



MEMORIALTM
HOSPITAL

COMMUNITY HEALTH ENHANCEMENT

Community Health Needs Assessment

Implementation Strategies

2016 – 2018



2015 Executive Summary

Memorial Hospital of South Bend (MHSB) is a community-owned, not-for-profit corporation based in South Bend, Indiana. It is governed by volunteer representatives of the community guided by a mission to improve the quality of life for the people of our community. As the county's second largest employer, MHSB is not only recognized nationally as a leader in providing high quality care, but also as a leader in innovation, by offering new approaches to patient satisfaction and customer service.

Beacon Health System, established in 2012, serves as the parent company of MHSB, as well as Memorial Health & Lifestyle Center, HealthWorks! Kids' Museum, Memorial Children's Hospital, Beacon Medical Group, Elkhart General Hospital, Beacon Ventures, and Community Health Alliance.

This report includes the following three sections:

- A brief description of the St. Joseph County (SJC) community served by the 2015 Community Health Needs Assessment (CHNA).
- An overview of the 2015 CHNA process and prioritization methods utilized by Beacon Health System in Saint Joseph County.
- MHSB's Implementation Strategies for sustaining and developing the appropriate community benefit programs to address each of the six prioritized needs in SJC for 2016-2018.

DESCRIPTION OF COMMUNITY SERVED

Established in 1830, SJC, Indiana has become the fourth largest county in the state of Indiana. The county spans 467 square miles, which includes a comfortable mix of rural cultural heritage and urban amenities. SJC is also the regional center for higher education, with more than eight colleges and universities, including but not limited to the University of Notre Dame, Indiana University South Bend, Ivy Tech Community College, Purdue University, Holy Cross College, Bethel College and St. Mary's College.

The heart of MHSB is located within a mile of the University of Notre Dame, ten miles south of the Michigan state line, and forty miles east of Lake Michigan. Through the years the environment of South Bend, the largest city in St. Joseph County, has changed from a focus on manufacturing (Studebaker, Bosch, and Uniroyal) to health, education and customer services.

According to the U.S. Census, the population for SJC in 2014 was estimated at 267,618 individuals. The median household income was \$45,012; persons below the poverty level accounted for 17.2 % of the population. In 2013, 26.9% of children younger than the age of 18 lived in poverty.

Our service area includes patients from St. Joseph and surrounding counties in Indiana and Michigan. The pediatric emergency transport program serves 18 counties and our MedFlight helicopter covers communities within a 150-mile radius. We have the region's only Hematology/Oncology program in the area. Memorial is also the only hospital in the region with Pediatric Hospitalist and Child Life programs.

The five contiguous counties comprising SJC's secondary service area and 12 counties in its tertiary service area are characterized by a mix of small to mid-size metropolitan areas and rural communities. The population mix is diverse and includes large numbers of first-generation European, African, Middle Eastern immigrants, African Americans, Asians, Hispanics, and Amish. MHSB makes a special effort to focus on those populations with the highest unmet needs, specifically those persons who are known as vulnerable, through chronic diseases, lower-income and poverty, members of a minority population and/or the uninsured.

OVERVIEW OF CHNA PRIORITY PROCESS

Community engagement and feedback are essential to the integrity and validity of the SJC CHNA process. Therefore, input was actively solicited and secured from three sources:

- 1.** Key informants (n=44) who hold a broad knowledge of the interests of SJC, including public health, and minority, cultural, and underserved populations
- 2.** Community members at large (n=543) representing 267,618 SJC residents
- 3.** Community Health Advisory Council representing medical and health services fields.

The first stage of assessment was seeking to gather input from key informants. Organizations invited to provide input included the following: Samaritan Counseling Center; MDWise, a Medicaid Managed Care entity; Harper Cancer Research Institute University of Notre Dame; Junior League of South Bend; Bridges Out of Poverty; City of Mishawaka Fire Department; Memorial Family Residency Program; YMCA of Michiana; Hope Ministries, which serves homeless families; Goodwill Industries; Imani Unidad, a not-for-profit organization providing counseling to minorities and persons with HIV; Saint Mary's College; Bike Michiana Coalition; and Healthy Families of St. Joseph County.

Based upon primary and secondary data, a Priority Setting Worksheet was created. The secondary data profile depicts population and household statistics, education, and economic measures, morbidity and mortality rates, disease incidence rates, and other health statistics. Input from each source was inserted into a separate column and assigned a unique weighted percentage based on several factors (e.g., sample size): Key Informants (20%); Community Members at Large (40%); Advisory Council (20%); Secondary Data (20%). The 19 rows in the worksheet represented each of the potential health and social issues listed in the CHNA.

