Community Health Needs Assessment

Prepared for COLUMBUS COMMUNITY HOSPITAL

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CONSULTING, LLC

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ABOUT VERITÉ HEALTHCARE CONSULTING

Verité Healthcare Consulting, LLC (Verité) was founded in May 2006 and is located in Alexandria, Virginia. The firm serves as a national resource that helps hospitals conduct community health needs assessments and develop implementation strategies that address priority needs. The firm also helps hospitals, associations, and policy makers with community benefit reporting, planning, program assessment, and policy and guidelines development. Verité is a recognized, national thought leader in community benefit and in the evolving expectations that tax-exempt healthcare organizations are being required to meet.

The community health needs assessment prepared for Columbus Community Hospital was directed by the firm's President and managed by a senior-level consultant.

Associates and research analysts supported the work. The firm's senior-level consultants and associates hold graduate degrees in relevant fields.

More information on the firm and its qualifications can be found at www.VeriteConsulting.com.

Verité Healthcare Consulting's work seeks to improve the health of communities, of vulnerable people, and the organizations that serve them



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INTRODUCTION

This community health needs assessment (CHNA) was conducted by Columbus Community Hospital (the hospital or CCH) to identify community health needs and to inform development of an implementation strategy to address identified priority needs. The hospital's assessment of community health needs also responds to regulatory requirements.

Federal regulations require that tax-exempt hospital facilities conduct a CHNA every three years and develop an implementation strategy that addresses priority community health needs. Tax-exempt hospitals also are required to report information about community benefits they provide on IRS Form 990, Schedule H. As specified in the instructions to IRS Form 990, Schedule H, community benefits are programs or activities that provide treatment and/or promote health and healing as a response to identified community needs.

Community benefit activities and programs seek to achieve objectives, including:

- improving access to health services,
- enhancing public health,
- advancing increased general knowledge, and
- relief of a government burden to improve health. 1

To be reported, community need for the activity or program must be established. Need can be established by conducting a community health needs assessment.

The 2010 Patient Protection and Affordable Care Act (PPACA) requires each tax-exempt

hospital to "conduct a [CHNA] every three years and adopt an implementation strategy to meet the community health needs identified through such assessment."

CHNAs seek to identify priority health status and access issues for particular geographic areas and populations by focusing on the following questions:

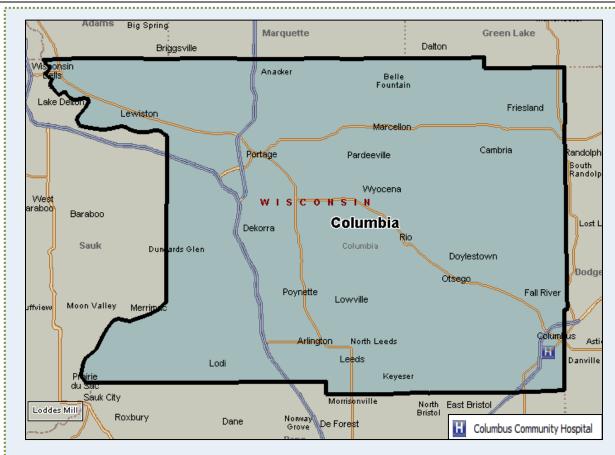
- *Who* in the community is most vulnerable in terms of health status or access to care?
- What are the unique health status and/or access needs for these populations?
- *Where* do these people live in the community?
- Why are these problems present?

The question of *how* the hospital can best use its limited charitable resources to address priority needs will be the subject of the separate implementation strategy.



¹Instructions for IRS form 990 Schedule H, 2012.

EXECUTIVE SUMMARY



Columbus Community Hospital Community Summary Characteristics

- Hospital community is Columbia County
- Columbia County Population (2011): 56,763
- 77.0 percent of hospital discharges originated from Columbia County
- Population increase (2000-2011): 8.2%
- Higher per capita and median income than Wisconsin as a whole
- Lower rate of unemployment than Wisconsin and the U.S.
- Higher percentage of White residents than Wisconsin average

- Disparities:
 - Most non-White populations have lower per capita incomes than White residents
 - Most non-White populations less likely to have high school or college diploma than the White population
 - Most non-White populations have higher unemployment rates than White residents
 - Males more likely to die of many chronic diseases, including cancer and heart disease, than females



While the hospital's community benchmarks favorably on a variety of health indicators compared to national and Wisconsin averages, this assessment has identified a number of priority problems that impact the health of the community.

