

ADDENDUM:

2019 Community Health Needs Assessment

Kettering Behavioral Medicine Center

PRIORITIZATION OF COMMUNITY HEALTH NEEDS

Introduction

In 2018 Kettering Behavioral Medicine Center participated, as part of the Kettering Health Network, in the collaborative development of a Community Health Needs Assessment (CHNA) for Greater Cincinnati and Greater Dayton. The process obtained considerable community input across 25 counties and involved close cooperation with local health departments. This addendum serves two purposes: to describe the resulting priorities to address significant health needs, and to provide an update from the 2017-2019 implementation strategies. The addendum is considered part of the 2019 CHNA Report for board approval.

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)
- Public health departments prioritized the issue highly (based on consensus on priorities)
- Nonprofit agencies, representing vulnerable populations, prioritized the issue highly (based on consensus on priorities)
- 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

The hospital's CHNA committee met on August 1, 2019. Their names and titles are provided below. They met to review the priorities and confirmed that the CHNA priorities reflected the significant health needs of the community. Kettering Behavioral Medicine Center provides mental health services for adults and therefore focuses primarily on the CHNA's top priority of Substance abuse/Mental health, identified on the next page.

August 1, 2019

Michael Brendel, VP, Patient Care
Bev Knapp, VP of Clinical Integration and Innovation
Toby Taubenheim, Clinical Coordinator
Becki Cox, Manager, Clinical Coordinator
Michele Garber, Outreach Coordinator
PJ Brafford, Government Affairs Officer
Molly Hallock, Community Benefit Coordinator

Top Priorities

There was consistent agreement on the top priorities between the secondary data and all the stakeholder groups who provided input. Respondents included County Health Commissioners, individual consumers, attendees at public meetings, and agencies that represent vulnerable populations. The top priorities identified throughout the region, in descending order, were:

- Substance abuse/Mental health
- Access to care and/or services
- Chronic disease
- Healthy behaviors

EVALUATION OF IMPACT OF 2017-2019 IMPLEMENTATION STRATEGIES

Priority Issue: Mental Health

Objective:

1. Integrate behavioral health screenings into primary care practices and train providers how to use the tools.
2. Integrate behavioral health providers into primary care practices.

Strategies:

1. Provide evidence-based screening tools and training for primary care physicians to improve identification of mental health and substance abuse issues.
2. Integrate behavioral health professionals into primary care practice teams.

Status:

1. In 2017, 70,369 PHQ9 screenings were performed on 135,355 patients, with a completion rate of 51.99%. In 2018, 91,622 PHQ9 screenings were performed on 164,949 patients, with a completion rate of 55.55%. In 2019, 90,759 PHQ9 screenings were performed on 163,296 patients, with a completion rate of 55.58%.
2. Three behavioral health professionals were integrated into primary care practices; 1 in 2018 and 2 in 2019. The location are Springboro Health Center, Years Ahead Health Center, and Englewood Health Center.

ADDITIONAL ACCOMPLISHMENT

Mental Health/Substance Abuse Strategy

The Kettering Behavioral Medical Center opened a Co-Occurring Intensive Outpatient Program in August 2019. An additional 14 bed Co-Occurring mental health/substance abuse use unit opened in November 2019.

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Date adopted by Board of Directors of Kettering Health Network