After tabulating the total scores for each issue (ranging from 0 -100%), the following six issues emerged with a score greater than eighty percent (80%) – and were selected as MHSB 2016-2018 priorities:

- Access to Health Care/Uninsured
- Mental Health/Suicide
- Violence/Safety/Trauma
- Diabetes
- Maternal/Infant Health/Prenatal Care
- Obesity/Overweight

The first three were also designated priorities from 2013-2015.

COMMUNITY HEALTH NEEDS NOT BEING ADDRESSED AND RATIONALE

Of the remaining thirteen (13) issues, nine (9) were scored at zero and four (4) (cancer, education, poverty, and substance/ alcohol abuse) were scored from forty (40) to sixty (60) percent. MHSB does not intend to include them in its Implementation Strategy due to the prominence of other community health needs, limited resources, and other organizations within the community addressing those needs.

MHSB provided leadership throughout this 2015 CHNA process. We will continue to lead and engage in active community dialogues to measure and ensure movement toward goals as MHSB’s Implementation Strategy is executed. We also intend to continue helping to support other community needs that emerge from key community leaders and stakeholders, community members at large, and prevalence of health indicators.

2015 CHNA PRIORITY NEEDS AND IMPLEMENTATION STRATEGIES

Each priority need is described in the following pages with its corresponding implementation strategies for addressing the need in 2016-2018.

1

Access to Health Care/Uninsured

NEED: While the arrival of the Affordable Care Act (ACA) provided many SJC residents with needed health coverage, a large segment of our county continues to fall through the cracks for myriad reasons including ineligibility due to lack of legal residency status, the unaffordability of Indiana ACA Marketplace programs for eligible persons, and the increasing trend of high-deductible employer-sponsored plans that are creating delays or barriers for insured persons to utilize health care at the most appropriate time.

CURRENT PROGRAMMING

- 1.** MHSB provides residents access to health care through the Trauma Center and Emergency Department. MHSB and Beacon Health System also serve the community with three Memorial Neighborhood Health Centers: the Southeast Clinic, Father Richard Warner Clinic at the Center for the Homeless, and Centennial Clinic on the Hospital's campus.
- 2.** Health coverage enrollment services are available through Federal Navigators at the Federally Qualified Health Centers, notably, HealthLinc and Indiana Health Center. Enrollment services are similarly available through community centers including Olive Street Clinic, United Health Services, Ivy Tech, and the Center for the Homeless. Indiana Navigators are available throughout MHSB and also through Saint Joseph Health System.
- 3.** Beacon Medical Group physicians' practices provide health care at various locations within SJC. Similar to MHSB, these office teams abide by a financial assistance policy.
- 4.** MHSB provides assistance for low-income SJC residents in securing needed prescription medications through a full-time Medications Assistance Program.

MHSB IMPLEMENTATION STRATEGY

- Expand the community-based enrollment platform with a robust outreach-based hub for enrollment, and advocacy services for low-income and/or eligible SJC residents.
- Dedicate resources to a multi-agency partnership with Covering Kids and Families Indiana (CKF), a statewide advocacy entity for health coverage.
- Dedicate resources to collectively staff a full-time, community-based outreach and enrollment CKF Indiana position for targeting specific eligible but uninsured SJC residents in the ACA Marketplace, Medicaid, Health Indiana Plan, and Hoosier Healthwise. These targeted populations include low-income, the uninsured or underinsured, minority, and working poor. Specific education and enrollment events are held during the ACA Open Enrollment Period, as well as one-on-one assistance during both Open Enrollment and Special Enrollment Periods.
- Provide additional hours dedicated to in-reach within MHSB and Beacon Health System overall.

MEASUREMENT AND POTENTIAL IMPACT

We will track number of St. Joseph County residents served and expect an increase in the provision of health care to St. Joseph County residents and referrals to appropriate community resource organizations.

- Increasing the percentage of enrollments for individuals who attend a Beacon enrollment session
- Increasing the percentage of insured individuals with a primary care provider and/or health oversight
- Increasing the total number of individuals attending enrollment sessions and/or outreach events



2

Mental Health/Suicide

NEED: Collective results ranked mental health/suicide as a pressing health need in both St. Joseph and Elkhart counties. The suicide rate per 100,000 is higher in SJC (13.4) than the nation (12.6), and Memorial's Children's Hospital reported a dramatic increase in pediatric patients hospitalized from failed-suicide attempts. The years of potential life lost before age 75 per age-adjusted 100,000 is also higher in SJC (7,424) than Elkhart County (6,524) and the national benchmark of 5,200. Both counties report more average days of poor mental health when compared to the national benchmark (3.7 and 3.6 versus 2.3 out of 30 days). Of the 549 community survey respondents, 27% reported living with someone depressed, mentally ill, or suicidal; up from 14% in 2012. Mirroring this, 21.5% of SJC respondents reported having been diagnosed with an anxiety disorder (15% in 2012) and 29.2% were diagnosed with a depressive disorder (21% in 2012).

