Community Health Needs Assessment Implementation Strategy for Lindsborg Community Hospital

2020

Background and Process

In 2019, the leadership of McPherson Hospital in McPherson, Lindsborg Community Hospital in Lindsborg, Mercy Hospital in Moundridge, and the McPherson County Health Department chose to collaborate in creating a community health needs assessment (CHNA). Provisions of the Affordable Care Act (ACA) require charitable hospitals to conduct community health needs assessments every three years, and adopt implementation strategies to meet identified needs.

Further, the Public Health Accreditation Board (PHAB) defines public health accreditation as the development of a set of standards, a process to measure health department performance against those standards, and reward or recognition for those health departments who meet the standards. This accreditation process also requires a periodic community health assessment.

The service area assessed was McPherson County, Kansas. The assessment combines existing secondary data with information gleaned from a survey made available to county residents and workgroup feedback representing a broad cross section of organizations from throughout the target area. After reviewing this data and compiling and reviewing existing resources, a list of prioritized needs has been developed.

Needs Identified and Prioritized

Results of the survey indicated perceived health issues in the county. The identified weaknesses were reviewed and prioritized by a workgroup comprised of a cross section of survey respondents from throughout the county. This group met to discuss survey results and explore relevant county secondary data from various sources indicated in this report. The workgroup examined the top health issues gleaned from the survey to arrive at a prioritized list.

The survey and prioritization process looked at 3 main areas: 1) Barriers to Access 2) Risky Behaviors and 3) Health Problems. The two top Barriers to Access are availability to medical specialists and insurance roles or limitations in coverage. The top three Risky Behaviors are drug abuse, alcohol abuse and poor eating habits. The three top Health Problems from the survey are drug abuse, mental health problems and obesity.

During the workgroup prioritization discussion, the group as a whole concurred with the survey results regarding the most prominent health problems in the county as but felt that based upon observation and the results of Risky Behaviors, that alcohol abuse should be added with drug abuse. Comments included the reality the drug and alcohol abuse often coincide with mental health problems. Often, strategies for one will be beneficial for all three issues.

The Community Health Needs Assessment was approved in June of 2019 by the board of trustees of each of the three hospitals mentioned above. The year 2020 started out as what would appear to be a "normal" year but stories about a deadly respiratory infectious disease in other parts of the world began circulating. The first recorded death in the United States occurred in February. On March 12th, the World Health Organization declared the SARS COV-2 virus (COVID-19) a global pandemic. President Trump declared it a national emergency on March 13th and Governor Kelly followed suit for Kansas on March 16th. Since that time, most of all resources have been focused on preventing, diagnosing, treating and vaccinating for COVID-19. This has dominated what our community "needs" in 2020 into 2021.

Action Plan for Barriers to Access

Access to specialists at a Critical Access Hospital like LCH is typically through referral relationships to larger hospitals or through outreach clinics. LCH has had outreach clinics including general surgery, cardiology, podiatry and behavioral health. The specialty providers provide consultation and even

procedures on varying amounts of days per month. Patients are also referred either through the clinic or out of the Emergency Department to those specialty services needed.

Previous action plans have included the addition of an outreach orthopedic clinic at LCH. Fluctuations of orthopedic physician staffing has made this difficult. Dr. Matthew Pyle and Dr. Travis Rump have joined Salina Regional Orthopedic Clinic. Dr. Rump has begun rounding on acute and skilled care patients as needed, at LCH. Further exploration of the addition of an outreach clinic to the LCH Specialty Clinic service line was not performed. In the early months of the pandemic, many procedures like orthopedic surgeries were actually put on hold to free up access in the regional facilities.

Unfortunately, our podiatry specialty clinic was discontinued mid-way through 2020 as the Dr. Timson decided to take on a clinic in another community. No replacement podiatry service has been found. On a positive note, a rheumatology specialty clinic with Dr. Ken Baxa has been developed for LCH. Dr. Baxa will begin monthly visits starting February of 2021. Weekly cardiology and general surgery clinics continue. Behavioral health was available at LCH weekly but in March, Veridian Behavioral Health changed visits to virtual through telemedicine. They have not been back to LCH since March of 2020 but are still available to our community.

In the 2018 Action Plan, telemedicine was discussed as a means of gaining access to specialists. One area of subspecialty consultation is in the area of hospital care. We already partner with Avera Health in Sioux Falls, South Dakota for Emergency Department consultation. The 2020 budget contained over \$20,000 for startup of hospitalist consultations with Avera Health through telemedicine. Upon further discussion with the medical staff of LCH, it was determined that the hospitalist consultation with Avera was not needed and would not be significantly utilized. However, with COVID-19, potential emergency COVID patients would be taken to the negative air room which is not a part of the Emergency Department. To make those patients accessible to Avera eEmergency, an iPad was furnished by Avera Health and contractual arrangements were made for the iPad coverage. This included additional cost. Providers can now consult Avera eEmergency from our negative air rooms for emergency patients.

