

Community Health Needs Assessments

Process and Examples

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Overview

1. Introduce the Health Research Center team
2. Community Health Needs Assessment
3. Describe our CHNA philosophy
4. Provide an example of our CHNA process (WVU Medicine/Camden Clark Medical Center)

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Community Health Needs Assessment experience:

- WVU Medicine Hospital System, including collaboration with Mon County Health Department
- Grant Memorial Hospital
- United Way of Mon and Preston Counties

ACA and Community Benefit

- What nonprofit hospitals provide to benefit their communities, other than reimbursed medical care
- Charitable mission
- A condition of tax exemption

CHNA and Implementation Plan

- Required of nonprofit hospitals every 3 years
- Regulated by IRS

Health Impact Pyramid



Health Care Transformation in Communities

Examples of activities supported by hospitals and health systems:

- Care management interventions that reduce readmissions, preventable ED and inpatient utilizations
- Investments to improve access to healthy food
- Investments to improve access to supportive housing in low-income communities (see Nat'l Center for Healthy Housing; nchh.org)

*See American Hospital Association CHNA Finder: <http://chnafinder.hret.org/>

Foundational Pillars for Transformation

From 18 large hospitals/health systems:

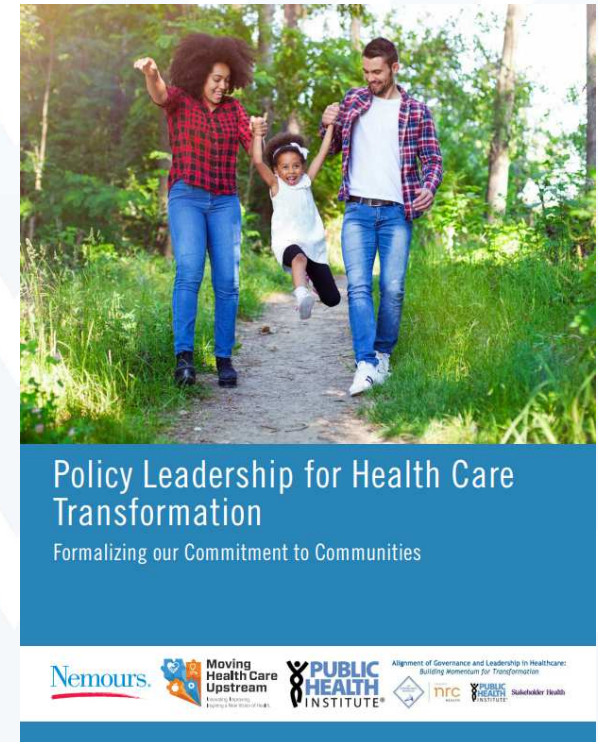
1. Institutional Policies

- Leadership and Board Engagement (eg, Board-level Community Health Committee)
- Accountability Mechanisms (eg, Executives' goals)
- Alignment Across Key Organizational Elements (eg, data, clinicians, program designers, community stakeholders)

2. Civic Engagement Strategies

- Partnership Infrastructure (eg, regional health collaborative)
- Public Education and Policy Advocacy (eg, cause-specific campaigns such as asthma or children's mental health)

*Includes a compendium of sample policy documents



Two Products

Community Health Needs Assessment	Implementation Strategies
<ul style="list-style-type: none">• Define Community• Secondary Health Data• Community Input• Analyze & Input Data• Resources• Prioritize Needs• Hospital Board Adoption• Widely Available on website	<ul style="list-style-type: none">• How issues were selected to address• Why issues not addressed• Strategy for each: how, who, what, when• Monitoring & Evaluation Plan

CHNA Example: Camden Clark Medical Center

Community Health Needs Assessment Process

Established Leadership Team. Reviewed existing health data and conducted a health perceptions survey to determine how community members view area health problems, access to medical care, and more.

Assessing

Convened community meeting. Discussed survey results, identified health issues that community members had deemed most concerning, and brainstormed solutions and existing resources.