CURRENT PROGRAMMING

- 1.** Memorial Children's Hospital is the co-convener of the Suicide Task Force for SJC. Its purpose is to generate interest in having a community-wide conversation with various stakeholders with the intent to develop and implement a collective impact strategy for suicide prevention.
- 2.** Provide training and expert knowledge regarding Adverse Childhood Experiences to South Bend Community School Corporation (SBCSC) administration and personnel in order to educate them on the effects of trauma on children and the link to negative health and educational outcomes. Interventional programming will also be delivered when appropriate.

3. Continue hosting training in Eye Movement Desensitization and Reprocessing (EMDR) for therapists and licensed community and hospital-based social workers in St. Joseph and Elkhart counties. Additionally, host training in A-Tip, a short-term intervention to help individuals become more stable and calm, diminishing the possibility of becoming traumatized.

MHSB IMPLEMENTATION STRATEGIES

- Collaborate with Memorial Children’s Hospital, St. Joseph County Health Department, and the St. Joseph County Suicide Prevention Center to build and implement a best practice model of youth suicide prevention programming.
- Continue programs 1, 2 and 3 listed above.
- Collaborate with Indiana University South Bend and University of Notre Dame’s Mental Health Counseling programs to provide interns to local service agencies.

MEASUREMENT AND POTENTIAL IMPACT

The anticipated impact of these efforts will be to identify local risk factors, increase education and prevention activities, increase health outcomes, and improve mental health outcomes. This will be achieved by:

- Improving students’ mental health, as measured by SUD and VoC scores before and after each EMDR therapy session
- Demonstrated improvements in class attendance, suspension rate, and grade point average post intervention in comparison to historical student data
- Improving participant’s anxiety and depression scores on the MAYSI-2 scale
- Improving resiliency using the RSCA following a program intervention at the JJC
- Increasing in individual resiliency scores as measured by the RSCA scale
- Increase the number of students that demonstrated improvement on the post intervention resiliency assessment
- Engage 81% of elderly program participants in socio-emotional activities

The suicide rate per 100,000 is higher in St. Joseph County (13.4) than the nation (12.6), and Memorial Children’s Hospital reported a dramatic increase in pediatric youth suicide attempt patients.

3

Violence/Safety/Trauma

NEED: The violent crime rate per 100,000 is higher in SJC (370) than in Elkhart County (264), Indiana (334) and the national benchmark (59). Almost 40% of the Key Informants indicated Violence/Safety/Trauma was a key theme. The Community Survey data showed 23% had been hit, beat, kicked, or physically hurt by a parent or adult in the home, up from the 18.9% in 2012.

CURRENT PROGRAMMING

- 1.** MHSB is an active partner in the South Bend Group Violence Intervention (SBGVI) commissioned by South Bend Mayor Pete Buttigieg. The intervention unites community leaders around the common goal of stopping gun violence and keeping South Bend's highest risk citizens alive and out of prison. Community members are empowered to set clear moral standards against violence in their communities and reclaim a voice in the way they want to live. SBGVI coordinates the efforts of local, state and federal law enforcement.
- 2.** In 2014 St. Joseph County Cares was formed by multiple agencies and organizations in our community (e.g., CHE, Oaklawn, the designated community behavioral and mental health provider; the Juvenile Justice Center and Probate Court; Change Matrix, and enFocus, a not-for-profit business providing training and knowledge in the application of data analytics). Their goal is for all public and private environments to provide consistent, trauma-informed experiences, services; and support for all children in utero through their transition to independence, as well as their families, so they can lead productive and healthy lives.
- 3.** The Trauma Intervention Specialist builds and strengthens working relationships between law enforcement officers, Trauma and Emergency Department personnel, and victims of crime and their families.

MHSB IMPLEMENTATION STRATEGIES

- MHSB Continue with current programs listed above.
- Collaboration between MHSB School Health and Wellness Educator team with Oaklawn's STAND (Students Taking a New Direction) team to deliver resiliency education and training throughout SBCSC health classes.
- Provide training and expert knowledge regarding Adverse Childhood Experiences to Court-Appointed Special Advocate administration and personnel in order to educate them on the effects of trauma in children and the link to negative health and educational outcomes.
- Collaborate with Mental Health Counseling programs at Indiana University South Bend and the University of Notre Dame to provide interns to local service agencies providing services to community members.
- Offer a violence interrupter program to provide emotional support for post-traumatic stress and connect clients with employment or after-school mentoring and parenting programs. Interventionists will also help youth and their families with their medical, legal, educational, housing, and social service needs.