Columbia County is defined as the hospital's community for this assessment. The county has experienced faster population growth than Wisconsin. Currently, the population living in the community has a slightly higher proportion of residents aged 5-17 and over 65 than Wisconsin as a whole. The county has a higher percentage of White residents than the state average.

Health disparities exist for racial and ethnic minorities. These populations are more likely to have limited economic and social resources and to be at risk for poor health.

Health disparities also exist between sexes; males were more likely to report mortality relating to several chronic diseases, including chronic lower respiratory disease and colorectal cancer.

There are several potentially vulnerable geographic areas in the county; 11 of the county's 36 school districts report more than 40 percent of their student body as eligible for free and reduced cost meals; food deserts are concentrated in and around Portage and Columbus.²

Poor health status can result from a complex interaction of challenging social, economic, environmental, and behavioral factors combined with a lack of access to care. Addressing these "root" causes is an important way to improve quality of life and to reduce mortality and morbidity.

The table that follows identifies the priority community health needs found by this CHNA. The needs are listed by category in alphabetical order.



Community-Wide Priority Needs

² An area where residents live more than 1 mile from a supermarket or large grocery store in an urban area and more than 10 miles from a supermarket or large grocery store in a rural area.

Access to Health and Human Services

• Lack of Affordable and Accessible Care

Access to care is impeded by insufficient insurance coverage, high deductibles and copays, and expensive prescription medications, as well as a lack of provider participation in some insurance plans. Geographic distance to providers also impedes accessibility, especially for individuals in the community without access to reliable transportation. Transportation particularly is an issue in the elderly and rural populations. Lack of affordable and accessible care may contribute to the high rates of hospitalization for pneumonia and influenza in the area.

• Lack of Health Education

Residents often are unaware of community resources and proper treatment regimens for diseases, such as diabetes.

• Lack of Physicians and Specialists

The community lacks a sufficient supply of dentists, oncologists, and psychiatrists. Residents report difficulty finding providers who accept BadgerCare and who are willing to treat the uninsured.

• Support for Seniors and Their Caregivers

Columbia County seniors need additional case and medication management support. Many seniors live alone, which can lead to social isolation and poor health outcomes. Local seniors also exhibit high rates of Alzheimer's disease.

Dental Health

• Lack of Access to Dental Care and Poor Dental Health Status

Affordable dental care services are needed, particularly for low-income children and adults, to improve dental health outcomes.

Health Behaviors

Alcohol Abuse

Efforts to reduce alcohol abuse are needed due to comparatively high rates of excessive drinking.

Drug Abuse

Interventions are needed to reduce abuse of both prescription drugs and illegal substances, particularly heroin. The community has insufficient resources to support residents needing detoxification services.

Smoking/Tobacco Use

Efforts to reduce tobacco use are needed due to comparatively high rates of smoking and tobacco use, especially among mothers who smoke during pregnancy.

Health-Related Disparities

• Gender Disparities

Gender disparities are prevalent in the community. Males have higher incidence rates or mortality rates for several chronic diseases, including colorectal cancer, chronic lower respiratory disease, lung cancer, and heart disease, while females report higher rates of chlamydia and childhood and senior poverty.

• Racial and Ethnic Disparities

The Black population displays a higher poverty rate and lower per capita income than other populations. Black and Hispanic (or Latino) populations report higher rates of chlamydia than White residents; Black, Hispanic (or Latino), and Other populations report lower educational achievement as measured by Bachelor's Degrees, and children in these populations report higher rates of poverty.

Mental Health

• Lack of Access to Mental and Behavioral Health Services and Poor Mental Health Status

Local mental health services are needed to address the needs of children/adolescents and individuals with substance abuse issues. Poor behavioral health in the community results, in part, from a lack of accessible providers, particularly psychiatrists and detox centers, and inadequate insurance coverage.



Morbidity and Mortality

• Diet and Exercise-Related Issues

Access to nutritious foods, better food choices, and increased outlets for physical activity are needed to reduce obesity and related health impacts, such as diabetes and cardiovascular disease.

• High Rates of Fall Mortality

Columbia County reports comparatively high rates of fall-related mortality.

Physical Environment

• Violent Crime

Interventions are needed to reduce the comparatively high rates of violent crime in the community.

Social and Economic Factors

• Financial Hardship

The economic downturn led to increased unemployment and poverty. This exacerbates already present difficulties with transportation and affordable, accessible medical care.



Columbus Community Hospital CHNA Implementation Strategy

Adopted by the Columbus Community Hospital Board on 12/5/13

This document describes how Columbus Community Hospital (CCH or the hospital) plans to address needs found in the Community Health Needs Assessment (CHNA) published by the hospital on 9/30/13. The CHNA report is available at http://www.cch-inc.com/Pages/default.aspx. The implementation strategy describes the hospital's planned initiatives for calendar (tax) years 2014 through 2016.

