



Soin Medical Center Implementation Strategies 2020 – 2022

Mission & Vision

Our Mission:

To improve the quality of life of the people in the communities we serve through health care and education.

Our Vision:

Kettering Health Network (KHN) will be recognized as the leader in transforming the health care experience.

Our Values:

- Trustworthy
- Innovative
- Caring
- Competent
- Collaborative

Communities Served

Clark and Greene Counties in Ohio

Prioritized Community Health Needs

Priorities

The priorities for Soin Medical Center are the top community health needs identified in the Community Health Needs Assessment (CHNA):

1. Mental health, including substance abuse
2. Access to care and/or services, including infant mortality
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

Bev Knapp, VP of Clinical Integration and Innovation, PJ Brafford, Network Government Affairs Officer, and Molly Hallock, Program Coordinator, Community Benefit convened internal stakeholders to ratify the priorities and to develop strategies. Strategies were discussed in several meetings to identify best-practice and evidence-based responses for each priority area. Preferred strategies also:

- Increased or leveraged connections with community-based organizations,
- Reflected the values and best practices of Kettering Health Network, and
- Promoted alignment and integration with state and local public health priorities.

Listed below are the meeting dates and attendees. Meetings were facilitated by an external consultant, Gwen Finegan, who also provided technical assistance in follow-up emails and phone calls.

May 6, 2019

Jared Keresoma, Greene Memorial Hospital Administration
Jeff Jones, Human Resources
Bev Knapp, VP of Clinical Integration and Innovation
Toby Taubenheim, Kettering Behavioral Medicine Center
Lea Ann Dick, Manager of Diabetes and Nutrition
PJ Brafford, Government Affairs Officer
Kelli Davis, Community Benefit Coordinator
Molly Hallock, Community Benefit Coordinator

June 11, 2019

Rick Dodds, President Soin Medical Center and Greene Memorial Hospital
Wendi Barber, Chief Financial Officer/Chief Operating Officer
John Nafie, Director, Foundation Administration
Cheyenne Silvers, Community Relations Coordinator
Bev Knapp, VP of Clinical Integration and Innovation
PJ Brafford, Government Affairs Officer
Kelli Davis, Community Benefit Coordinator
Molly Hallock, Community Benefit Coordinator

July 15, 2019

Rick Dodds, President Soin Medical Center and Greene Memorial Hospital
John Nafie, Director, Foundation
Bev Knapp, VP of Clinical Integration and Innovation
PJ Brafford, Government Affairs Officer
Molly Hallock, Community Benefit Coordinator

October 1, 2019

Rick Dodds, President Soin Medical Center and Greene Memorial Hospital
Wendi Barber, Chief Financial Officer/Chief Operating Officer
John Nafie, Director, Foundation
Bev Knapp, VP of Clinical Integration and Innovation
PJ Brafford, Government Affairs Officer
Kelli Davis, Community Benefit Coordinator
Molly Hallock, Community Benefit Coordinator

The hospital committee finalized its implementation strategies in October 2019. Senior leaders at the hospital approved final versions before presenting the implementation strategies to the Board of Directors in November 2019.

Several strategies are contingent on community involvement and partnerships for their eventual success. Hospitals traditionally have not sought to share responsibility for health outcomes with external partners.

There is a degree of uncertainty about exactly how the collaborations will develop, but the potential of broad-based and tangible improvements is worth the risk. This level of sharing is the only path forward to improve impact for individuals and for the health of community. With robust community partnerships, another advantage will be the ability to respond as new emerging issues surface.

Description of Strategies

A table with more details is provided on pages 4 - 5. It includes information about measuring impact, timing, resources, and collaborating partners to accomplish the activities.

Rural Health Initiative

There are few pathways to rural health in residency programs, with fewer than 10 in the country and only one other program within Ohio. There is enthusiasm for the new program, with more than 30 providers – including 15 physicians – wanting to join. A geographically diverse pool of residents is applying.

Congregational Health

Current evidence supports the effectiveness of congregational health, or health interventions led by faith-based organizations, in disease prevention, increasing healthy behaviors, and more effective health maintenance. *County Health Rankings* classifies these interventions near the top of their rating scale for evidence-based programming. Building on the trusting relationship people have with their church, faith leader, etc. is the key to success. Since relationship building is foundational to this approach, the initiative will start small but hopes to grow in the number of congregations served over the next three years. The program will start with congregations that have already expressed interest. The approximate cost in the pilot year will be \$3,400 per church.

