticipated impact of these actions is increased access to care by providing support with establishing a medical home and securing medical insurance.

^{*}The budget for this initiative is an estimate and should be considered as such.

IS Priority Lead (Behavioral Health)



post-training documentation.

Behavioral Health		
Hospital(s) Name(s)		
Ascension St. Vincent Randolph Hospital		
Prioritized Health Need		
Behavorial Health (including mental health, substance use disorder, and suicide)		
Objective		
By June 30, 2028, Ascension St. Vincent Randolph, in collaboration with the Stress Center, will sponsor and		
support the certification of at least one community member who works with youth and young adults, ages 10 through 24, in the evidence-based online QPR Pathfinder Training.		
Strategy		
Support the development of a new workforce of crisis responders.		
Collaborators/Resources Collaborators: QPR, Community partners, community coalitions, local schools and youth sports/clubs ASV Department/Program: Stress Center, Peyton Manning Children's Hospital	 Budget* Fee for QPR training. Staff time working towards this initiative. 	
ACTION STEPS	ROLE/OWNER	
Develop applicable materials, including an application for individuals who are interested in being trained and post training document(s) to assess the perceived impact from the training.	Community Benefit	
Promote the training opportunity, identify individual(s) to attend training, secure training placement, and complete required	IS Priority Lead (Behavioral Health)	

The anticipated impact is an increase to the number of community members who work with young people that are equipped to recognize and respond effectively to the signs of a suicide crisis, enhancing early intervention and reducing the risk of suicide among youth and young adults.

ANTICIPATED IMPACT

Complete required quarterly reporting to Community Benefit.

^{*}The budget for this initiative is an estimate and should be considered as such.



Social Drivers of Hea	ılth	
Hospital(s) Name(s)		
Ascension St. Vincent Randolph Hospital		
Prioritized Health Need		
Social Drivers of Health		
Objective		
By June 30, 2028, Ascension St. Vincent Randolph will increase the number of Supplemental Nutrition		
Assistance Program (SNAP) enrollments completed by the Health Advocate by 3% from the baseline		
established in FY26.		
Strategy		
Reduce barriers to enrollment in nutrition assistance programs by s	supporting individuals through the eligibility	
and enrollment process.		
Collaborators/Resources	Budget*	
 Collaborators: FSSA, anti-hunger organizations 	Staff time towards this initiative	
ASV Department/Program: Health	Cost of printing fliers with food	
Access/Community Health Worker, Advocacy,	security resources	
Communications ACTION STEPS	ROLE/OWNER	
FY26 - Establish baseline data at the year-end to inform future	ROLE/OWNER	
goals.		
FY27 - Collaborate with Advocacy to develop educational		
materials about revised eligibility requirements.		
Complete SNAP enrollment through the following steps:		
 Review referral for SDOH needs and contact patient for 		
 Review referral for SDOH needs and contact patient for assessment and follow up 	IS Priority Lead (SDOH)	
 Review referral for SDOH needs and contact patient for assessment and follow up Educate eligible individuals about SNAP and complete 	IS Priority Lead (SDOH)	
 Review referral for SDOH needs and contact patient for assessment and follow up Educate eligible individuals about SNAP and complete enrollment process 	IS Priority Lead (SDOH)	
 Review referral for SDOH needs and contact patient for assessment and follow up Educate eligible individuals about SNAP and complete enrollment process Provide additional resources, including food pantries, 	IS Priority Lead (SDOH)	
 Review referral for SDOH needs and contact patient for assessment and follow up Educate eligible individuals about SNAP and complete enrollment process Provide additional resources, including food pantries, school nutrition programs, etc. 	IS Priority Lead (SDOH)	
 Review referral for SDOH needs and contact patient for assessment and follow up Educate eligible individuals about SNAP and complete enrollment process Provide additional resources, including food pantries, school nutrition programs, etc. FY28 - Continue enrolling eligible individuals in SNAP and track 	IS Priority Lead (SDOH)	
 Review referral for SDOH needs and contact patient for assessment and follow up Educate eligible individuals about SNAP and complete enrollment process Provide additional resources, including food pantries, school nutrition programs, etc. 	IS Priority Lead (SDOH)	
 Review referral for SDOH needs and contact patient for assessment and follow up Educate eligible individuals about SNAP and complete enrollment process Provide additional resources, including food pantries, school nutrition programs, etc. FY28 - Continue enrolling eligible individuals in SNAP and track and report results to Community Benefit on a quarterly basis. ANTICIPATED IMPACT		
 Review referral for SDOH needs and contact patient for assessment and follow up Educate eligible individuals about SNAP and complete enrollment process Provide additional resources, including food pantries, school nutrition programs, etc. FY28 - Continue enrolling eligible individuals in SNAP and track and report results to Community Benefit on a quarterly basis. 	of individuals and families receiving food	

^{*}The budget for this initiative is an estimate and should be considered as such.



Social Drivers of Health		
Hospital(s) Name(s)		
Ascension St. Vincent Randolph Hospital		
Prioritized Health Need		
Social Drivers of Health		
Objective		
By June 30, 2028, Ascension St. Vincent Randolph will partner with community organizations to offer at least		
one screening/community conversation of the documentary, Food, Insecure, and coordinate at least one		
internal or community-focused food drive.		
Strategy		
Facilitate community conversations with key stakeholders to inform and empower community mobilization.		
Collaborators/Resources	Budget*	
Collaborators: The Working Hungry, local food	 Staff time working towards this 	
bank(s), local government, legislators	initiative.	
ASV Department/Program: Mission Integration,	Costs associated with hosting the	
Advocacy, Communications, Health	screening.	
Access/Community Health Worker ACTION STEPS	ROLE/OWNER	
Prepare for screening by reviewing screening resources, identify	ROLE/OWNER	
partners to collaboratively host the screening, and panel	IS Priority Lead (SDOH)	
participants for the post-screening community conversation.		
Schedule and promote the screening and food drive (either jointly		
or separately) and promote both events through internal and		
community channels.		
Complete a post-screening/conversation summary to document		
next steps.		
ANTICIPATED IMPACT		
The anticipated impact of this action is increased community mobilization of food security advocates in their		

^{*}The budget for this initiative is an estimate and should be considered as such.

communities.



Evaluation

Ascension St. Vincent Randolph will develop a comprehensive measurement and evaluation process for the implementation strategy. The Hospital will monitor and evaluate the action plans outlined in this plan for the purpose of reporting and documenting the impact these action plans have on the community. Ascension St. Vincent Randolph uses a tracking system to capture community benefit activities and implementation. Data will be aggregated into an annual Community Benefit report made available to the community to ensure accountability.