

# ADDENDUM:

## 2019 COLLABORATIVE CHNA

### Daniel Drake Center for Post-Acute Care

#### PRIORITIZATION OF COMMUNITY HEALTH NEEDS

##### Introduction

In 2018 the Daniel Drake Center participated, as part of UC Health, in the collaborative development of a Community Health Needs Assessment (CHNA) for Greater Cincinnati and Greater Dayton, which incorporated considerable community input. This addendum will be published with the CHNA Report in 2019. The addendum describes the prioritization process and its results to identify significant health needs, and it also updates the status of the prior Implementation Plan.

##### Criteria

The CHNA considered the health and health-related issues according to the following criteria:

- Community prioritized the issue highly (based on consensus on priorities in CHNA)
- Public health departments prioritized the issue highly (based on consensus on priorities in CHNA)
- Nonprofit agencies, representing vulnerable populations, prioritized the issue highly (based on consensus on priorities in CHNA)
- Secondary data sources reflected that the issue was worse over time (based on up to 5 years' trend data collected for CHNA)
- Proportion of region impacted by worsening trends (based on CHNA data on the number of counties impacted by mortality rate; ratio of providers; and prevalence rate)

##### Process

UC Health Administration designated Christie Kuhns, Esq., in consultation with key stakeholders across the organization, to recommend priorities for the Daniel Drake Center. In her role as Chief of Staff and Vice President of Operations & Community Relations, Ms. Kuhns is qualified to select and endorse the priorities from the CHNA report and to allocate resources for implementation strategies. The CHNA identified the following regional priorities:

1. Substance abuse
2. Mental health
3. Access to care/Services
4. Chronic disease
5. Healthy behaviors

Priorities were determined by the number of votes in community meetings; the number and percentage of mentions on surveys; and, for secondary data, data worse than state or national data, and trending in the wrong direction.

UC Health is committed to improving the physical and economic health our community and has prioritized Community Health as one of its Core Four Strategies. Therefore, the Daniel Drake Center weighted one criterion more heavily than the other criteria – ‘Community prioritized it highly’ – in order to retain an emphasis on what the community deemed most significant.

In addition to increasing the weight of the criterion, ‘Community prioritized it highly,’ two health issues were also weighted. Access to care/services and mental health were both already identified at UC Health as top priorities during its strategic planning process in 2016. UC Health’s experience with both mental health and substance abuse also led their combination into one category, since mental health issues are a root cause for most substance abuse disorders.

### **Consideration of community input**


Through the CHNA process, the Daniel Drake Center received detailed information about the health issues identified in Butler, Clermont, Hamilton, and Warren Counties by Health Commissioners, individual consumers, nonprofit agencies serving vulnerable populations, and focus group participants.




### **Top priorities**

The top priorities for the Daniel Drake Center are:

