

Community Health Needs Assessment: Implementation Strategies 2020 – 2022

Contents

Purpose, Mission & Vision	2
Communities Served	2
Prioritized CHNA Needs	2
Process for Strategy Development	3
Implementation Strategies	6
Strategy: Stop the Bleed	6
Strategy: TAKE10 CPR	7
Strategy: go Vibrant Million Step Challenge	8
Strategy: Support Groups	9



Mission & Vision

Our Purpose is:

To advance healing and reduce suffering.

Our Mission is:

We are committed to advancing medicine and improving the health of all people – regardless of race, ethnicity, geography or ability to pay – by fostering groundbreaking medical research and education, delivering outstanding primary and specialty care services, and building a diverse workforce.

Our Vision is:

To use the power of academic medicine to advance the science of discovery and transform the delivery of care.

Communities Served

Butler, Clermont, Hamilton, and Warren Counties in Ohio

Prioritized CHNA Needs

Priorities

The priorities for the Daniel Drake Center are the top community health needs identified in the CHNA:

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

Significant Health Needs to be Addressed

Implementation Strategies, listed on the following pages, address all of the above prioritized health needs.

Significant Health Needs Not Addressed

Not applicable.



Process for Strategy Development

Christie Kuhns, Chief of Staff, Vice President of Operations & Community Relations assembled a CHNA Team to guide and oversee the development of strategies. The Community Relations Team (CR Team) met with both internal and community stakeholders to identify strategies. The CR Team includes Ms. Kuhns, Kristy Davis, Manager of Special Projects and Communications, and Dan Maxwell, Manager, Community Relations. Their activities included:

- Inventory of current strategies worthy of continuation
- Inventory of current activities that might address the targeted needs
- Meeting with public health agencies to identify more opportunities to collaborate
- Participation in Interact for Health's Regional Implementation Plan Group to discover opportunities for shared strategies
- Meeting with community-based organizations and other external stakeholders
- Meeting with UC Health experts and key internal stakeholders to identify and develop responses for the priority areas identified from the Community Health Needs Assessment

CHNA Team:

- Pete Gilbert, Executive Vice President and Chief Operating Officer, UC Health
- Evie Alessandrini, MD, Senior Vice President and Chief Medical Officer, UC Health
- Nita Walker, MD, Senior Vice President, Ambulatory Services, UC Health
- Ann Smith, Senior Vice President, Inpatient Services, Interim Chief Administrative Officer, UC Medical Center
- Christie Kuhns, Chief of Staff, Vice President of Operations & Community Relations, UC Health
- Tom Daskalakis, Vice President and Chief Administrative Officer, West Chester Hospital
- Lafe Bauer, Vice President and Chief Administrative Officer, Daniel Drake Center for Post-Acute Care
- Jenny Dusso, Vice President, Chief Administrative Officer, Ambulatory Services, UC Health
- Amy Chima, Senior Director, Performance Improvement, UC Health
- Kristy Davis, Manager of Special Projects and Communications, UC Health
- Dan Maxwell, Manager, Community Relations, UC Health
- Gwen Finegan, Consultant

Ms. Kuhns presented an overview of the CHNA Implementation Strategies process at a meeting of the Chief Operating Officers and Chief Medical Officers on June 10, 2019. Members of the CHNA Team met on August 12, 2019 to review the draft strategies.



Stakeholder meetings included:

External

June 27 - Seven Hills Neighborhood House

Dr. Melinda Butsch Kovacic Sheila Nared Alexis Kidd

July 2 – go Vibrant, Million Step Challenge

Laura Chrysler, Executive Director, Go Vibrant

July 12 - Hamilton County Public Health Advisory Council

CR Team attended meeting.

Internal

June 10 - CCO/CMO Meeting

Nita Walker, MD, Senior Vice President, Ambulatory Services

Ann Smith, Interim Chief Administrative Officer, UC Medical Center, Senior Vice President, Inpatient Services, UC Health

Christie Kuhns, Chief of Staff, Vice President of Operations & Community Relations

Bev Bokovitz, Vice President, Nursing Services, UCMC

Rob Portwood, Assistant Vice President, Hospital Operations, UC Medical Center

Lafe Bauer, Chief Administrative Officer, Daniel Drake Center for Post-Acute Care

Tom Daskalakis, Chief Administrative Officer, West Chester Hospital

Ron Rohlfing, Vice President Operations, West Chester Hospital

Kathy Hays, Vice President, Chief Nursing Officer, West Chester Hospital

Bob Feldbauer, Vice President, Facilities, UC Health

Jenny Dusso, Vice President, Chief Administrative Officer, Ambulatory Services, UC Health