The 2013 CHNA and this implementation strategy were undertaken to identify and address significant community health needs, and in accordance with proposed Internal Revenue Service (IRS) regulations pursuant to the Patient Protection and Affordable Care Act of 2010. Final guidance as to the content and format of these documents has not been issued by the IRS.

This implementation strategy outlines the significant community health needs described in the CHNA report. It identifies significant needs that CCH plans to address through various strategic initiatives and articulates why the hospital does not intend to address other needs identified in that report.

The hospital reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. Alternately, other organizations in the community may decide to address one or more of the significant community health needs, and as a result the hospital may amend its strategies and focus on other identified significant health needs.

The document contains the following information:

- 1. Hospital Mission Statement
- 2. Definition of the Community Served
- 3. Significant Health Needs Identified
- 4. Significant Health Needs the Hospital Will Address
- 5. Needs the Hospital Will Not Address
- 6. Implementation Strategy Adoption

1. Hospital Facility Mission Statement

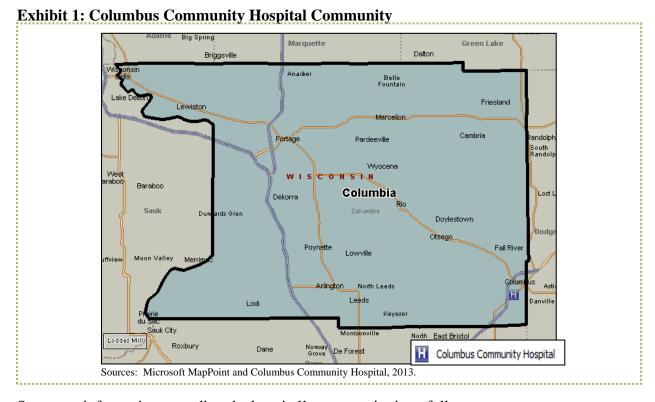
Columbus Community Hospital is committed to supporting its mission through offering a wide range of community benefits and clinical services. The hospital's mission is as follows:

"By building caring relationships with those we serve, we guide the journey to health and wellness."

2. Definition of the Community Served

Columbus Community Hospital's community is defined as Columbia County, Wisconsin. This area is comprised of 11 ZIP codes.

In 2011, this community included an estimated 56,763 persons. The community was defined based on the geographic origins of Columbus Community Hospital's inpatients. Between October, 2012, and July, 2013, about 77 percent of the hospital's inpatients and about 68 percent of emergency department visits originated from the 11 ZIP codes. **Exhibit 1** illustrates the community served by the hospital.



Summary information regarding the hospital's community is as follows:

- The community's population grew eight percent between 2000 and 2011, while the state's population increased 6.1 percent during that same time period.
- Columbia County had a slightly higher proportion of residents aged 65 years or older than Wisconsin as a whole.
- A higher percentage of Columbia County residents, at 96 percent, were White in 2011 than the state average, at 87 percent.
- Columbia County had poverty and unemployment rates below Wisconsin and national averages; however, these rates were higher for non-White residents.

Additional information regarding community demographics, identified health needs, and related issues is included in the CHNA report.

3. Significant Health Needs Identified

The hospital's 2013 CHNA found that numerous health status and access problems are present in the community and determined 15 significant needs (**Exhibit 2**). A hospital committee met on several occasions, reviewed the CHNA findings, and considered the following criteria to determine the most critical and appropriate needs for CCH to address [examples follow below]:

- National trends and recognized national health priority;
- Reported severity of the health issue;
- Frequency of identification of health issues from stakeholder input;
- Community support for the issue and potential for partnerships to address the issue; and
- Value of CCH leadership to address the issue.

Based on these criteria, the hospital committee concluded that the hospital's implementation strategy should continue to address the issues identified by "Y" (for Yes) in **Exhibit 2** through ongoing programs, and that the work plan for 2014-2016 will focus major new and continuing efforts on two priority strategic initiatives (identified as "Priority") described in Section 4. Issues identified by "N" (for No) represent issues that the hospital does not plan to address (for reasons detailed in the report). The 2013 CHNA provides additional details regarding each of these community health needs.

