# **Ascension Via Christi Hospital**

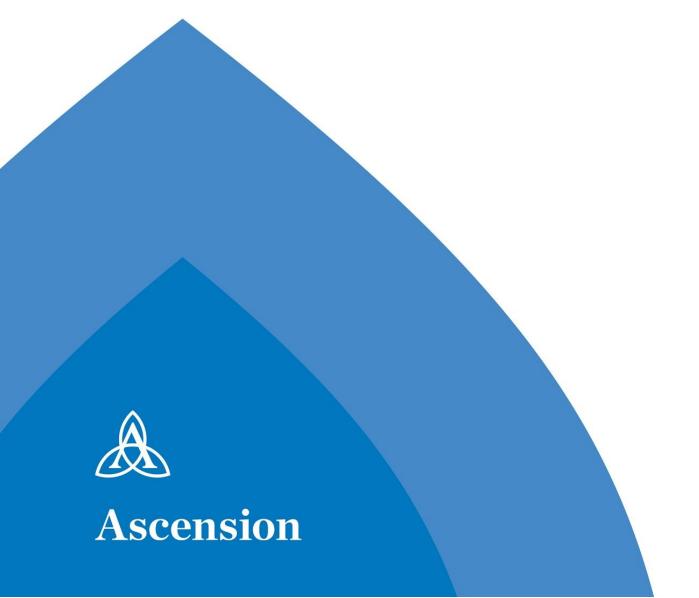
**FY 2021-2023 Implementation Strategy** 

**Riley County** 

License Number: H-081-003

Approved by the authorized governing body effective:

August 19, 2020





# Ascension Via Christi Hospital Manhattan, Inc.

# FY 2021-2023 Implementation Strategy

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## **General Information**

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## **Dates of Board Approval:**

Ascension Via Christi Hospital Manhattan, Inc. August 19, 2020, EIN: 48-1186704



## Overview

## About Ascension Via Christi Hospital Manhattan, Inc.

Ascension Via Christi (AVC) is a Catholic healthcare organization dedicated to providing high quality and innovative services to transform healthcare delivery across the continuum of care. AVC is the largest provider of healthcare services and has over 100 years of experience serving the people of Kansas, particularly those individuals living in poverty and underserved communities. Ascension Via Christi Hospital in Manhattan (AVCH-M) is a healthcare leader for northeastern Kansas, with 150 physicians, 500 employees, and 300 volunteers. Services offered in Manhattan include outpatient behavioral health treatment, comprehensive forensic sexual assault examinations, cardiac rehabilitation, imaging services, physical rehabilitation and therapy, inpatient rehabilitation, orthopedic pre-procedure education and treatment, the Pain Management Center, the Birth and Women's Center, the Sleep Disorder Lab, weight and diabetes management programs, Stroke Center, wound care, and an Emergency Department that provides care 24 hours a day, 7 days a week.

## **About the Community Health Needs Assessment**

AVC conducted a community-wide needs assessment in fiscal year 2020 to gain insight into addressing the needs of Riley County residents. The Riley County Community Health Needs Assessment (CHNA) was conducted by Wichita State University's Center for Applied Research and Evaluation (WSU-CARE), under the direction of the Flint Hills Wellness Coalition. The needs assessment included the compilation of selected secondary data, administration of a community survey, community member interviews, and focus groups. For information about the AVCH-M CHNA process and for a copy of the report please visit <a href="https://healthcare.ascension.org/CHNA">https://healthcare.ascension.org/CHNA</a>.

The geographical area of Riley County was chosen for the CHNA because it is where AVCH-M is located and where a majority of patients live or work. Riley County is located in the northeast portion of the State of Kansas. The population estimate on July 1, 2019 reported by the United States Census Bureau was 73,703. Manhattan is the largest city in the county with a population of 54,959 (2018 Census estimate) that includes over 21,000 Kansas State University (K-State) students and a large number of Fort Riley soldiers and their families. Although agriculture plays a large role in the economy and culture of Riley County, the largest employers are Fort Riley (military and civilian employees) and K-State.

The following list summarizes the needs identified in the 2020 CHNA for Riley County.