Access to primary care follow-up through telemedicine was implemented in the first part of fiscal year 2020. Through the first of March, one primary care telemedicine appointment had been performed as part of the pilot project with the Salina Regional Health Center system, using Doxy.me. With the fear and reality of COVID-19, many in-person primary care visits were either cancelled or converted to using telemedicine. By the end of 2020, LCH had performed 900 telemedicine visits. These visits were especially useful with our area nursing homes due to closing down the facilities to outside visitors – physicians included.

In October of 2019, LCH expanded Urgent Care to seven days per week, using the remodeled space just off of the front lobby. The increased access was heavily used as through February, we averaged 391 visits per month. When COVID-19 hit and society "shut down", our urgent care volume plummeted. As the virus started to creep into central Kansas, the Urgent Care space became the area where we were able to isolate, examine and test those with COVID symptoms. Other Urgent Care patients were seen in the family medicine clinic exam rooms.

As the rate of COVID-19 patients increased in the fall of 2020, our Urgent Care exam and testing for possible COVID-19 was shifted to outside and then into the ambulance bay. This drive up exam and testing was performed seven days per week from the first of November 2020 into February of 2021. It has been an incredibly valuable access point for our community.

LCH also developed an access point for Bamlanivimab, a monoclonal antibody treatment for individuals with COVID-19. Criteria as approved by the FDA where developed and followed as to who qualifies for treatment. It has been administered with success.

Another COVID-19 access point has been vaccines. LCH has completed the required registration with the Center for Disease Control, Kansas Department of Health and Environment and McPherson County Health Department to be able to administer vaccines. Vaccine planning commenced late in 2020 and vaccine administration to employees began late in 2020 and to the general public in early 2021. This will continue through the pandemic.

LCH Administrator Larry Van Der Wege has also participated in advocacy events with Kansas State Legislative senators and representatives to discuss the expansion of Medicaid in Kansas. In working with the Kansas Hospital Association, it is felt that a solution can be developed to responsibly expand KanCare (Medicaid) to those in our service area who have been unable to afford health insurance. This advocacy effort will continue. For those requiring COVID-19 testing and/or treatment and do not have insurance, LCH has submitted the billing to a federal COVID-19 program for payment versus billing the patient.

Action Plan for Risky Behaviors

Drug and alcohol abuse typically go hand in hand. Part of the action plan will be to continue to perform alcohol and drug screening in the clinic and Emergency Department with referral to the Central Kansas Foundation or other facilities as needed. Standardized evaluation tools in the electronic medical record improve the consistency of screening for these behaviors. These screenings have and will continue to be performed, despite COVID-19.

Another current nationwide challenge is the abuse of opioid medications. The Family Health Care Clinic has adopted policies to monitor and reduce the amount of opioids, as per Center for Disease Control (CDC) guidelines. Improved standardization and policies have been developed in the Emergency Department as well. Luke Rosebraugh, M.D. joined LCH in 2018 and has become certified in prescribing Suboxone for treatment of opioid dependency. He will continue to provide and expand those services.

Our efforts in expansion of services with the Central Kansas Foundation for alcohol and drug dependency as well as efforts in Medically Supervised Weight Management were all diminished by COVID-19. Patients tended to stay away and so much attention was given to our COVID-19 efforts, that expansion of other programs was not possible. Hopefully these areas can be increased in 2021.

Part of the remodel project previously discussed, was the addition of a conference room. Some of the intended use of the room is for education either in person or from a distance, using the state-of-the-art technology in the room. Unfortunately, visitor restrictions have been in place since March of 2020, thus bringing in people for outside education was not possible. We also were limited in our capacity to increase programs. Hopefully 2021 will see a decrease in COVID-19 to where we can resume educational offerings.

Action Plan for Health Problems

As stated previously, drug and alcohol abuse have been combined as a health problem. The action plan for these issues have been previously addressed under Risky Behaviors

Mental Health treatment is a challenge throughout the state and country. Lindsborg Chief of Police Michael Davis and LCH Administrator Larry Van Der Wege participate in a quarterly county-wide meeting with law enforcement and health care professionals to try and develop better options to care for those in our community suffering from a mental health crisis. Through discussion and collaboration with

local mental health partners as well as the State facility in Larned, more timely access has improved. These meetings have been interrupted like most other things by COVID-19. They have been held virtually and will continue into 2021.

LCH continues to utilize the services of Prairie View Mental Health services for emergency screening through telemedicine. By using an iPad on a secure application, the mental health screening can be performed from a distance, thus saving the time of a screener to drive to Lindsborg. LCH will continue to utilize their relationships with Prairie View Mental Health and Veridian Behavioral Health to provide mental health care to its patients. Central Kansas Foundation is also utilized to assist those benefitting from a referral for alcohol or drug treatment.

Plans to provide outreach to farmers for suicide prevention did not develop during 2020 due to COVID-19. We also saw a reduction in use of our Medically Supervised Weight Management services, as many outpatient visits were reduced to decrease the risk of COVID-19 transmission. With the addition of COVID vaccines and hopefully a continued reduction in the incidence of COVID-19 cases, we will try and increase these programs.

In Closing

This past year has been one of trying to make whatever adjustments were necessary to prevent, diagnose, treat and vaccinate for COVID-19.