Exhibit 2: Identified Community Health Needs the Hospital Will Attempt to Address

Access to Health and Human Services	Plan to Address?
Lack of Affordable and Accessible Care	Υ
Lack of Health Education	Y
Lack of Physicians and Specialists	Υ
Support for Seniors and Their Caregivers	Y
Dental Health	
Lack of Access to Dental Care and Poor Dental Health Status	N
Health Behaviors	
Alcohol Abuse	N
Drug Abuse	N
• Smoking/Tobacco Use	N
Health-Related Disparities	
Gender Disparities	Priority
Racial and Ethnic Disparities	N
Mental Health	
• Lack of Access to Mental and Behavioral Health Services and Poor Mental Health Status	N
Morbidity and Mortality	
Diet and Exercise-Related Issues	Priority
High Rates of Fall Mortality	Υ
Physical Environment	
• Violent Crime	N
Social and Economic Factors	
• Financial Hardship	Υ

4. Significant Health Needs the Hospital Will Address

Columbus Community Hospital has a tradition of providing significant amounts of community benefit to the communities it serves. The hospital will continue its commitment to the community by allocating appropriate resources to address these health needs. For each of the priority strategic initiatives that the hospital plans to address, the strategy describes:

- Actions the hospital intends to take, including programs and resources it plans to commit;
- Anticipated impact of these actions and a plan to evaluate such impact; and
- Planned collaboration between the hospital and other organizations.

A. Priority Strategic Initiatives

- **1. Gender Disparities** The hospital intends to address gender disparities by taking the following actions:
 - a. Expand the Cancer Care Nurse Navigation Program, which originally served only breast cancer patients, to include colon and lung cancer patients. The program provides patient education, advocacy, resource utilization, and support throughout the cancer care continuum by providing a consistent point of contact and personalized coaching for patients. The program serves as a liaison between patients and CCH services.
 - b. Host a 12 week operational wellness pilot program for young men working at Robbins Manufacturing. The program will provide incentives to teams of employees who participate in a set of physical fitness challenges to increase their physical activity regimen through aerobics.
 - c. Continue the Cancer Support Group.
 - d. Host the Spring Into a New You CCH Women's Day, an event providing information and resources on nutrition, CPR, breast and heart health, self-defense, menopause, and exercise promotion.
 - e. Continue to collaborate on Relay For Life, a community based fundraising event hosted by the American Cancer Society, which is held across local communities, universities, and the virtual space.

Anticipated Impact and Plan to Evaluate: The hospital anticipates that tailoring specific programs to men and women who may be impacted by certain chronic conditions will be of benefit and serve to reduce gender disparities associated with such chronic conditions. The hospital will monitor program performance annually, including actions taken, the number of people reached, and program outcome data where available.

Planned Collaboration: The hospital plans to collaborate with, local and system-wide oncologists working for the Cancer Navigation Program, the American Cancer Society, local businesses, and Robbins Manufacturing.

- **2. Diet and Exercise-Related Issues** The hospital intends to address diet and exercise-related issues by taking the following actions:
 - a. Convene the Live It! Real-Life Nutrition for Teens program, a year round curriculum designed to engage and educate middle school students in the rural community through a combination of nutrition and physical activity based lessons that are taught by CCH staff. As an incentive for schools to participate and benefit from the program, schools will be awarded points based on student participation and completion of various take-home activities. The objective of the program is to improve nutrition and physical activity habits of youth.
 - b. Host a 12 week operational wellness pilot program for young men working at Robbins Manufacturing. The program will provide incentives to teams of employees who participate in a set of physical fitness challenges to increase their physical activity regimen through aerobics.
 - c. Distribute nutrition and exercise information at various events, including the Columbus 5K Kindergarten Tour, Fall River 5K Kindergarten Tour, Spring Into a New You CCH Women's Day, Hospital Walk, Columbus Senior Fair, National Night Out, Columbus School District Resource Fair, Fall River School District Resource Fair, and Early Childhood Screening Day.
 - d. Provide access to heart health and diabetes education, blood pressure checks, and screenings through various events, including: Spring Into a New You CCH Women's Day, Hospital Walk, Columbus Senior Fair, and National Night Out.
 - e. Convene the American Diabetes Association Month Event, organize the Diabetes Support Group, provide information and analysis on diabetes trends and overviews, and provide pre-diabetes classes.
 - f. Convene the Hands on Hearts program.

Anticipated Impact and Plan to Evaluate: The hospital anticipates increased physical activity and healthy diets to result in reduced rates of chronic conditions and increased health benefits for adults and youth. The hospital will monitor program performance annually, including actions taken, the number of people reached, and program outcome data where available.

Planned Collaboration: The hospital plans to collaborate with local schools who are implementing the Live It! Curriculum, the University of Wisconsin, the American Diabetes Association, local schools and community organizations, and Robbins Manufacturing.