#### **Physical Health**

- 1. Affordable health services
- 2. Affordable health insurance
- 3. Affordable prescriptions
- 4. Facilities for physical activity

<sup>&</sup>lt;sup>1</sup> United States Census Bureau, QuickFacts, Riley County, Kansas, downloaded on Jan. 14, 2020 from <a href="https://www.census.gov/guickfacts/fact/table/rileycountykansas.US/PST045219">https://www.census.gov/guickfacts/fact/table/rileycountykansas.US/PST045219</a>



5. Availability of healthcare specialists

#### Mental Health

- 1. Affordable mental health services
- 2. Affordable health insurance that includes mental health care
- 3. Addressing the stigmatization of those with mental health issues
- 4. Increased number of mental healthcare providers
- 5. High quality mental health services

## Children (birth to Age 12)

- 1. Child care for children 0-5
- 2. After school programs
- 3. Financial assistance to families
- 4. Parenting education/skills development
- 5. Bullying prevention

## Teens (13 to 18 years old)

- 1. Mental health care
- 2. Workforce training for teens
- 3. Financial skills training
- 4. Employment opportunities
- 5. Substance abuse prevention/treatment

#### Older Adults

- 1. Affordable housing
- 2. Affordable prescriptions
- 3. Independent living in the home
- 4. Medical care
- 5. Home health care options

## **About the Implementation Strategy**

## **Purpose of the Implementation Strategy**

Federal tax law set forth in the Internal Revenue Code section 501(r) requires hospital facilities owned and operated by organizations described in Code section 501(c)(3) to conduct a CHNA at least every three years. The federal tax law also requires the adoption of an Implementation Strategy that outlines plans to address some of the community health needs identified in the CHNA. This Implementation Strategy was prepared in order to comply with the federal laws and requirements, and describes AVCH-M's planned response to the needs identified through the fiscal year 2020 CHNA process.

#### **Process and Criteria**

Representatives from the Ascension Via Christi ministry and the hospital's leadership team in Manhattan used a prioritization process to select the Implementation Strategies. The Implementation Strategy process prioritized how well each of the identified health needs align to the Mission and expertise of AVCH-M, the availability of resources to make a measurable difference in responding to the identified need, and support from community-based organizations in executing solutions to address underserved populations. Health needs were prioritized and ranked based on the following criteria:



- Magnitude: the number of people impacted by the problem.
- Severity: the risk of morbidity and mortality associated with the problem.
- Inequities and Disparities: clear inequities and disparities that disproportionately impact the poor, underserved, and vulnerable.
- Leveraging Organizational Assets: AVCH-M can make a meaningful impact based off of existing partnerships, leadership, and/or hospital resources and programs.

## **Prioritized Needs**

#### Health needs that will be addressed

#### **Access to Care**

Access to high quality and comprehensive health care - including having affordable insurance and prescriptions, transportation, access to specialists, and local care options - is essential for maintaining a healthy and long life. Riley County's top identified physical health needs are affordable health services, affordable insurance, and affordable prescriptions. The Health Resources and Services Administration (HRSA) has designated Riley County a primary care and dental Health Care Shortage Area (HCSA) for the low-income population. Additionally, Kansas is not a Medicaid expansion state which severely limits the ability of low-income, disabled, and other vulnerable groups to receive and access care. Although most CHNA respondents indicated that they can access care when needed, low-income and other vulnerable populations may be disproportionately impacted by the lack of affordable insurance and health care options.

#### **Mental Health**

HRSA has designated Riley County a geographic HCSA for mental health providers. The top needs identified for mental health are affordable health insurance that includes mental health, affordable mental health services, and addressing mental health stigma. Riley County residents reported having higher rates (13.5%) of poor mental health days for 14 days or more in the past 30 days when compared with the state (11.4%). Certain social issues prevalent in Riley County - such as poverty, food insecurity, binge drinking, and discrimination - may impact the need for mental health services especially among vulnerable populations.

#### Parenting Education & Skills Development

Developing healthy habits for physical and mental health begins in childhood. Healthy habits are important for children to grow into resilient and thriving adults. Caregivers play an important part in the development of children by modeling healthy behavior and providing safe and nurturing environments to ensure young children thrive. The CHNA revealed that Riley County has higher rates of inadequate prenatal care (21.9%) compared to the State of Kansas (16.5%). More residents of Riley County are also participating in WIC (Special Supplemental Nutrition Program for Women, Infants, and Children) and



SNAP (Supplemental Nutrition Assistance Program). Community members also expressed concern over the affordability of childcare.

## **COVID-19 Response**

Although COVID-19 was not a health issue when the CHNA was conducted, it has become a top need for the community and local and state government. The COVID-19 pandemic has severely strained healthcare and public health, and has far reaching social and economic impacts. Healthcare resources have been limited, leaving many rural and underserved community hospitals and clinics unprepared. It is therefore important to prepare our current and future workforce through cross-training and preparedness, work with under-resourced healthcare facilities such Federally Qualified Health Centers and rural hospitals, collaborate with governmental agencies and community partners, and provide community-wide testing sites to limit the spread of COVID-19.