Convening

Leadership Team evaluated results of survey, input from community meeting, and scope of hospital control and resources. As a result, the “top 3” health concerns were prioritized and drafting of the CHNA report began.

Prioritizing

Following adoption of the CHNA report by the CCMC Board, planned implementation activities for the “top 3” health concerns.

Assessing Needs

- Establish Leadership Team
- Review previous CHNA
- Review existing data
- Design and distribute community survey
 - perceptions of health, access to care, community wellbeing and safety

County Health Rankings & Roadmaps

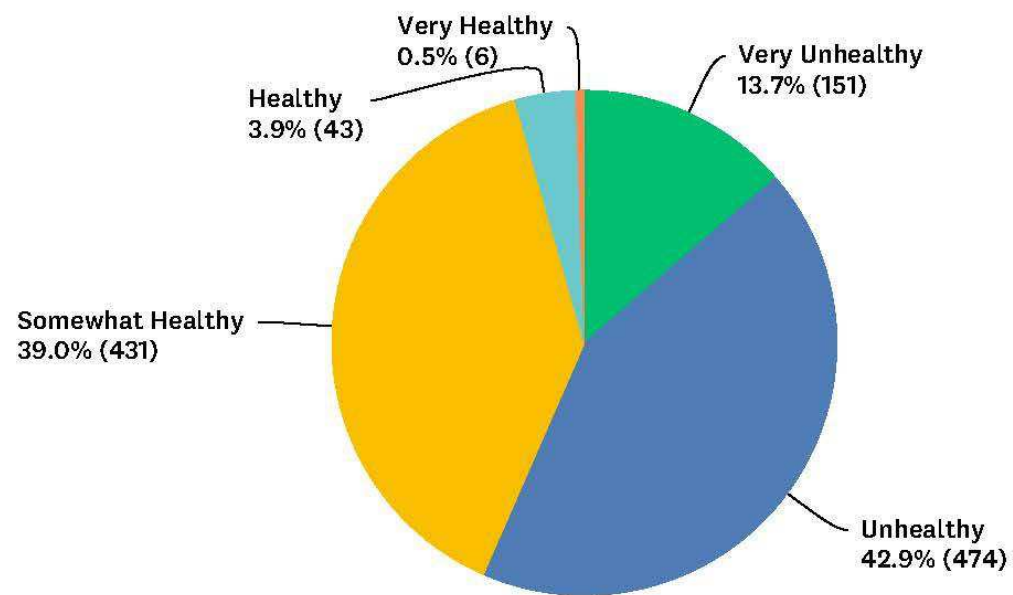
Building a Culture of Health, County by County

Wood (WO)

	Wood County	Error Margin	Top U.S. Performers ^	West Virginia	Rank (of 55)
Health Outcomes					
Length of Life					32
Premature death	9,400	8,600-10,200	5,200	9,700	30
Quality of Life					35
Poor or fair health **	21%	20-21%	12%	24%	
Poor physical health days **	5.0	4.8-5.2	3.0	5.1	
Poor mental health days **	4.9	4.7-5.2	3.0	4.8	
Low birthweight	9%	8-10%	6%	9%	
Health Factors					
Health Behaviors					43
Adult smoking **	25%	24-26%	14%	26%	
Adult obesity	36%	32-39%	26%	35%	
Food environment index	7.3		8.4	7.2	
Physical inactivity	29%	26-32%	19%	29%	
Access to exercise opportunities	68%		91%	58%	
Excessive drinking **	12%	12-13%	12%	11%	
Alcohol-impaired driving deaths	28%	21-35%	13%	32%	
Sexually transmitted infections	244.9		145-5	254.5	
Teen births	48	45-51	17	44	
Clinical Care					
Uninsured		9-11%	8%	11%	7
Primary care physicians	1,180:1		1,040:1	1,290:1	
Dentists	1,700:1		1,320:1	1,960:1	
Mental health providers	850:1		360:1	950:1	
Preventable hospital stays	58	53-62	36	72	
Diabetes monitoring	86%	82-90%	91%	84%	
Mammography screening	67%	62-72%	71%	59%	

