



COMMUNITY HEALTH

IMPLEMENTATION STRATEGY 2020-2023

TABLE OF CONTENTS

Priority 1: Prevent and Manage Chronic Disease1-17

1.1 – Enhance Skills & Provide Support

1.1.1 – Caregiver Support1

1.1.2 – Better Breathers Group2

1.1.3 – Diabetes Education3

1.2 – Manage Risk

1.2.1 – Own the Bone® Program5

1.2.2 – Patient Immunization Education6

1.2.3 – Post-Discharge Wellness Partnership7

1.2.4 – Annual Health Screenings8

1.2.5 – Infant Safety Screening9

1.2.6 – Chronic Disease Health Program10

1.2.7 – Community Pandemic Response11

1.3 – Enhance Access

1.3.1 – Telemedicine13

1.3.2 – Increased Access to Outpatient Services14

1.4 – Provide Education

1.4.1 – Infant Safety15

1.4.2 – Health Awareness & Outreach16

1.4.3 – Chronic Disease Management17

Priority 2: Increase Mental & Behavioral Health Services and Education19-24

2.1 – Manage Risk

2.1.1 – Substance Abuse Screenings19

2.1.2 – Opioid Task Force19

2.1.3 – Workplace Violence Mitigation20

2.2 – Enhance Access

2.2.1 – Transportation Access20

2.2.2 – Para-Medicine Services21

2.2.3 – Expanding Continuum of Care Support22

2.2.4 – Contemplation Pathway23

2.3 – Provide Education

2.3.1 – Mental Health Social Posts24

Priority 3: Increase Economic Development25-33

3.1 – Manage Risk

3.1.1 – Social Determinants of Health Assessment25

3.2 – Enhance Access

3.2.1 – Food Insecurity26

3.2.2 – Meals on Wheels27

3.2.3 – Patient Access to Medical Equipment28

3.3 – Provider Education

3.3.1 – Project Search29

3.4 – Stabilize Workforce

3.4.1 – Health Science Academy30

3.4.2 – Student Experiences31

3.4.3 – Healthcare Career Fairs32

3.5 – Charitable Giving

3.5.1 – Financial Assistance33

Appendices A & B34-43

Glossary of Abbreviations44

FY2020-2023 NMC Health Community Health Implementation Strategy

PRIORITY 1 Prevent & Manage Chronic Disease

1.1.1 CAREGIVER SUPPORT

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short Term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent & Manage Chronic Disease	Enhance Skills and Provide Support	Generations Social Worker	Caregiver Support Group	<p>Education will be provided to caregivers each group session.</p> <p><u>Summary</u></p> <p>Develop referral brochure to connect caregivers with community support.</p> <p>Referrals are offered to attendees for community resources.</p>	<p>Year 1 goals continue</p> <p><u>Summary</u></p> <p>Transition back to face-to-face meetings.</p> <p>In person meetings resumed in July of 2022.</p>	<p>Year 1&2 goals continue into Year 3</p> <p><u>Summary</u></p> <p>Attendance grows from 1-2 to five in Q3.</p>	<p>Measured Outcome (MO) List the educational topics for the year</p> <p>Topics presented over this implementation period included those listed in the gray box at left.</p> <p>Percent of support attendees provided referrals.</p> <p>Number of referrals to external community organizations is dependent on identified needs.</p>

Topics Presented

- Self-care strategies
- How to cope with a loved one's changed cognition
- Tips/tricks working with dementia
- Types of dementia
- The role of Medicare, Medicaid, and insurance in day-to-day care/placement
- Denial
- Anger with changes in lifestyle
- Anger with systems that don't help as much as caregiver would hope
- Grief
- Process for placement
- In-home services
- Legal issues that come when someone's cognition changes
- Navigating unsupportive family/friends