## **Implementation Strategies**

## Prioritized Need #1: Access to Care

**Goal:** Improve access to high quality and affordable health care for low-income and uninsured individuals.

**Strategy 1:** Advocate for Medicaid expansion for the State of Kansas.

**Resources:** AVC Advocacy Officer and AVC leadership team

**Collaboration:** Kansas Hospital Association, AMG Clinics, area hospitals and other health care providers

#### Actions:

- AVC Advocacy Officer will visit with all Riley County elected legislators in Topeka regarding Medicaid expansion annually until it is passed.
- One AVCH-M executive will make a presentation regarding the positive impact that Medicaid expansion has had in other states to a legislative committee in Topeka annually until it is passed.
- One AVCH-M executive will publish a Letter to the Editor in a Riley County newspaper outlining the positive impact that Medicaid expansion has had in other states until it is passed.

#### Anticipated Impact:

- Passage of Medicaid expansion will positively affect access to care, smarter utilization of health services, and increase the affordability of care among the low-income population.
- By June 30, 2023, the Kansas State legislature will pass Medicaid expansion.

**Strategy 2:** Encourage and help patients enroll in Medicaid and the Affordable Care Act insurance exchange program if not already insured.



**Resources:** Financial Counselors, Social Services

**Collaboration:** AVC, area hospitals and other health care providers (i.e., social workers)

#### Actions:

 Financial counselors, social workers, and other patient navigators will assess patients for eligibility, educate individuals about options, submit applications, and verify eligibility to complete the enrollment process.

## Anticipated Impact:

• Impact measurement: percent of eligible individuals guided through the process of enrolling in Medicaid or the Affordable Care Act insurance exchange program if not already insured.

**Strategy 3:** Expand access to healthcare specialists for neurology, pulmonology, and infectious disease.

**Resources:** AVC leadership team, Physician Recruitment

**Collaboration:** Ascension Medical Group (AMG) in Wichita, Specialty Associations, Graduate Medical Education programs

#### Actions:

- Compile and prioritize a list of healthcare specialists positions for neurology, pulmonology, and infectious disease.
- Develop a strategy to expand access to specialty providers through direct hiring, telemedicine partnerships, partnering with nearby providers (e.g., KU St. Francis), joint ventures, and/or helping local private practice specialists grow their provider pool.
- Collaborate with area providers to improve the continuum of care models for specialty care.

#### **Anticipated Impact:**

- Expand the pool of available healthcare specialists so more individuals can access specialty care in a timely manner.
- Impact measurement:
  - # of new community providers by specialty
  - o retention rate (percentage) of hospital Medical Staff for neurology, pulmonology, and infectious disease

#### Prioritized Need #2: Mental Health

**Goal:** Strengthen the capacity of mental health professionals and community partners to identify and respond to mental illness and substance abuse disorders.

**Strategy 1:** Arrange and pay for secure transportation of qualifying low-income individuals in need of transportation to a different hospital for specialized treatment that may not be available locally.



**Resources:** Security Transport Services

**Collaboration:** Area hospitals and behavioral health centers (e.g., Cottonwood Springs Behavioral, Stormont Vail Behavioral Health Center, VA Medical Center, Osawatomie State Hospital, etc.)

#### Actions:

- Hospital staff identify patients (e.g., uninsured, underinsured, VA, Medicaid, etc.) in need of secure transportation.
- Hospital staff identifies location for specialized treatment and arranges transport of patients with Security Transport Services.
- Security Transport Services safely transports patients to identified centers and reports in CBISA.

## Anticipated Impact:

- Individuals in need of specialized mental and behavioral health services are able to access the help they need in a timely manner.
- Impact measurement: # of secured transports provided for vulnerable persons in need of specialized behavioral health treatment

**Strategy 2:** Expand access to mental/behavioral health providers.

**Resources:** AVC leadership team, Physician Recruitment

**Collaborations:** Wichita State University PA and APRN programs, Newman University, Ascension Medical Group in Wichita, Telemedicine Partnerships (e.g., Freestate)

#### Actions:

- Develop a strategy to increase access to mental health providers through direct hiring, telemedicine, joint ventures, and/or other partnerships with area providers.
- Physician Recruiters will actively recruit and hire one advanced practice provider for AVCH-M.
- Collaborate with area providers to improve the continuum of care models for mental and behavioral health.