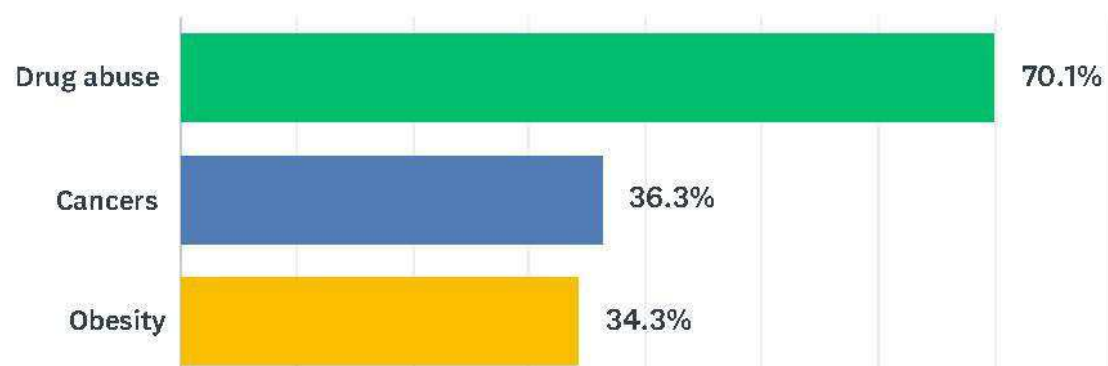
Q3 How would you rate your County as a "Healthy Community"?

Answered: 1,105 Skipped: 196



Q4 In the following list, what do you think are the 3 most important "health problems" or "health issues" in your County? Please choose **ONLY 3**.

Answered: 1,118 Skipped: 183



Convening

Goals:

- Gather broad, influential stakeholders
- Interpret data from community survey
- Agree upon top 3-5 needs
- Identify current efforts and novel ideas for each need



Prioritizing



High

Level of Importance

Low

Ability to Impact

High

CCMC Priorities

1.) Substance Use/Abuse	Team sees an ability to have high impact on this top-ranking item that is currently of overwhelming community, state, and national concern. Due to loss of funding for state tobacco cessation programming, this concern - tobacco & e-cigarette use - will also be included here.
2.) Cancer	Team easily agreed on prioritization of this health issue, which was among the top three concerns across all counties surveyed. CCMC already has some community benefit activities and resources in place, with more that can be done.
3.) Obesity/ Chronic Disease	Team decided to combine the high-ranking concerns of obesity and diabetes/heart disease to round out the third of their top priority items. There are many ways in which the hospital can collectively impact health outcomes for both.

Implementation Planning Example

Cancer/Obesity Strategy 1: Expansion of Sole Mates Program

Objective	Activities	Planning Partners	Implementation Partners	Resources Needed
Expand existing monthly Sole Mates walking event at Grand Central Mall to include other populations beyond retirees who can walk during the daytime. Number of sessions, attendees, and advertising will be tracked for evaluation purposes.	<ul style="list-style-type: none"> - Determine scope of expansion - Work with GC Mall to adjust times - Determine how to advertise to new populations - Determine avenues for promotion of program 	<ul style="list-style-type: none"> - Main contact for this strategy: Joyce Hubner - Grand Central Mall - Primary and specialty care doctors (as speakers) - Highmark BCBS (downtown expansion) - Walk 100 Miles in 100 Days staff 	<ul style="list-style-type: none"> - All planning partners - Advertising contacts - potentially schools, employers, radio, newspaper, social media - Wellness Center - Cancer Center navigators 	<ul style="list-style-type: none"> - Expansion of times at GC Mall - Advertising - Fliers



Questions?