MEASUREMENT AND POTENTIAL IMPACT

The anticipated impact of these efforts will be to identify risk factors, decrease violence, increase education and prevention activities, increase physical health outcomes, and increase mental health outcomes. This will be achieved by:

- Contacting 60% of victims of violence who utilize the Emergency Department
- Assessing Adverse Childhood Experience (ACE) scores for 30% of TIS contacts
- Training 75 new CASAs in understanding the principles of ACE scores
- Increasing utilization of ACE training during case management
- Decreasing group member shooting incidents
- Decreasing the total number of criminally assaulted shooting victims

The violent crime rate per 100,000 is higher in St. Joseph County (370) than in Elkhart County (264), Indiana (334) and the national benchmark (59).

4

Diabetes

NEED: Results from the key informant survey show that in both Elkhart and St. Joseph counties, the fourth most pressing health concern is diabetes. Data shows 20% of SJC respondents reported having been diagnosed with diabetes, compared to fewer than 8% in Elkhart County. In SJC the percentage of respondents with diabetes, pre-diabetes, or gestational diabetes has increased from 2012 community member survey responses. Approximately 49% of diabetic respondents in SJC maintain an A1C level of 7% or below, compared with 37% in Elkhart County.

CURRENT PROGRAMMING

MHSB's resources aimed at diabetes management and prevention efforts for vulnerable populations include:

- 1.** Memorial Healthy Diabetics Outreach (HD), which completed its second year of training and utilizing Community Health Workers (CHWs) to assist individuals in managing their diabetes. HD is partnered with the Food Bank of Northern Indiana to reduce food insecurities by offering two cooking demonstration sessions per month to its clients.
- 2.** St. Joseph County Women Infants and Children (WIC) will provide guidance to pregnant women with gestational diabetes to manage their condition through the program, *Bebes Dulces sin Azucar*.
- 3.** YMCA City of South Bend Diabetes Prevention Program has a four-year partnership with the Center for Disease Control, designed for those at high risk for developing Type 2 diabetes (i.e., overweight with pre-diabetic conditions) to help them adopt and maintain healthier lifestyles and prevent the onset of the disease.

MHSB IMPLEMENTATION STRATEGIES

- Continue with programs 1, 2, and 3 listed above.
- Collaborate with the SJC Health Department and the City of South Bend in furthering their progress in building a Let's Move City initiative. This will include walking school buses and increased opportunities for children in South Bend to access healthy exercise environments.
- Expand supportive connections between HD and Beacon Medical Group's clinics.

MEASUREMENT AND POTENTIAL IMPACT

Measurement will take place within program parameters. The anticipated impact of these efforts will increase education and health outcomes around healthy eating, importance of physical exercise, increased disease management skills, and reduced hospital ED visits. This will be achieved by:

- Reducing high risk A1C population from 40% to 20% during a 6-9-month intervention period
- Reducing ED visits after starting HD Program as compared to historical ED visitation rate per patient
- Increasing savings from hospital avoidance due to community health worker intervention
- Helping program participants achieve their physical fitness goal (at least 150 minutes of physical activity during the program)
- Helping program participants achieve their weight loss goal (7% of starting body weight)

Of St. Joseph County respondents, 20% reported having been diagnosed with diabetes, compared to fewer than 8% in Elkhart County. In St. Joseph County, the percentage of respondents with diabetes, pre-diabetes or gestational diabetes has increased from 2012 community member survey responses.



5

Maternal/Infant Health/Prenatal Care

NEED: Multiple health measures from the 2015 CHNA support the issue of maternal/infant health/prenatal care as a community health priority. The teenage birth rate is higher in SJC (28.4) than the nation overall (26.5). Both St. Joseph and Elkhart counties have low first trimester prenatal care rates among Black/African American residents (approximately 50%). Infant and neonatal mortality rates are likewise higher in SJC (8.7 and 6.7, respectively) when compared to Indiana and the nation. Several perinatal health indicators were also noted, including the rate of first trimester entry into prenatal care, with specific focus on first trimester into care for black mothers; smoking rates during pregnancy; and low birth weight.