1.1.2 BETTER BREATHERS CLUB							
Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short Term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent & Manage Chronic Disease	Enhance Skills and Provide Support	Director of Respiratory Care	Expand care of patients with chronic respiratory disease through the Better Breathers Club meetings	<p>Offer two Better Breathers Club quarterly meetings in a virtual format by the end of FY 2021.</p> <p><u>Summary</u></p> <p>Due to the COVID-19 pandemic, meetings were moved to virtual. Attendance was poor. Respiratory Therapists initiated discussions with COPD patients about the benefits of attendance.</p>	<p>Year 1 goals continue.</p> <p><u>Summary</u></p> <p>Staffing turnover and training requirements have caused the Better Breathers Club to be on home the greater part of the FY.</p>	<p>Better Breathers Club meetings will resume once staff have completed training.</p> <p><u>Summary</u></p> <p>Marketing efforts have increased with mailers, website, social media etc. Respiratory Care has had challenges with leadership of the group and have experienced poor attendance. Increased marketing efforts have not yielded greater attendance.</p>	<p>MO= Number of virtual Better Breathers Club meetings held.</p> <p>The total number of Better Breathers Club meetings for this implementation period were three. This program was on hold during the pandemic and relaunched in 2023.</p>

1.1.3 DIABETES EDUCATION

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short Term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent & Manage Chronic Disease	Enhance Skills and Provide Support	Diabetes Educator	Reduce overall Hemoglobin A1C	<p>NMC Health Diabetes Education program participants will maintain an average A1c target of <7%.</p> <p><u>Summary</u></p> <p>The first 6 months of FY 2021 the NMC goal is being achieved at 6.8%. New data for the second 6 mo. of FY2021 will be available in early July.</p>	<p>Continue with the ADA standard for A1c target of <7%.</p> <p><u>Summary</u></p> <p>FY 2022 Most recent data from 6/2022 is that NMC Diabetes Education patients average A1c was at 6.77%.</p>	<p>Continue with the A1c target of <7%.</p> <p><u>Summary</u></p> <p>During this FY we have had the onboarding of a new Diabetes Educator.</p> <p>Support group continues to be offered virtually and in person with consistent attendance.</p> <p>FY ending A1c's remain close to goal at 7.08.</p>	<p>Bi-annual data will indicate Diabetes Education participants have averaged an A1c goal of <7%.</p> <p>The three-year average for Diabetes Education participant HbgA1c's was 6.75%</p>
			Speaking Engagements for Community Education	<p>Diabetes Educator will present at a minimum of two community speaking engagements per year.</p> <p><u>Summary</u></p> <p>Presentation given to NHS students on 12/1/20.</p>	<p>Year 1 goals continue.</p> <p><u>Summary</u></p> <p>4 speaking engagements this year.</p>	<p>Year 1&2 goals continue into Year 3.</p> <p><u>Summary</u></p> <p>5 speaking engagements this year prior to December.</p>	<p>MO= Number of speaking engagements</p> <p>The Diabetes Educator has presented in 10 different speaking engagements over this time period.</p>

			Diabetes Support Group will meet on a monthly basis for client support and education	Diabetes Support Group will meet monthly with an educational offering each meeting. <u>Summary</u> The Diabetes Support Group met virtually until April 2021. It is now offered in person, virtual and livestreamed on Facebook. Educational programing is now available via telehealth with the addition of a second educator.	Year 1 goals continue. <u>Summary</u> Diabetes Support groups continue.	Year 1&2 goals continue into Year 3. <u>Summary</u> Diabetes Support groups continue.	MO= Number of Diabetes Support Groups held The Diabetes Support Groups continue to be held monthly in a virtual and face-to-face format for a total of 36 over the last three years. Attendance remains stable at 6-10 attendees.
			Mentoring/Education	Diabetes Educator will establish a mentoring program for Harvey County healthcare professionals seeking Diabetes Education Certification. One individual was involved in precepting during December. An additional educator was on boarded allowing for offering of telehealth for Harvey County with planning for outside of Harvey County in the future.	Year 1 goals continue. Two persons, an APRN and a PA-C were mentored by the Diabetes Educator this FY.	Diabetes Educator remains available for Health professionals seeking clinical observation hours. The Diabetes Educator remains available for clinical observation hours throughout the year.	MO= Number of certified educator resources Three individuals were mentored through the NMC Diabetes Education program over the course of this implementation plan