Jasmine Arfa, Vice President, Chief Patient Experience Officer, UC Health

Candace Sabers, Vice President, Government Relations, UC Health

Amy Chima, Senior Director, Performance Improvement, UC Health

Rita Stockman, Assistant Vice President, Accreditation, Regulatory & Policy

Francisco Fernandez, MD, Director, Emergency Medicine Simulation Medicine

Tyler French, Director, Transformation, UC Health

Dan Maxwell, Manager, Community Relations, UC Health

Gwen Finegan, Consultant

June 25 - Stop the Bleed

Gina Menninger, Trauma Prevention and Outreach Coordinator, Trauma Center, UCMC

July 1 - Take 10 CPR

Dustin Calhoun, MD, Medical Director for Emergency Management



July 11 – Ambulatory Services

Jenny Dusso, Vice President, Chief Administrative Officer

July 23 - Outcome Measurement

Amy Chima, Senior Director, Performance Improvement, UC Health

Ms. Kuhns also gave an overview of the draft strategies to UC Health's Community Advisory Council at its July 30, 2019 meeting. Members attending were:

- Bishop Bobby Hilton, President, Greater Cincinnati National Action Network (NAN)
- Chara Fisher Jackson, Executive Director, Urban League of Greater Southwestern Ohio
- David N. Kirk, President & CEO, DNK Architects, Inc.
- Kathy Wright, Principal, Hughes STEM High School
- Luz Elena Schemmel, Director, Santa Maria Community Services' Immigrant, Wellness Services and International Welcome Center
- Melba Moore, Health Commissioner, Cincinnati Health Department
- Pastor Ennis Tait, President, Faith Community Alliance of Greater Cincinnati
- Renee Mahaffey-Harris, Executive Director, Center for Closing the Health Gap
- Rick Williams, President & CEO, Brodwill LLC

Also in attendance were Domonic Hopson, MPH, Assistant Health Commissioner, Cincinnati Health Department and Jeff Beam, Director of Development at The Community Builders.



IMPLEMENTATION STRATEGIES

Strategy: Stop the Bleed

Overview:

For nearly two years, the UC Health Department of Trauma has been leading efforts to educate and train Greater Cincinnati first responders, health professionals, teachers, and community members in lifesaving "Stop the Bleed" techniques. "Stop the Bleed" is a national preparedness program created after the Sandy Hook Elementary School shooting in December 2012. The goal of "Stop the Bleed" is to reduce the number of people who die from uncontrolled bleeding during mass casualty events, shootings, natural disasters, and everyday emergencies by training ordinary citizens in lifesaving bleeding control techniques. "Stop the Bleed" is provided in communities across the U.S. by the Department of Defense and Homeland Security in partnership with the American College of Surgeons, FEMA, the National Association of EMTs, the U.S. Fire Administration, Prehospital Trauma Life Support, Major Cities Chief's Association, the Hartford Insurance Company, and Johnson and Johnson. UC Health trauma staff, currently led by trauma surgeon and U.S. Air Force Col. Dr. Brian Gavitt, have trained more than 2,000 hospital-based staff, emergency medical professionals, and community members over the past 18 months through its community partnerships.

Goal: To train more people in basic bleeding control techniques in case of emergency

Priority/Priorities Targeted: Access to care/services

Program/Initiative	Stop the Bleed
Objectives	 To increase the number of people who are trained, equipped, and empowered to help in a bleeding emergency before professional help arrives. To cultivate and encourage grass roots efforts to provide training. To provide program support so that trainees are able to identify life-threatening bleeding; use their hands to stop the bleeding; pack a wound; and correctly apply a tourniquet.
Activities	 Host trainings at Daniel Drake Center or in surrounding community Provide support for adequate supply of tourniquets
Partners	External partners include Cincinnati Fire Department, Cincinnati Police Department, Cincinnati Health Department, and The Health Collaborative
Resources	 Tourniquets (\$25/ea.) for community trainings (Quantity as needed, to be determined) 0.50 FTE, Trauma Prevention & Outreach Coordinator
Evaluation Activities	 # of trainings # of people trained # trainings at Drake or in surrounding community
Point of Contact/ Person Accountable	Gina Menninger, Trauma Prevention & Outreach Coordinator



Strategy: TAKE10 CPR

Overview:

TAKE10 Cincinnati is designed to educate and rally the community around compression-only CPR, an easy-to-learn technique that can save lives. Developed by Take Heart Austin and brought to Cincinnati by UC Health, TAKE10 is a free 10-minute training on the hands-only technique that gives people the confidence to act in an emergency. Increasing the number of people trained to start CPR, before 911 responders arrive, can improve cardiac arrest survival.

