Ascension Via Christi Hospital in Manhattan

Implementation Strategy for the 2023 CHNA
Riley County, Kansas
The purpose of this implementation strategy is to describe how the hospital plans to address the prioritized needs from its current Community Health Needs Assessment. The significant needs that 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 who are marginalized, unmet health needs or gaps in services, and input gathered from the community.

Ascension Via Christi Hospital Manhattan, Inc
1823 College Avenue, Manhattan, KS 66502
https://healthcare.ascension.org
EIN: 48-1186704

The 2023 Implementation Strategy was approved by the Ascension Via Christi Hospital Manhattan, Inc. Board of Directors on April 19, 2023 (2022 tax year), and applies to the following three-year cycle: July 1, 2023 to June 30, 2026. This report, as well as the previous report, can be found at 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.
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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 persons living in poverty and those most vulnerable.

Ascension Via Christi Hospital in Manhattan

As a Ministry of the Catholic Church, Ascension Via Christi Hospital in Manhattan (AVCH-M) is a non-profit hospital governed by a local board of trustees represented by residents, medical staff, and sister sponsorship's, and provides medical care to Riley County and surrounding areas. Serving northeastern Kansas since 1996, AVCH-M is continuing the long and valued tradition of addressing the health of the people in our community. AVCH-M is an acute care facility licensed to operate 150 beds in one hospital serving Manhattan, Kansas, and employs 500 associates and more than 50 volunteers.

For more information about AVCH-M, visit ascension.org/manhattanKS.

Overview of the Implementation Strategy

Purpose

This implementation strategy (IS) is the hospital’s response to the prioritized needs from its current Community Health Needs Assessment (CHNA). It describes the actions the hospital will take to address prioritized needs, allocate resources, and mobilize hospital programs and community partners to work together. This approach aligns with AVCH-M's commitment to offer programs designed to address the health needs of a community, with special attention to persons who are underserved and vulnerable.

IRS 501(r)(3) and Form 990, Schedule H Compliance

The CHNA and IS satisfy certain requirements of tax reporting, pursuant to provisions of the Patient Protection and Affordable Care Act of 2010, more commonly known as the Affordable Care Act (ACA). As part of the ACA, all non-profit hospitals are required to conduct a CHNA and adopt an implementation strategy every three years. Requirements for 501(c)(3) Hospitals Under the Affordable Care Act are described in Code Section 501(r)(3), and include making the CHNA report (current and previous) widely available to the public. In accordance with this requirement, electronic reports of both the CHNA and the current implementation strategy can be found at https://healthcare.ascension.org/CHNA and paper versions can be requested at Ascension Via Christi Hospital in Manhattan located at 1823 College Avenue, Manhattan, KS 66502.
Process to Prioritize Needs

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 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, AVCH-M used a phased prioritization approach to identify the needs for Riley County. The first step was to determine the broader set of identified needs through key informant interviews and secondary data analysis. Through the CHNA assessment, identified needs were then narrowed to a set of significant needs which were determined most crucial for community stakeholders to address. The significant needs for Riley County included: Health Equity, Access to Care, Food Security, Housing and Transportation, Diet and Exercise - Obesity, and Alcohol and Drug Use.

Following the completion of the CHNA assessment, significant needs were further narrowed down to a set of prioritized needs that the hospital will address within the implementation strategy. The criteria used to prioritize the significant needs were:

- Alignment with organizational strengths and priorities
- Ability to leverage organizational resources and assets
- Existing community resources and partnerships to address the problem
- Feasibility of change and availability of tested approaches

Needs That Will Be Addressed

Based on the prioritization criteria, AVCH-M leadership has selected the prioritized needs outlined below for its 2023 Implementation Strategy. Ascension has defined “prioritized needs” as the significant needs which have been prioritized by the hospital to address through the three-year CHNA implementation strategy:

- Access to Care - This need includes access to general health care services as well as mental and behavioral health services. This need was selected because it aligns with the organizational mission, strengths, and priorities. AVCH-M is able to leverage organizational resources and partnerships to address access to care within the Riley County community.
- Food Security - This need was selected because AVCH-M can leverage organizational resources and partnerships to provide food to those in need.
- Transportation - This need was selected because transportation services is a need AVCH-M is already addressing. AVCH-M has the resources and capacity to provide specific medical-related transportation, develop community partnerships, and provide in-kind donations of transportation services to transport individuals to/from health care appointments and services.