1.2.1 OWN THE BONE PROGRAM

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short Term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent & Manage Chronic Disease	Manage Risk	Orthopedic Providers	Build on current program for prevention of fractures due to osteoporosis	<p>Qualifying participants in the Own The Bone program will be screened for osteoporosis.</p> <p><u>Summary</u></p> <p>NMC Health (Newton Medical Center) was named a top performing program in the Nation. This designation appeared in US News and World Report, Best Hospital edition. Out of 10 measures, NMC met the criteria 100% of the time on 9 measures and 90% on other measures.</p> <p>Total patients enrolled in the Own The Bone program tabulated at the end of June 2021.</p> <p>Osteoporosis Prevention education is scheduled for social media in May, 2021.</p>	<p>Year 1 goals continue.</p> <p><u>Summary</u></p> <p>4th year that NMC Health has been recognized as a 5-star performer in the Own the Bone Program.</p>	<p>Year 1 goals continue.</p> <p><u>Summary</u></p> <p>Our orthopedics team is recognized as an Own the Bone Star Performers for the 5th year in a row.</p> <p>Star performers achieve 75% compliance on 5 out of 10 measures that help patients avoid future fractures. We exceed compliance in all 10 areas, achieving 100%</p> <p>Software has been added to the DEXA scanner which reads the trabecular bone. This addition to the routine DEXA scan and is a better indicator of osteoporosis.</p>	<p>MO= Number of participants enrolled compared to FY 2020</p> <p>For the Fifth year, NMC Health was recognized as a 5-star performer by the Own the Bone program. 188 patients are now registered in the Own the Bone Program.</p>

1.2.2 PATIENT IMMUNIZATION EDUCATION

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent & Manage Chronic Disease	Manage Risk	Acute Nursing Departments/ Pharmacy/Infecti on Control	Screen and offer inpatients appropriate immunizations.	<p>Goal of 98.5% of inpatients, ages 12 months or older, to be screened with appropriate seasonal immunizations offered.</p> <p><u>Summary</u></p> <p>NMC ended the flu season with a 99% compliance with assessing inpatients for flu vaccinations.</p>	<p>Maintain 98.5% for flu immunizations.</p> <p><u>Summary</u></p> <p>End of 2020-2021 season was 99%.</p>	<p>Maintain 98.5% for flu immunizations.</p> <p><u>Summary</u></p> <p>Year ended at 98.08%.</p>	<p>MO= Percent of inpatients offered seasonal immunizations</p> <p>During this implementation period 98.7% of inpatients at NMC were screened and offered the seasonal immunizations.</p> <p>NMC Health provided 2,099 flu immunizations and 1,072 Covid Immunizations over the course of this implementation plan.</p>

1.2.3 POST-DISCHARGE WELLNESS PARTNERSHIP

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent & Manage Chronic Disease	Managing Risk	Chief Operating Officer and the YMCA	Expansion of the “warm handoffs” to the YMCA to include IRU	<p>Develop process for IRU patients to enter programs at the YMCA.</p> <p><u>Summary</u></p> <p>Further evaluation suggests that IRU patients are not at a point in care for ‘warm handoffs’ to YMCA services. Will focus on whether this is appropriate for Pulmonary Rehab patients.</p>	<p>Year 1 goals continue.</p> <p><u>Summary</u></p> <p>The NMC Health COO and ACCO met with YMCA to introduce new outpatient services, review current partnerships and discuss ideas for potential partnerships.</p> <p>WSU Master’s Student capstone project researches and recommends options and viability of impactful collaborations of the Newton YMCA and NMC Health.</p>	<p>Evaluate grad-student research. Determine appropriate elements based on results.</p> <p><u>Summary</u></p> <p>The WSU master’s students’ findings were reviewed. Results were that there was not a compelling use case for each option identified.</p> <p>No further action is planned at this time.</p>	<p>MO=Establishment of a process for IRU patients to participate in activities at the YMCA</p> <p>Final findings from this strategy indicated that this intervention was not feasible.</p>

