Via Christi Hospital – Pittsburg
Implementation Strategy Plan and
Community Health Improvement Plan
2018 -2020
(Approved by Board of Directors September 11, 2017)

Introduction

This document is the written Implementation Strategy Plan (ISP) and Community Health Improvement Plan (CHIP) for Via Christi Hospital – Pittsburg (VCH-P) to address the community health needs in Crawford County Kansas. This plan follows the format suggested by the Catholic Health Association in its publication Developing an Implementation Strategy. It also draws from the 2017 Southeast Kansas Health Committee Community Health Assessment & Community Health improvement Plan developed in 2016 and 2017 by health representatives in six counties of Southeast Kansas.
https://www.viachristi.org/sites/default/files/pdf/about_us/VCH-P%202017%20CHNA%200052017.pdf

Hospital 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.

Description of Via Christi Hospital Pittsburg

Via Christi Hospital in Pittsburg is accredited by the Joint Commission on Accreditation of Healthcare Organizations and holds memberships in the American Hospital Association, the Kansas Hospital Association and the Catholic Health Association. Via Christi Hospital Pittsburg is currently training associates for our hospital to become a High Reliability Organization to increase safety for patients, visitors and employees.

Via Christi Hospital Pittsburg, Inc. (VCH-P) and its affiliates enrich the communities in which they operate as well as the broader community, improving medical care through research, educating nursing students and other health care providers, and providing care and support to people in need. VCH-P further supports this mission with a community board, open medical staff, and an emergency room available to patients regardless of ability to pay.
Service to the poor is a primary value at Via Christi Hospital in Pittsburg providing $7.2 million in community benefit, including $3.4 million in charity care, and $3.4 million in unpaid costs of Medicaid services. Some examples of ways VCH-P contributes include:

- Partnership with the Community Health Center of Southeast Kansas to share the expertise of cardiac specialists,
- Infant and child safety car seat free installations,
- Annually welcomes nursing, laboratory and radiology students for field placement assignments to fulfill graduation requirements,
- CareVan Program which assists elderly and physically challenged with transportation to and from medical appointments.

**Hospital Features**

- A comprehensive Cancer Center, fully certified by the American College of Surgeons (ACOS) and the only cancer center in the region to receive all eight out of eight commendations from the ACOS Committee on Cancer.
- 40,000-square-foot Surgery Center that includes state-of-the-art technology, including robotic-assisted, minimally invasive surgeries with the da Vinci Robotic Surgical System.
- Dr. M.K. Parsi Women's Center, which includes a level II nursery and central fetal monitoring system.
- Via Christi Heart Center, which, supported by our newly renovated $2.6 million Cardiac Step Down Unit, features a state-of-the-art catheterization lab
- Emergency Room, which is recognized as a Level III Trauma Center by the Committee on Trauma of the American College of Surgeons
- Extensive specialty service lines, which include diagnostics, surgery, physical therapy and occupational health.
- Pulmonology
- Primary Care Clinic joint venture with Mercy
- DSME (Diabetes Self-Management Education)
- Smoking Cessation Classes
- Heart Failure Self-management Education

**The Community Served**

(The following information and regional health assessment data is taken from “2017 Southeast Kansas Health Committee Community Health Assessment & Community Health improvement Plan”)

The total population of the SEK Region is just below 120,000. The two largest counties in the region are Crawford and Montgomery both with a population just below 40,000. Elk has the smallest population of 2,720. With the exception of Crawford, all of the counties decreased in population according to the 2001 Census data. Crawford County saw a 2.9% increase in population.
The Lower 8 Public Health Region of Southeast Kansas (Chautauqua, Cherokee, Crawford, Elk, Labette, Montgomery, Neosho & Wilson) was formed in 2002. Originally, this region was formed to address bioterrorism, however, after several natural disasters occurred throughout the region, it was determined that the Lower 8 could broaden its scope to include the ten essential services of public health in each county. The Lower 8 Region has a solid foundation and strong history of collaboration. However, through the previous community health assessment, some communities found they were more successful if the community health assessments were completed at the local level. Therefore, the Southeast Kansas Health Committee was formed from the remaining counties of Chautauqua, Cherokee, Crawford, Elk, Montgomery, and Neosho to complete a regional community health assessment and community health improvement plan. It is important to note that this community health assessment has a threefold objective: 1) Meet the needs of the participating hospitals 2) Meet the needs of participating local health departments 3) Meet the needs of the Blue Cross Blue Shield Pathways Grant. Due to this threefold objective, this assessment will contain an increased number of data sets. It was felt that by combining these surveys, the community would be more likely to participate rather than completing three separate surveys.