AVCH-M understands the importance of all the needs of the community and is committed to playing an active role in improving the health of the people in the communities it serves. For the purposes of this implementation strategy, AVCH-M has chosen to focus its efforts on the priorities listed above.
Needs That Will Not Be Addressed
Based on the prioritization criteria, the significant needs that AVCH-M does not plan to address at this time include:

- Health Equity - This need was not selected since health equity is a part of a deeper systemic issue that AVCH-M does not have the expertise nor resources to address within the broader community. Others in the community have the intellectual and resource capabilities to address health equity within the broader community. However, the health system is committed to train associates to provide culturally competent care and will continue to look at opportunities to develop strategic partnerships to eliminate barriers for community members to live long, healthy lives.
- Housing - This need was not selected because AVCH-M does not specialize nor has the resources to address housing issues. AVCH-M executives do participate in many community coalitions and boards to address the social determinant of health such as housing issues within the community, and will continue to look for opportunities to partner to address the most pressing needs within the community.
- Alcohol and Drug Use - This need was not selected because there is an overall shortage of substance abuse services in the community. AVCH-M does not have the capacity nor resources to provide comprehensive substance abuse programs. AVCH-M will continue to work with local organizations to improve interagency coordination and advocate for more resources to address substance abuse issues within the community.
- Diet and Exercise - Diabetes - Although AVCH-M provides diet and exercise programs to patients based on diagnosis and treatment plans, AVCH-M does not have programs for the broader community. Many other community organizations, public health departments, and health centers provide programs (e.g. Diabetes Prevention Program) for the general community.

While these 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. Also, this report does not encompass a complete inventory of everything AVCH-M does to support health within the community.

To find a list of resources for each need not being addressed, please refer to the AVCH-M’s 2023 CHNA: [https://healthcare.ascension.org/CHNA](https://healthcare.ascension.org/CHNA).

Acute Community Concern Acknowledgement
A CHNA and IS offer a construct for identifying and addressing needs within the community it serves. However, unforeseen events or situations, which may be severe and sudden, may affect a community. At Ascension, this is referred to as an acute community concern. This could describe anything from a health crisis (e.g., COVID-19), water poisoning, environmental events (e.g., hurricane, flood) or other event that suddenly impacts a community. In which case, if adjustments to an IS are necessary, the
hospital will develop documentation, in the form of a SBAR (Situation-Background-Assessment-Response) evaluation summary, to notify key internal and external stakeholders of those possible adjustments.

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 by Ascension Via Christi Hospital Manhattan, Inc.’s Board of Directors

To ensure the AVCH-M’s efforts meet the needs of the community and have a lasting and meaningful impact, the 2023 Implementation Strategy was presented and adopted by the AVCH-M Board of Directors on April 19, 2023. Although an authorized body of the hospital must adopt the IS to be compliant with the provisions in 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 hospitals’ most recent CHNA. These strategies and action plans represent where the hospitals will focus community efforts over the next three years. While these remain a priority, the hospital will continue to offer additional programs and services to meet the needs of the community, with special attention to those who are marginalized.

Prioritized Need: Access to Care

Goal 1 - Access to Health Care Services: Improve access to high quality and affordable healthcare for underserved communities.

<table>
<thead>
<tr>
<th>Strategy 1: Advocate for policies that will improve health outcomes and access to health care.</th>
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<tbody>
<tr>
<td><strong>Hospital:</strong> AVCH-M</td>
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<tr>
<td><strong>Objective:</strong> Develop an annual policy agenda to support bills that further improve access to health care and health outcomes.</td>
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<tr>
<td><strong>Target Population:</strong></td>
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<tr>
<td>● Low-income</td>
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<tr>
<td>● Children, pregnant women, and elderly</td>
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<tr>
<td>● People with disabilities</td>
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<tr>
<td>● Underinsured and uninsured</td>
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<tr>
<td><strong>Collaboration:</strong></td>
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<tr>
<td>● Other Ascension hospitals: Ascension Via Christi Health</td>
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<tr>
<td><strong>Resources:</strong></td>
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<tr>
<td>● Ascension hospitals: people, advocacy</td>
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<tr>
<td><strong>Actions:</strong></td>
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<tr>
<td>● Develop an annual policy agenda that supports increased access to medical insurance and health care (e.g., Medicaid expansion, increasing the healthcare workforce, and funding for mental health services), reduces barriers to access health care, improves health equity, and addresses the social determinants of health</td>
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<tr>
<td>● Track bills related to the policy agenda</td>
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<td>● Visit with elected legislators at local and state levels</td>
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<td>● Advocate for bills, resources, and funding that align with the policy agenda</td>
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<tr>
<td><strong>Outcome/Output:</strong></td>
</tr>
<tr>
<td>● Types of bills tracked and supported (e.g., Medicaid expansion) and opposed (e.g., decreased access to needed services)</td>
</tr>
<tr>
<td>● # bills tracked</td>
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<tr>
<td>● # bills supported/opposed</td>
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**Anticipated Impact:** Improve access to insurance and health care services (including mental health), utilization of health services, and the affordability of care.

