

EXECUTIVE SUMMARY

Background and Process

DeKalb Medical at Hillandale conducted a community health needs assessment (CHNA) and has developed an implementation plan with strategies to address identified needs. The development of the Implementation Plan was accomplished by a team from DeKalb Medical Center, which operates DeKalb Medical at Hillandale. The team consisted of:

Dane Henry	Executive Vice President/Chief Operating Officer
Susan Breslin, MSN, RN	Vice President of Patient Care Services/Chief Nursing Officer
Jim Forstner	Vice President of Strategic Services
Reg Gilbreath, MD	Vice President/Chief Medical Officer
Susan Harris, RN, MBA	Vice President/Administrator of DeKalb Medical at Hillandale
Cheryl Iverson	Vice President of Marketing
Joel Schuessler, JD	Vice President of Legal Services/Chief Compliance Officer
Stephen Thomas, MD	Vice President/DeKalb Medical Physicians Group
Shealynn Buck, MD	Executive Director/Medical Director of Corporate Health
Don Fears	Director of Regulatory & Government Relations
Cheri Kunik, MSN, RN	Administrative Director/Operations
Gail Winston, MSN, RN	Director of Community Health

The DeKalb County Board of Health (BOH) as a long history of conducting Community Needs Health Assessments and the DeKalb Medical system has participated and supported those efforts. The DeKalb County BOH agreed to take the lead in conducting a community health assessment on behalf of DeKalb Medical at Hillandale. After reviewing the information from the CHNS, a “Stakeholder ‘s Meeting” was convened with over 30 representatives of community groups, local government and other providers (see attached list of Stakeholders Meeting participants) who reviewed the recently completed CHNA, validated the findings, provided input for future CHNAs and developed a list of community health priorities. Using this list of priorities, DeKalb Medical at Hillandale developed an implementation plan with strategies identified for selected priorities. This was approved by the DeKalb Medical Center Board of Directors in June 2013. The final approved version of the CHNA and Implementation Plan is available to the public on the www.dekalbmedical.org website.

Prioritized Needs

Based on size, severity, and available data, three needs were identified as the priorities for the DeKalb Medical at Hillandale service area. Those priorities are: colon cancer, pneumococcal vaccinations, and fall prevention.

Implementation Plan

The Implementation Plan was developed based on the findings of the CHNA and the priorities as determined by the community stakeholders. In order to address those priorities, DRHS leaders identified outside and inside strategies to address various facets for the priorities. The accompanying plan outlines those strategies. In addressing the selected priorities, special priority will be placed upon building existing programs.

PRIORITY: Colon Cancer

Assessment Findings: Colon cancer is the most common type of cancer diagnosis for the service area from 2005-2010.

Objective: Reduce the incidence and enhance the treatment of Colon Cancer through expansion of the Colon Screening Initiative

- Strategies:**
- A. Insure employee screening: Piloting with our DeKalb self-insured plan. Claims data leveraged through health plan administrator to identify employees who should be invited to comply with current screening recommendations. Initial pass was to communicate via enrollment packet to all employees about the importance of screening. A call center number was provided to answer questions and assist with making appointments. The next step will be to mine claims data, However, first issues of about confidentiality and employee/employer trust must be addressed before implementation.
 - B. PCP-based screening initiative: Designed as an intervention that involves mining the electronic medical record (EMR) of a primary care physician, to identify the patients under his/her care who have not complied with screening recommendations. Patients were communicated with by mail and followed up with three phone call attempts. Out of 146 appropriate patients contacted, 111 patient records were corrected or updated (patients who had, in fact, been screened but whose information had not been communicated back to the PCP), though there was significant resistance and/or reticence among those who chose not to received screening. For the next cycle of interventions, contact will move from the Contact Center to the physician's office, since many patients were reluctant to discuss these matters with Contact Center personnel over the telephone.
 - C. Expand population-based direct-mail outreach using a computer-based program to identify residents of the Hillandale service area who fit the demographic profile of the target screening population. These residents will receive directed mailings encouraging them to call the DeKalb Medical Contact Center to set up an appointment with a GI specialist. Expansion will include more communities and a wider number of specialists, who have been vetted by our Quality management/clinical integration department.

PRIORITY: Pneumococcal Vaccination

Assessment Findings: There were 1,454 hospital discharges related to pneumonia and, as a percentage African-Americans, were almost eight times as likely as Caucasians to receive that diagnosis.