The region consists of two semi urban counties, two rural counties, and two frontier counties. Frontier counties are challenged to find available data for their community due to their size, and when the data is available there is a marked potential for the data to have a high rate of variability. For the frontier counties the regional data would be more consistent and reliable. Staffing is always a challenge in smaller health departments. Consolidation of staff for the completion of the community health assessment would not only reduce the workforce burden on all of the SEK region counties, but it would also assist with the financial burdens. Therefore, it was felt that we could consolidate our workforces, save money, save time, and have a larger impact in our region. At the same time, several counties desired to see their data at the county level as well so they could utilize the data at the local level. Therefore it was decided to complete the community health assessment as a region, but maintain individual county data to assist counties that would like to address issues more specific to their county.

Crawford County is a county located in Southeast Kansas. As of the 2010 census, the county population was 39,134. As of the 2000 census, there were 38,242 people, 15,504 households, and 9,441 families residing in the county. The racial makeup of the county was 93.29% White, 1.83% Black or African American, 0.94% Native American, 1.11% Asian, 0.09% Pacific Islander, 1.11% from other races, and 1.63% from two or more races. Hispanic or Latino of any race were 2.38% of the population. 23.5% were of German, 12.5% American, 10.4% English, 10.2% Irish and 8.6% Italian ancestry according to Census 2000.

https://en.wikipedia.org/wiki/Crawford_County,_Kansas#Demographics
The median income for a family in the county was $55,243. The per capita income for the county was $20,346. 21.96% of the population was below 100% Federal Poverty Level including 20.01% of those under age 18. 45.25% of the population lives below 200% Federal Poverty Level. 13% adults and 4.89% children have no health insurance. An estimated 20.9% of adults age 18 or older self-report currently smoking cigarettes some days or every day.


**How VCH-P Implementation Strategy Was Developed**

The VP of Mission, Director of Infection Control and Director of Quality/Risk Management participated in the assessment and planning with the Crawford County Health Department and representatives from health care in five other counties (Chautauqua, Cherokee, Crawford, Elk, Montgomery, and Neosho). The Hospital Mission Council was given the responsibility to develop a hospital specific Community Health Improvement Plan (CHIP) or Implementation Strategy Plan (ISP). The council consulted with the Crawford County Health Department, Kansas State University Extension and the Crawford County Community Health Coalition. Internally, the Mission Council welcomed multidisciplinary participation. A review of past and current activities was done as well as brainstorming about other possible activities to better respond to the identified community needs.

**Four Community Identified Strategic Issues**

The 2018 Community Health Needs Assessment identified 4 priority needs:

1. Chronic Disease
2. Mental health
3. Substance abuse
4. Obesity.

**Via Christi has had ongoing contributions toward these priorities including:**

**Cancer Support Group** provides patients, families, caregivers, and community - a support system when diagnosed with cancer. Various topics are presented at each group. **Lunch & Learn** - Education on health related topics.

**Smoking Cessation** Meetings and inpatient consults are to educate the community and patients of the detrimental effects of tobacco to them and effects of second hand smoking.

**Cancer Screening** are held for Breast (examination), Cervical (exam & Pap smear), Prostate (PSA and exam). Skin (exam), Oral exam, colorectal (hemoccult kits).
**Specialty Care** – Cardiology VCH-P physicians have stepped up to partner with the Community Health Clinic of SE KS to provide specialists at their clinics during normal work hours so that Medicaid and low-income patients have access to both primary and specialty care.

**Literature** - Via Christi provides health information to audiences on community health education programs, health information resources and free community events (not marketing materials).

**Speakers Bureau** - VCH makes presentations to high school and/or college classrooms or other community groups "offsite" on disease prevention, wellness topics and/or other health related (non-employment) topics.

**PATH** - Personal Actions to Health provides a community-wide health and wellness program opportunity for older adults. This state-wide program started in the mid 90's as a joint effort between K-State Research & Extension and the Kansas Health Foundation.

**Medical Mission @ Home** - Providing free cardiology screening, rehab and lab screening, breast exams and pulmonary screening.

**Via Christi Behavioral Health** - Via Christi Behavioral Health outpatient services allow patients to engage in effective treatment with the least disruption to job schedules and family. The staff is experienced in working with children, adolescents, adults, seniors and families. They provide many levels of care, with specialized programming for most behavioral health problems.

**Diabetes education** - Provides information about how one can live with diabetes, and how blood glucose testing and daily activities can increase the sense of well-being and improve health.

**Community Wellness** - Provide facility and supervision of exercise and activities for people with limited mobility, primarily adults, frail elderly, and post rehab patients. Nutrition and weight counseling and education.