Goal: To train people in compression-only CPR in case of emergency

Priority/Priorities Targeted: Access to care/services

Program/Initiative	TAKE10 CPR
Objective	To increase the number of people who are trained in compression-only CPR.
Activities	Hold TAKE10 CPR trainings within the Drake service area, with a focus on the nearby neighborhoods of Carthage and Hartwell. The hospital will educate the community about the importance of the training.
Partners	NA
Resources	 Financial contribution: \$1,000 to address aging mannequins (\$40 value each) Future investment may include translating training materials into Spanish and having bilingual trainers.
Evaluation Activities	# of trainings# of people trained
Points of Contact/ Persons Accountable	Jason McMullan, MD, Director, Division of Emergency Medical Services (EMS) and Vicki Conneighton, Program Manager, Division of EMS & TAKE10 Coordinator



Strategy: go Vibrant Million Step Challenge

Overview:

go Vibrant's Million Step Challenge is an annual competition among neighborhoods in Cincinnati. It's a fun and friendly challenge to encourage regular exercise at the community level. The neighborhood which logs the most steps from May to October can win a prize, such as a donation for an interactive, engaging playset in the winning neighborhood's park. go Vibrant is willing to help expand the program to the neighborhoods of Carthage and Hartwell, adjacent to the Daniel Drake Center.

Goal: To get people walking and moving with the support of web-based content, neighborhood walking routes, and events in the community.

Priority/Priorities Targeted: Chronic disease and Healthy behaviors

Program/Initiative	go Vibrant
Objective	To encourage more movement, especially walking, as a free, safe, and fun way to stay healthy and prevent disease.
Activities	 Promote participation in adjacent communities of Carthage and Hartwell. Create Neighborhood Walking Challenges for a 3-year period. Design custom walking routes in specific neighborhoods, such as Carthage and Hartwell and add map(s) to go Vibrant's web resources. Send emails and/or articles to keep residents engaged and enable healthier habits. Identify a Community Advocate.
Partners	External partner is go Vibrant.
Resources	Existing financial support will cover the cost of adding new walking path(s) and neighborhood challenge(s).
Evaluation Activities	 Track the number of participants per neighborhood. Track the number of steps taken per neighborhood. Increase the number of steps in neighborhoods per year. To add Carthage and/or Hartwell as neighborhoods.
Point of Contact/ Person Accountable	Dan Maxwell, Manager, Community Relations



Strategy: Support Groups

Overview:

Several support groups meet at the Daniel Drake Center, and the hospital provides meeting space, refreshments, security, maintenance, and housekeeping. The support groups are open to the public as well as friends and family of patients who often have long-term and/or traumatic conditions that can contribute to mental and emotional stress and distress. Support groups provide information and community for coping and healing. The adjacent Bridgeway Pointe Assisted Living and Memory Center has provided space for the Parkinson's, Dementia, and Alzheimer's Disease Support Groups. The Daniel Drake Center provides free meeting space for outside organizations holding support groups within its facility: Spinal Cord Injury Support Group; Stroke Support Group; and MILD Brain Injury Support Group.

Goal: To provide a welcoming space for support groups that benefit the mental and emotional well-being of community residents

Priority/Priorities Targeted: Mental health

Program/Initiative	Support Groups
Objective	To assist people coping with a disability or devastating illness/injury of theirs or a loved one.
Activities	 To host support groups To accommodate external support groups
Partners	Bridgeway Pointe is an internal partner. External partners include Spinal Cord Injury (Brightside) support group, Stroke support group, and MILD Brain Injury support group.
Resources	In-kind contribution: Providing space for monthly meetings for 3 external groups is valued at \$150/per meeting
Evaluation Activities	Maintain at least three (3) support groups meeting actively at Drake.
Point of Contact/ Person Accountable	Diana Barker, Conference Center Coordinator, Food and Nutrition Services



Accountability

The Senior Vice Presidents of Ambulatory Services and Inpatient Services will be responsible for ensuring progress on the measures described to evaluate the impact of each strategy. The Community Relations team will convene meetings twice annually with hospital team(s) to track achievements for each strategy.

9 / 11 / 2019

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