Objective: Increase the rate of pneumococcal vaccination

- Strategies:**
- A. Complete the revision and adoption of policies for screening and administration of flu and pneumococcal vaccinations. Revisions include:
 - Vaccinations to be offered to all patients regardless to if the status is observation or inpatient.
 - Policies to remove fever as a contraindication or vaccination.
 - Require that, if not contraindicated, vaccination must be offered and administered prior to discharge date with electronic medical record making administration a timed task.
 - Policies to recommend that intensive care unit patients receive vaccinations only when patient's condition is stable and meeting criteria of administration.

PRIORITY: Fall Prevention

Assessment Findings: The leading cause of emergency room visits were falls.

Objective: Decrease injuries caused by falls

- Strategies:**
- A. Continue to increase and improve employee awareness of negative impact of patient falls.
 - Revamping and resurrection of Falls Committee
 - Educate staff through weekly huddles, staff meetings, and case presentations regarding falls.
 - Employees involved in falls cases to participate in investigation, assist with analysis of information, and present case study in huddles.
 - B. Increase/improve employee engagement in the prevention of falls.
 - Development of Universal Process focused on Days Since Last Fall. (Attached)

- Collaborate with Quality Dept. to create database/graph template to enter information monthly to be reviewed at Falls Committee with competition between nursing units with recognition of achievements throughout hospital.
- C. Revise falls analysis form.
 - D. Review and revise current Falls Management Policy to include Falls Risk Assessment tool and matching templates in computerized medical charting.
 - E. Formalize Nurse Managers reporting of Falls Prevention Action Plans and follow-ups to Falls Committee if they go above the monthly designated falls rate.
 - F. Development of a "Falls Rapid Response Team to quickly assess patient care and cause/analysis of falls.
 - G. Development of Falls Prevention Guidelines for Post-Acute Rehab/3600 including piloting of voice activated Posey Alarm.
 - H. Explore opportunities to work with community groups, including senior centers, to offer programs on increasing strength and balance to decrease the number and severity of falls.

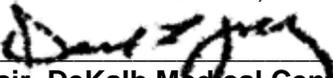
Conclusion

DeKalb Medical at Hillandale's Implementation Plan will help guide efforts toward community health needs that have been identified during this CHNA. All the issues on the list have a negative impact on the health and wellness of the people of Hillandale's service area in south DeKalb County. For the purposes of this CHNA and the Implementation Plan, we have chosen to place our primary focus on the priorities identified above. However, we will continue to address other health issues identified by assisting, where possible, our community partners with their endeavors related to these issues.

Approval

The DeKalb Medical Center Board of Directors includes representatives of South DeKalb and the surrounding area and serves as the Board of Directors for DeKalb Medical at Hillandale. The Board of Directors approves the Community Health Need Assessment (CHNA) and the Implementation Strategy for addressing priorities identified in the most recent CHNA. This report was prepared for the June 2013 DeKalb Medical Center Board of Directors meeting.

DeKalb Medical Center, Inc. Board of Directors Approval:



Chair, DeKalb Medical Center, Inc. Board of Directors

June 10, 2013

Date

**ATTENDEES TO JANUARY 16, 2012 STAKEHOLDERS MEETING ON
2013 COMMUNITY HEALTH ASSESSMENT**

Name	ORGANIZATION
Glory Kilanko	Women Watch Africa
Les Richmond, MD	DeKalb County Board of Health
Delores Hartsfield	St. Philip AME Church
Pat Seabrooks	Wellness Assessment Team
Jewell Martin	DeKalb County Board of Health
Gary Richey	DeKalb Community Service Board
Nancy Quinn-Sellers	Galaxy Partners, Inc.
Mae D. Jones	100 Black Men of DeKalb
Susan Parry, RN	DeKalb Medical Board Member
Portia Griffin	Beulah Baptist Church
Martha Anyworah, RN	Direct Healthcare Services
Shealynn Buck, MD	DeKalb Medical
Mandy Seaman	DeKalb County Board of Health
Kyungsook Song	Center for Pan Asian Community Services
Mohammed Khalaf	Georgia Health Policy Center
Gregory White	City of Decatur – Active Living Services
Lesley Denise Walker	Emory University
Pat Ecklund	Health Mothers/Healthy Babies
Jeff Rader	DeKalb County Commissioner- BOH Board Member
Larry Johnson	DeKalb County Commissioner
Alma Bowden	Educator
Anh Nguyen	Boat People SOS-Atlanta
Majorie Davis	First Mt. Pleasant Baptist Church
Sandra Rhoades Johnson	Georgia Council for the Hearing Impaired
Jessica Grippo	DeKalb County Board of Health
Jeffery Taylor	Oakhurst Medical Center (a Federally Qualified Health Center)
Don Fears	DeKalb Medical