**Assisted by other providers**

Via Christi Hospital Pittsburg has its strength in addressing Chronic disease and acute care needs. We are fortunate to have other local providers more equipped to address Mental Health and Drug Abuse. Among them are:

**Community Health Center of Southeast Kansas** is committed to holistic health and offers behavioral health services to help patients live happier, healthier and more hopeful lives. Services include:

- Individual Counseling
- Couples Counseling
- Testing
- Medication Assessments and Management
CHC/SEK recognizes that addiction is a chronic disease and like many diseases, one solution doesn’t fit all. The goal of addiction treatment at CHC/SEK is lifelong recovery for each individual. Program integrates medical and mental health care, bringing together multiple specialists to develop and administer a customized treatment plan.

Addiction Program Services

- Screening/Evaluation/Assessment
- Individualized treatment planning
- Group counseling
- Individualized and family counseling sessions
- Care management
- Relapse prevention
- Referral to other treatment and community resources
- Drug screens when required
- Coordination with personal medical providers, therapist, EAP, MCO or employer

http://chcsek.org/our-services/mental-health/

Crawford County Mental Health

**CASE MANAGEMENT + CONTINUING CARE**

Case Management is a consumer-focused program based on the strengths perspective. Case management services in the addiction field are a set of services offered to assist the recovery person in accessing and coordinating community resources that would support their abstinence from alcohol and other drugs. Case management services facilitate the consumer’s recovery and provides Continuing Care to men and women completing reintegration or day treatment programs. Consumers are offered a combination of group therapy and education to furnish them with tools for future success.

**INTERMEDIATE TREATMENT – ATC**

Intermediate Treatment provides a regimen of structured services in a 24-hour residential setting. They are housed in the Addiction Treatment Center where they can reside safely. For the typical resident in an intermediate treatment program, the effects of the substance abuse on the individual’s life are so significant, and the resulting level of impairment so great, that a less intensive modality of treatment is not feasible or effective. This program consists of individual, group, and/or family counseling, life skills, recreational groups, and self-help support meetings.

**OUTPATIENT TREATMENT**

Outpatient Treatment is designed to help individuals achieve changes in their substance abuse behaviors. Treatment shall address an individual’s major lifestyle, attitudinal and behavioral problems that have the potential to undermine the goals of treatment. This program consists of group, individual and/or family counseling.
WOMEN’S & CHILDREN REINTEGRATION
Reintegration provides 24-hour residential living of a supportive nature for recovering alcoholics and/or drug dependent women and their children. Residents benefit from a structured program of individual and group counseling, recreational and social activities, milieu therapy and case management services. Reintegration treatment assists women and their children in crossing the bridge of treatment back to the community, once stabilized in their recovery.

Adult services Services are designed to enable people with severe and persistent mental illness to remain in their home community.

Attendant care A supportive service that is provided on an individual basis per consumer’s needs. This can be 1 hour to 24 hours per day if necessary. Prevention of hospitalization or out-of-home placement is implicit.

Case management A consumer-focused program, which is based on the strengths perspective. Case management is a medically indicated service to link consumers with resources in the community. Consumers identify their own goals and objectives.

Comprehensive assessment Initial assessment and documentation including a clinical interview Crisis intervention staff is available as needed for crisis intervention day or night, weekday, weekend, and holidays.

Emergency services Save-line crisis intervention service which provides 24-hour emergency telephone line response with masters level clinicians available 620-232-SAVE

http://www.crawfordmentalhealth.org/services-2/adult-services/

Girard Medical Center’s Senior Behavioral Health offers assistance to people (age 55 years and older) who are struggling to cope with emotional or behavioral issues often related to aging. Retirement years should be a time to enjoy family, hobbies, travel etc., however, stressors like declining health, loss of loved ones and transitioning through changing roles can quickly accumulate and become overwhelming.

Structured Outpatient Program includes:

- Lack of Energy or Motivation
- Avoiding Family and Friends
- Constant Worrying
- Difficulty Sleeping
- Poor Appetite
- Confused Thinking
- Feelings of Sadness or Loneliness
- Loss of Interest in Daily Activities
• Low Self-Esteem
• Change in Temperament
• Debilitating grief reaction

*Senior Behavioral Health Inpatient Care* is tailored for more acute symptoms like:

• Thoughts of harming self or others
• Hallucinations/Delusions/Confusion
• Destructive/Aggressive Behavior
• Negative side effects of medication

[https://www.girardmedicalcenter.com/vnews/display.v/SEC/Senior%20Behavioral%20Health%20Services%7CAbout%20Us](https://www.girardmedicalcenter.com/vnews/display.v/SEC/Senior%20Behavioral%20Health%20Services%7CAbout%20Us)

**Via Christi Behavioral Health** in Pittsburg, Kansas offers a complete range of services for those experiencing mental and behavioral health issues.

Behavioral Health outpatient services allow patients to engage in effective treatment with the least disruption to job schedules and family.