CURRENT PROGRAMMING

Unfortunately, the Prenatal Care Coordination Program was terminated in July 2015 due to reductions in state funding, which directly impacts approximately 250 low-income pregnant women per year. This has created a clear need to collaborate with other local public health services to address prenatal care.

MHSB IMPLEMENTATION STRATEGIES

- MHSB will provide prenatal care for low-income vulnerable and at-risk mothers and babies through a new Perinatal and Infant Health Project (PIHP). This project will provide several direct services to promote maternal health—services that will continue to support the infant/parents until the child’s first birthday. Community partners will include Prevent Child Abuse of St. Joseph County, the BABE Store, WIC nutrition program, the Family Practice Residency Program, and the hospital’s Mother/Baby Unit.

- By the end of year one we project 50 families with children up to 6 months of age to be provided with maternal and child services.
- In year two, we will likely have 100 families with children who are one year old.

MEASUREMENT AND POTENTIAL IMPACT

Evaluation measures are expected to include: rates of first trimester into prenatal care for the general pregnant population and specifically in the African American pregnant population; rates of smoking in pregnant women at time of delivery; number of pregnant families enrolled in health coverage. MHSB intends to work collaboratively with EGH to align measurement and tracking as the issue of perinatal health was identified in both counties. The anticipated impacts are to reduce the incidence of prenatal risk factors and the number of eligible but uninsured pregnancies in SJC. In addition, we aim to positively impact the outcome of pregnancy over a multi-year period. Through additional programming maternal/infant health/prenatal care coordination seeks to also achieve the following:

- Display evidence of reduced adverse birth outcomes
- Display correlation between program engagement and stabilized and/or improved clinical indicators, such as birth weight and NICU rate
- Observe and track at least 100 diabetic mothers upon referral to MFM until 6 months' post-partum
- Increase knowledge of safety techniques and sleep practices
- Increase redemption of BABE coupons – indicating engagement in health education classes
- Reduce rate of 9th grade participants in the DTL/RTL Program who have engaged in sex
 - 90% of the participants will know how to resist peer pressure
 - 85% will respect limits others set for themselves
- Increase sickle cell knowledge of community members who attend sickle cell educational sessions



6

Overweight/Obesity

NEED: Over 17% of children in SJC are overweight and/or obese. With the correlation between numerous adverse chronic and emergent health conditions, being overweight or obese was cited as the most significant community health issue in the key informant survey and a high priority during group discussions.

CURRENT PROGRAMMING

MHSB engages and invests in multiple efforts aimed at addressing obesity prevention and reduction through education classes on various topics related to obesity, obesity prevention, nutrition and exercise.

- 1.** Beacon Health System's Circle Wellness program for employees encourages and helps establish healthy behaviors to prevent and reduce obesity.
- 2.** Obesity, weight loss, and nutrition information, resources, and referrals for Latino communities are available through MHSB Hispanic Outreach.
- 3.** Memorial HealthWorks! Kids Museum, an educational arm of Memorial Children's Hospital, provides high-quality health education experiences to children and families throughout Michiana and beyond. HealthWorks! is not only on-location but also through community outreach services, bringing health education flair to churches, schools, businesses, community-wide events, and youth service programs.
- 4.** Prescription to Play reduces childhood obesity through physical activity programming and nutrition education. This free program consists of organized physical games and nutrition education for preschool through middle school aged children, based on the evidence-based Coordinated Approach to Children's Health program.

MHSB IMPLEMENTATION STRATEGIES

- Continue programs 1 through 4 listed above.
- Madison Primary School and Leeper Park Initiative: At its completion, the project will provide STEM education to children beyond the classroom at Madison Primary Center, as well as MHSB patients and families. This will be a collaboration with Unity Gardens, South Bend Parks and Recreation Department, and the University of Notre Dame.
- La Casa de Amistad, a local community center, will continue to be a gateway for partnerships to make gains in the Latino community and increase access to programming.
- Collaborate with SJC Health Department and the City of South Bend in furthering their progress in building a Let's Move City initiative. This will provide increased opportunities for children in South Bend to access healthy exercise habits.

MEASUREMENT AND POTENTIAL IMPACT

Measurement will be ongoing within program parameters. The anticipated impact of these efforts will be to increase education and health outcomes around healthy eating and the importance of physical exercise. This will be achieved by:

- Increasing the number of children that were able to achieve their weight loss goal
- Increasing the number of children that met or exceeded their physical fitness ability goal
- Increasing the total amount of children that are able to utilize the activities and resources provided by Prescription to Play
- Increasing the number of trips/steps taken to the park, utilization of park resources and physical activity over weeklong summer camp
- Increasing the consumption of fruits and vegetables by monitoring the student and garden guide checklist





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