**Strategy 2:** Assist eligible patients and their dependents with applications for public insurance programs.

**Hospital:** AVCH-M

**Objective:** Assist qualifying uninsured and underinsured individuals and their dependents enroll in public programs by June 30, 2026.

**Target Population:**
- Low-income adults, children, pregnant women, and elderly
- People with disabilities
- Underinsured and uninsured

**Collaboration:**
- Collaborators: R1 Financial Counselors

**Resources:**
- Ascension hospitals: social workers and other patient navigators to screen patients and provide referrals to R1
- Collaborators: Financial Counselors, assistance with applications and eligibility

**Actions:**
- Financial counselors, social workers, and other patient navigators will assess patients for eligibility
- Educate individuals about public program (e.g., Medicaid, disability, Temporary Assistance for Families program) options and eligibility
- Provide referrals to Early Detection Works and hospital financial assistance program
- Assist with application submission and verify eligibility to complete the enrollment process

**Outcome/Output:** # of enrollments per public benefit

**Anticipated Impact:** Increase utilization of preventative care, improve accessibility of care, and provide affordable insurance options to individuals and their dependents.

**Prioritized Need: Transportation**

**Goal 2:** Improve health outcomes by addressing barriers related to transportation for health care services.

**Strategy:** Provide transportation for individuals who are otherwise unable to get to health care appointments.
## Hospital: AVCH-M

### Objective:
Improve coordination and collaboration of transportation services for health care services and appointments.

### Target Population:
- Homeless
- People without transportation methods or unable to drive
- Under/uninsured

### Collaboration:
- Collaborators: area hospitals and other healthcare providers

### Resources:
- Ascension hospitals: people to provide communication/coordination, transportation services
- Collaborators: people to provide communication/coordination, health care (including mental health) services

### Actions:
- Work with area hospitals, clinics, nonprofit organizations, and community partners to improve collaboration and coordination of transportation services between organizations
- Screen patients for transportation barriers and refer to AVCH-M hospital transportation services
- Provide transports for eligible patients to area health care services

### Outcome/Output:
# of transports provided

### Anticipated Impact:
Reduce transportation barriers to obtaining timely health care services.

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### Prioritized Need: Food Security

#### Goal 3: Improve access to healthy and affordable food options.

#### Strategy 1: Support area agencies addressing food insecurity through in-kind donations of food, cash, or volunteer hours.

### Hospital: AVCH-M

### Objective:
Increase access to food for those in need.

### Target Population:
- Low-income adults, children, pregnant women, and elderly
- Home-bound
- Homeless

**Collaboration:**
- Collaborations: Area agencies providing food banks, kitchens, and volunteer opportunities (e.g., Neighbor to Neighbor)

**Resources:**
- Ascension hospital: volunteers, in-kind donations of food and/or cash
- Collaborators: people, distribution networks, facilities, outreach, volunteer opportunities

**Actions:**
- Identify area agencies that provide food to those in need
- Provide in-kind donations of food, cash, and/or staff volunteers
- Promote volunteer opportunities and food drives

**Outcome/Output:**
- # volunteer hours
- Dollar amount of cash donated
- # donated food goods

**Anticipated Impact:** Reduce barriers for community members who may have difficulty accessing food.

**Strategy 2: Connect patients to area agencies that assist with social needs (e.g., rent/utilities assistance, food assistance programs, housing).**

**Hospital:** AVCH-M

**Objective:** Decrease barriers to accessing food programs for qualifying community members by June 30, 2026.

**Target Population:**
- Low-income
- Underinsured and uninsured
- Persons in need of non-medical assistance (e.g., food, shelter, utility assistance)

**Collaboration:**
- Collaborators: Neighborhood Resource (aka Find Help)

**Resources:**
- Ascension hospital: screening, people, referral systems, community connections
- Collaborators: Neighborhood Resource platform

**Actions:**
- Screen patients for non-medical and social needs (i.e., social determinants of health)
- Refer patients to food assistance programs, food banks, and kitchens
- Refer patients to other needs such as housing, utilities and rent assistance
- Follow-up to ensure referral and follow-up occurred

### Outcome/Output:
- # referrals to public programs (e.g., WIC, SNAP, housing, rental and utility assistance)
- # referrals to food assistance programs
- # referrals to food banks, kitchens, and other organizations that provide food

### Anticipated Impact:
Reduce barriers for community members who may have difficulty accessing food.

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## Evaluation

AVCH-M will develop a comprehensive measurement and evaluation process for the IS. AVCH-M will monitor and evaluate the action plans for the purpose of reporting and documenting the impact these action plans have on the community. AVCH-M uses a tracking system to capture community benefit activities and implementation. To ensure accountability, data will be aggregated into an annual Community Benefit report that will be made available to the community.