B. Continuing Strategic Initiatives

While certain community health needs have not been identified as priority strategic initiatives, the hospital plans to continue various current community benefit programs that address these needs, as outlined below.

Lack of Affordable and Accessible Care: Columbus Community Hospital is aware of this need, especially in rural communities. As a rural hospital, CCH currently has a Community Care program for patients who are unable to pay or who can pay, but need to make monthly payments. No other programs regarding this need will be implemented at this time. The anticipated impact of this effort is continued access to service by members of the community. The plan to evaluate is consistent monitoring of resident use of the Community Care program. There is no planned collaboration with other community organizations.

Lack of Health Education: Columbus Community Hospital is passionate about health education and offers many learning opportunities to community members throughout the year. Education opportunities include, but are not limited to: Diabetes Support Group, Cancer Support Group, First Aid and CPR Training, Blood Pressure Screenings, Heart Healthy Eating, and a presence at many local health fairs. These opportunities are available on a first come, first served basis. As a rural facility with limited staff and resources, these education offerings have a more local impact as opposed to a county-wide reach. The anticipated impact of this effort is stable or improved health of the overall community. The plan to evaluate is review of new community health studies. Planned collaboration is through various local organizations that host local health fairs.

Lack of Physicians and Specialists: As a rural facility, Columbus Community Hospital is always looking at new physician and specialist partnership opportunities. The hospital's affiliation with SSM Healthcare of Wisconsin and its strong relationship with UW Health do provide some local access to specialists. At this time, no new partnerships are planned. The anticipated impact of this effort is continued access to physicians. The plan to evaluate is consistent monitoring of physicians with hospital privileges. Planned collaboration is with SSM Healthcare of Wisconsin and UW Health.

Support for Seniors and Their Caregivers: Columbus Community Hospital currently offers a monthly Alzheimer's Support Group. This group is free and open to anyone who has been diagnosed with Alzheimer's and their caregivers. No new programs are planned at this time. The anticipated impact of this effort is continued support for individuals impacte by Alzheimer's disease. The plan to evaluate is assessment of demand for and participation in the support group. There is no planned collaboration with other community organizations.

High Rates of Fall Mortality: Columbus Community Hospital is aware of this need in the county. CCH provides literature related to fall prevention at the Columbus Senior Fair. The hospital's Physical Therapists are also versed in balance therapy and fall prevention. No other programs are planned at this time. The anticipated impact of this effort is increased awareness of fall risks and prevention activities. The plan to evaluate is acceptance of educational materials by community members. Planned collaboration is with the Columbus Senior Fair.

Financial Hardship: As a rural hospital, CCH currently has a Community Care program for patients who are unable to pay or who can pay, but need to make monthly payments. No other programs regarding this need will be implemented at this time.

5. Needs the Hospital Facility Will Not Address

No hospital can address all of the health needs present in its community. Columbus Community Hospital is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization so that it can continue to provide a range of important health care services and community benefits. This implementation strategy does not include specific plans to address the following significant health needs that were identified in the 2013 Community Health Needs Assessment:

Lack of Access to Dental Care and Poor Dental Health Status: Columbus Community Hospital is aware of this need in the county. However at this time, CCH does not have the staff or resources to properly address this need.

Alcohol Abuse: Columbus Community Hospital is aware of this need in the county. However at this time, CCH does not have the staff or resources to properly address this need. Resources are available at the Pauquette Center in Portage, which is the county seat.

Drug Abuse: Columbus Community Hospital is aware of this need in the county. However at this time, CCH does not have the staff or resources to properly address this need. Resources are available at the Pauquette Center in Portage, which is the county seat.

Smoking/Tobacco Use: Columbus Community Hospital is aware of this need in the county. However at this time, CCH does not have the staff or resources to properly address this need. Patients seeking cessation support may visit the Tobacco Free Columbia-Dane County Coalition.

Racial and Ethnic Disparities: Columbus Community Hospital is aware of this need in the county. However at this time, CCH does not have the staff or resources to properly address this need.

Lack of Access to Mental and Behavioral Health Services and Poor Mental Health Status: Columbus Community Hospital is aware of this need in the county. However at this time, CCH does not have the staff or resources to properly address this need. Resources are available at the Pauquette Center in Portage, which is the county seat. A monthly NAMI support group also meets at the Portage Public Library.

Violent Crime: Violent Crime in Columbia County is a need being addressed by local law enforcement officials within the hospital's community.

6. Implementation Strategy Adoption

This implementation strategy was adopted by the Columbus Community Hospital Board of Trustees on 12/5/13.