Staff is experienced in working with children, adolescents, adults, seniors and families. We provide many levels of care, with specialized programming for most behavioral health problems including:

• Family issues
• Anxiety disorders
• Anger management
• Attention deficit disorder
• Bipolar disorders
• Schizophrenia
• Depression
• Eating disorders
• Oppositional and defiant behavior
• Obsessive-compulsive disorder
• Post-traumatic stress disorder
• Sexual abuse
• Suicidal behaviors
• Grief
• Panic disorders

Priority #1 Chronic Disease/Healthy Behavior

County Plan: Provide personalized education to empower the citizens in our communities to prevent and manage chronic disease through accountability and environmental and cognitive changes.

Background: The priority issue began as chronic disease, and the group defined chronic disease as heart disease/stroke, diabetes, cancer and smoking. The region was higher in age adjusted heart disease mortality rates than the state rate with the region rate of 200.9 per 100,000 people compared to the state rate of 156.4. This was also true of the cancer diagnosis rate of 8.6% in the region compared to the state rate of 7.1% The diabetes diagnosis rate is also of concern to the region as the regional value is 13% compared to the state rate of 9.7%. In addition, the adult smoking rate for the region is 23.2% compared to the state rate of 17.8%. It was determined the best way to reduce heart disease, diabetes, and strokes would be to empower the individuals to manage their own chronic disease. Through chronic disease self-management education courses, individuals can feel empowered to control their health outcomes.

VCH-P Goal #1: Increase community awareness of Type 2 Diabetes risk factors

STRATEGY: Partner with key community entities in utilizing the CDC/ADA Diabetes Risk Test and an Ascension developed toolkit to promote awareness of Type 2 diabetes risk factors.

Objective: By end of FY18 participate with community agencies in at least 4 educational events.

Action: Hospital staff volunteers will attend meetings with Crawford County Live Well task forces: Age Well, Breath Well, Eat Well, Live Active, and Work Well

Action: Collaborate with chamber of commerce and other businesses to provide educational talks in businesses as well as other community events utilizing CDC diabetes risk test

Action: Present need for more Diabetes awareness to physicians and encourage physicians to increase referrals to Diabetes Self-Management Education (DSME) and Diabetes Prevention Programs (DPP).

Indicators: Attendance at Live Well meetings, Risk tests completed, participants in DSME and PPD

Resources: Staff time in meetings and events, education materials and risk tests
Priority #2 Mental Health

County Plan: Provide training to medical providers and staff to be onsite screeners for early intervention for mental health issues.

Background: Mental Health was chosen by forty percent of the survey respondents when asked what is an important factor for a healthy community. Mental health concerns affect the community economically, socially, and culturally.

VCH-P Goal #2: Provide earlier intervention for mental health issues

Strategy: Enable more staff screen for mental health issues

Objective: By end of FY 18 educate social workers, chaplains, to intervene and triage mental health issues.

   Action: Provide Mental Health First Aid Training (MHFA)
   Action: Compile accurate current list of referral sources
   Action: Distribute referral lists to front line staff and discuss at Skills Fair
   Action: Utilize Via Christi Human Trafficking Assessment Protocol and education

Indicators: Staff trained in Mental Health First Aid, referrals made, Participation in Human Trafficking education events.

Resources: Staff time

Strategy #3 Alcohol/Drug Use

County Plan: Train medical providers in Screening, Brief Intervention, and Referral to Treatment (SBIRT) to enhance the early identification and referral of early substance abuse.

Background: Alcohol and drug abuse was chosen by the survey respondent as an issue in their community. Crawford, Cherokee and Neosho counties are above the state rate of 15.6% for binge drinking. In addition, Cherokee, Montgomery and Neosho counties are higher than the state rate of 11.3% per hundred thousand for drug poisoning.

VCH-P Goal #3: Provide earlier intervention for alcohol/drug abuse

Strategy: Enable more staff screen for alcohol/drug abuse

Objective: By end of FY18 educate social workers and chaplains to intervene and triage alcohol and drug abuse
Action: Provide access to SBIRT on line
Action: Compile accurate current list of referral sources
Action: Distribute referral lists to front line staff and discuss at Skills Fair

**Indicators:** Staff trained in SBIRT, referrals made,

**Resources:** Staff time
http://ireta.org/online-training/

**Priority #4 Obesity**

**County Plan:** Implement community outreach initiatives to address health factors leading to obesity.

**Background:** The survey respondents selected being overweight as one of the most important risky behaviors. Core profile indicators show that all counties in the Southeast Health Committee region are significantly higher than the Kansas rate of 34.2%.

Crawford County did not have a separate plan for obesity but included it under Priority #1 Chronic Disease. The priority of obesity will be addressed through our Goal on Diabetes awareness and our involvement with Crawford County Live Well.

**Needs That Will Not Be Addressed**

All four prioritized needs will be addressed.

To see complete Community Health Needs Assessment go to:


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