1. Substance abuse and mental health
2. Access to care/Services
3. Chronic disease
4. Healthy behaviors

## EVALUATION OF IMPACT OF 2016 IMPLEMENTATION PLAN

Community Health Need	Strategy	Evaluation of Impact	Status	
Access to Care	<p>Expand Support Group Services (Stroke, Spinal Cord, Mild Brain Injury). Add Parkinson's.</p> <p>Share information about support groups to local home health agencies and HealthSouth's case management and social workers.</p> <p>Conduct annual Health Fair to provide education on community resources that are available in their community. Test for High Blood Pressure &amp; Diabetes.</p> <p>Provide education about CAD.</p> <p>Incorporate information link in regards to resources on DDC's website.</p>	<p>Evaluate the number of individuals who are going to groups currently. Ensure patients/care-givers are given information at discharge for community support groups.</p> <p>Develop a survey for health fair.</p> <p>75% of patients discharged with diagnosis of Stroke, Spinal Cord, or Mild Brain Injury will receive information about support groups.</p>	<p>Parkinson's services (therapy program) implemented Jan. 2017.</p> <p>Wellness classes added Jan. 2018. Scholarships for free attendance available.</p> <p>Presented Health and Wellness community-based seminar free of charge for individuals with Parkinson's.</p> <p>Patients referred to support groups held onsite and also other support groups closer to patient's home.</p> <p>Monthly support groups meet at Bridgeway Pointe:</p> <ul style="list-style-type: none"> <li>• Parkinson's</li> <li>• Dementia</li> <li>• Alzheimer's Disease</li> </ul> <p>Drake Hospital donated space for support groups to hold meetings onsite. Use of the conference rooms is free for support groups.</p> <p>Brightside Support Group (Spinal Cord Injury)</p> <p>FY17 meetings= \$1350 value /9 Meetings</p> <p>FY18 meetings = \$1350 / 9 Meetings</p> <p>FY19 meetings = \$1500 / 10 meetings</p> <p>Stroke Support Group</p> <p>FY17 meetings= \$1650 / 11 meetings</p> <p>FY18 meetings= \$1650 / 11 meetings</p> <p>FY19 meetings= \$1800 / 12 meetings</p> <p>Mild Brain Injury Support Group</p> <p>FY17 meetings= \$1100 / 11 meetings</p> <p>FY18 meetings= \$1200 / 12 meetings</p> <p>FY19 meetings= \$1100 / 11 meetings</p> <p>March of Dimes</p> <p>FY17 meetings= \$450.00 / 1 meeting</p>	

Access to Care <i>Continued</i>	Share information about support groups to local home health agencies and HealthSouth's case management and social workers. Conduct annual Health Fair to provide education on community resources that are available in their community. Incorporate information link in regards to resources on DDC's website.		Contacted local home health agencies and HealthSouth's social workers and gave them information about resources available. Surveys developed and implemented at First Ladies for Health Day (2017-2018) as well as 2017 Center for Closing the Health Gap Health Expo. Community Resources tab on web page links to information about Support groups and to wellness programs.	
Access to care/ services	UC Health will participate in a joint collaboration to improve health in the region, with The Health Collaborative.	Identify shared regional priority.	As part of the Gen-H Initiative, The Health Collaborative has launched Accountable Health Communities (Aug 2018) in which UC Health is actively participating in addressing social determinants. Partnership with The Health Collaborative is ongoing to identify a shared priority.	
Chronic Disease	Provide educational opportunities for Caregivers of family members who suffer from Chronic Illness.	Provide a workshop for caregivers of Chronic illness. Measure attendance and utilization of resources. Develop pre- and post-questionnaire. Offer at least once a year.	A planning team has formed with the goal of putting on an inaugural workshop in June 2019.	In progress
Mental Health & Substance Abuse	Increase community's awareness of resources that are available for mental health and substance abuse. Incorporate information link in regards to resources on DDC's website. Conduct annual Health Fair to provide education on community resources. Publish article submitted by Dr. Dawn Bouman on coping. Obtain for dissemination additional copies of booklet on Traumatic Brain Injury and Substance Abuse.	Measure attendance.  Expect an increase in attendance and requests for information about mental health and substance abuse, after the program is offered	Information distributed annually at the Midwest Black Family Reunion, CCHG Health Expo; Cincy Cinco, Avondale Festival and Health Fair, First Ladies Health Day, African American Male Wellness Walk. Attendance is 40,000+. Community Resources posted to webpage. Dr. Dawn Bouman article on coping published Oct. 2018; full brochure distributed at African American Male Walk and other events. Partnered with 1N5 (mental health nonprofit) to distribute community resources at Cincy Cinco. Planned Community Conversation on mental health for Spring 2019. The UC/UC Health Opioid Task Force formed April 2017.	

Mental Health & Substance Abuse <i>Continued</i>			The Interprofessional Practice Sub-Committee will focus on the goal of achieving maximal impact with addiction services in place.	
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3 / 13 / 2019

*Date approved by Audit and Compliance Committee of UC Health Board of Directors*