Midwifery Care

Certified Nurse-Midwives will provide a full range of gynecological and obstetrical care. Up to six FTEs will be added to the care team. Midwifery programs are evidence-based solutions, are cost-effective for patients, and enjoy high rates of patient satisfaction.

Referrals to Prenatal Care from ED

If a woman is found to be pregnant when she visits the Emergency Department (ED), she will be asked if she has an OB provider. Pregnant patients without an Obstetrician will be provided a referral from the ED to a physician or FQHC to encourage timely prenatal care in the first trimester.

Hospital-based Tobacco Cessation

Free classes are offered at Soin Medical Center and promoted to patients, the general public, and residents of Greene County. The classes operate year-round for 4-5 weeks and are scheduled as people sign up. Free nicotine replacement therapy patches are provided by a grant from the Greene Medical Foundation. There are three instructors who spend about 100 hours annually on scheduling, set up, and teaching.

Drug Free Coalition

Soin Medical Center and Greene Memorial Hospital provide lunch and meeting space for the monthly meeting. A hospital employee attends the meetings and utilizes other hospital resources as needed. Financial support is also provided.

Soin Medical Center makes approximately 100 referrals annually to area behavioral health agencies.

Implementation Strategies

Priority Issue(s)	Strategy	Evaluation of Impact	Resources		Timing	Collaboration
			Financial	Staffing		
Access to Care/Services	<u>Rural Health Initiative:</u> Residency program for rural PCPs. Three (3) residents are trained on rural health and work in community health centers.	# of patients seen by residents.	Value of residents' labor.	# and/or FTEs of residents	First class graduates in summer 2021.	Greene County Health District. Community-based clinics in Jamestown, Xenia, Yellow Springs, and Cedarville.
Access to Care/Services, Chronic Disease, and Healthy Behaviors	<u>Congregational Health:</u> Deepen connection with 11 congregations who have opted-in to e-newsletter. Offer program that addresses health concerns of congregation (body, mind & spirit).	Regular update at meetings with active group of local pastors. # of congregations approached/willing to participate. Development of health goals and/or health committee.	Approx. cost for one program per church in pilot year = \$3,400.	0.5 to 1.0 FTE in year one	Pilot in 2020	Local pastors
Access to Care, Infant Mortality	<u>Midwifery Program:</u> Certified Nurse-Midwives provide a full range of gynecologic and obstetric care, including well-woman care, family planning consultation and contraception, and prenatal, pregnancy, and birthing care, with the authority to write prescriptions.	Reported clinical data measures. Reduced cost for patient.	The value of the midwifery team is \$748,800.	6 FTEs added to care team.	Ongoing.	N/A

Priority Issue(s)	Strategy	Evaluation of Impact	Financial	Staffing	Timing	Collaboration
Access to Care, Infant Mortality (continued)	2) <u>Prenatal Care</u> : All women of childbearing age who visit ED receive a pregnancy test. If positive and they don't have an OB provider, they are referred to KHN physicians or FQHC.	2) # pregnant women identified in ED. % of women without OB provider who receive referral.	N/A	N/A	2) Starts in 2020	KHN Physicians; FQHC; Community Health Centers.
Chronic Disease and Healthy Behaviors	<u>Tobacco Cessation Classes</u> : Four 5-week classes offered and free Nicotine Replacement patches distributed at classes. Classes are held at Soin and open to the public.	# participants. % who quit.	\$5,000 donated by the Foundation. In-kind donation is \$2,880 monthly.	3 employees dedicate time to delivering this program.	Ongoing	Greene Medical Foundation
Mental Health, Substance Abuse	<u>Addiction Treatment</u> : 1) Ongoing participation with Drug Free Coalition. 2) Make referrals to area behavioral health agencies.	1) By 2025 Greene County will reduce drug overdose deaths by 50%. Fewer than 63 drug overdose deaths will occur per year, starting in 2020. 2) Approximately 100 referrals are made from the ED annually,	1) In-kind donation is \$5,760 monthly. Lunch and meeting space are donated.	1) Representative spends approx. 5% of time working with Coalition.	Ongoing	1) Greene County Public Health, Mental Health & Recovery Boards of Clark & Madison County, Wright State University, United Way of Greater Dayton and other area agencies. 2) Haven Behavioral, Beckett Springs, other area behavioral health agencies.

Accountability

The Hospital President will be responsible for ensuring progress on the measures used to evaluate the impact of each strategy. Periodic updates will ensure strategies stay on target. Annually hospital executives and board members will receive progress reports.

11 / 7 / 2019

Date approved by Kettering Health Network Board of Directors