#### **Anticipated Impact:**

- Increase the capacity and healthcare workforce to provide behavioral health services.
- Improve continuum of care models to ensure access and utilization of mental health services.
- Impact measurement: # of new advanced practice providers over the two current providers



## Prioritized Need #3: Parenting Education & Skills Development

Goal: Improve the knowledge and skills of caregivers to provide safe, nurturing, and loving environments for infants and children to thrive.

**Strategy:** Encourage residents to take advantage of caregiver classes offered by Ascension Via Christi Hospitals in Manhattan and Wichita. Courses include Daddy Basics, Breastfeeding Basics, Safe Sitters, and First Aid for Children.

Resources: Ascension Via Christi Birth & Women's Center

**Collaboration:** Ascension Via Christi Hospitals in Wichita

#### Actions:

- Identify a lead associate for this strategy.
- Recruit participants for virtual or in-person classes.
- Conduct surveys with participants.
- Report survey results.

#### **Anticipated Impact:**

- Increase prospective parents and caregivers' knowledge and understanding of pre-and-postnatal care.
- Impact measurement: # of caregivers by class
- Due to COVID-19, this Strategy will be implemented virtually and counted in Ascension Via Christi St. Joseph numbers until classes can resume locally in a face-to-face format.

## Prioritized Need #4: COVID-19 Response

Goal: Ensure community members have timely access to testing and care to prevent and reduce morbidity and mortality from COVID-19.

Strategy: Improve collaboration across the state between government agencies, nonprofits and community organizations, and healthcare facilities to improve the COVID-19 response.

#### Resources:

- 24/7 Emergency Department within a hospital setting
- Intensive care providing supportive treatment for the sickest patients
- Leveraging telemedicine technologies for treatment and follow-up for patients to reduce ongoing exposure
- Community testing initiatives to understand disease penetration into communities

Collaboration: City, County and State government officials, Wamego Health Center and other area hospitals and clinics



#### Actions:

- Collaborate with city, county, and state government officials, community organizations,
  Critical Access Hospitals, recovery task force, and other area rural hospitals and clinics for COVID-19 response and preparedness.
- Share resources, donate PPE and other medical supplies, and provide expertise to FQHCs and rural healthcare facilities to ensure underserved communities have access to testing and care.
- Provide training and professional development for clinical and non-clinical staff for the COVID-19 response, including preparedness, cross-training, and providing surge support.
- Support community-wide COVID-19 education, testing, and vaccination events.

## Anticipated Impact:

- Impact measurement:
  - # of hours spent coordinating and collaborating with external partners
  - # of people tested during community-wide COVID-19 testing and vaccination events
  - # and type of medical supplies donated
  - # of hours spent providing training and professional development for COVID-19 preparedness

#### **Measurement and Evaluation**

The Community Benefit Inventory for Social Accountability (CBISA) data entry software, developed by Lyons Software, will be used to capture Community Benefit data and activities. CBISA allows AVCH-M to comprehensively measure the organization's impact on the community. To ensure accountability, selected indicators and data will be collected on each strategy listed in the Implementation Strategy. The data will be aggregated into an annual Community Benefit report that will be made available to the community.

## Health needs not being addressed

Based on the prioritization criteria, the health needs identified through the CHNA that AVCH-M does not plan to address at this time include:

## **Physical Health**

- 1. Affordable prescriptions
- 2. Facilities for physical activity

#### **Mental Health**

- 1. Affordable health insurance that includes mental health care
- 2. Addressing the stigmatization of those with mental health issues

## Children (birth to Age 12)

- 1. Child care for children 0-5
- 2. After school programs
- 3. Financial assistance to families
- 4. Bullying prevention



## Teens (13 to 18 years old)

- 1. Mental health care
- 2. Workforce training for teens
- 3. Financial skills training
- 4. Employment opportunities
- 5. Substance abuse prevention/treatment

#### **Older Adults**

- 1. Affordable housing
- 2. Affordable prescriptions
- 3. Independent living in the home
- 4. Home health care options

To find a list of resources for each need not being addressed, please refer to the AVCH-M CHNA: https://healthcare.ascension.org/CHNA. While these health needs are not the focus of this Implementation Strategy, AVCH-M may consider investing resources in these areas as appropriate, depending on opportunities to leverage organizational assets in partnership with local communities and organizations. This report does not encompass a complete inventory of everything AVCH-M does to support health within the community.