1.2.4 ANNUAL HEALTH SCREENINGS

Priority	Strategies	Inputs	Activities	Outputs			Priority
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent and Manage Chronic Disease	Manage Risk	<p>Business Development Director</p> <p>Changed to Marketing FY2022</p>	Construct annual health screening campaign	<p>Develop and implement health screening campaigns for:</p> <ul style="list-style-type: none"> -mammography -diabetes -colorectal cancer screening -cholesterol -osteoporosis <p>See Appendix A for calendar and annual summary of posts.</p> <p><u>Summary</u></p> <p>351 total education/awareness posts were executed across multiple social media platforms (each post appearing on 1-4 platforms). Appendix A calendar shows minimum required posts. Appendix A post summary shows additional topics covered.</p>	<p>Year 1 goals continue.</p> <p>See Appendix A for calendar and annual summary of posts.</p> <p><u>Summary</u></p> <p>227 total social media posts were executed. Each post appeared on 1-4 platforms. Appendix A calendar shows minimum required posts. Appendix A post summary shows additional topics covered.</p>	<p>Goals as set forth in Appendix A calendar.</p> <p>See Appendix A for annual summary.</p> <p><u>Summary</u></p> <p>308 total posts across 1-4 platforms. See Appendix A for scheduled calendar and summary of completed posts for the year.</p> <p>Expanded the Choose Wisely community collaboration to include messages for immunizations, flu prevention, mental health screenings, and regular wellness screenings. Developed a screening and immunization guide for individuals.</p>	<p>MO = Number of health screening campaigns held</p> <p>886 posts completed covering topics from addiction to workplace safety.</p> <p>See Appendix A for greater detail.</p> <p>Introduced the new Choose Wisely campaign during a Chamber of Commerce Breakfast in fall 2022 and increased the number of collaboration partners by 28%.</p> <p>Nearly 650 “Staying Healthy” screening and immunization guides were requested by and provided to area employers.</p>

1.2.5 INFANT SAFETY SCREENING

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent and Manage Chronic Disease	Manage Risk	Family Birthing Center	<p>Participate in Neonatal Abstinence Syndrome Vermont Oxford Network</p> <p>Revision- Mothers on the FBC unit will receive education on Safe Sleep</p>	<p>Develop standardized neonatal abstinence screening protocol.</p> <p><u>Summary</u></p> <p>The Neonatal Abstinence participation opportunity has ended. It was retired in February of 2021.</p> <p>Distribution of Sleep Sacs to all newborns went live in March 2021.</p> <p>NMC Health employees a Safe Sleep educator and will apply for certification at 6 months.</p>	<p>Apply for (beginning in Oct 2021) and become Safe Sleep Certified by KIDS (Kansas Infant Death and SIDS) Network.</p> <p><u>Summary</u></p> <p>Safe Sleep Certification application and revisions submitted.</p>	<p>NMC Health FBC will follow P&P to maintain ongoing certification.</p> <p><u>Summary</u></p> <p>Safe sleep certification Received September 2022 and certification goes through 2025 compliance audits for Safe Sleep remain at 100%.</p>	<p>Safe Sleep implemented at NMC Health and educational offerings began in the community.</p> <p>Evaluation indicates that 100% of newborn parents receive Safe Sleep education at NMC Health.</p> <p>Safe Sleep presentation was given at the 2023 Harvey County Safety Fair</p>

1.2.6 CHRONIC DISEASE HEALTH PROGRAM

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent & Manage Chronic Disease	Manage Risk	Vice President of Physician Clinics	<p>Chronic Care Management program</p> <p>Renamed to Chronic Care Manager (CCM)</p>	<p>NMC Health Family Medicine clinics will develop and implement a Chronic Care Management (CCM) program during FY 2021:</p> <p><u>Summary</u></p> <ul style="list-style-type: none"> • Q1 development of job descriptions • Q2 policy on management of registries for Diabetes and Hypertension • Q3 Physician approval of timelines and objectives • Q4 Designated nurse at each location <p>Summary A job description, policies and a Diabetes Registry were developed and approved for the CCM. The Family Medicine-Hesston providers approved a Care Path for Diabetes management and work has begun in collaboration with the Diabetes Education Department. This program will now move to Family Medicine-Valley Center where a CCM has been hired and is in the process of onboarding.</p>	<p>Have 50% of registry patients accomplish their objectives as determined per policy.</p> <p><u>Summary</u></p> <p>Establish Diabetes and Hypertension Registry at Valley Center with affiliated Care Paths approved by providers Hire a CCM at the North Amidon Clinic.</p> <p>The lack of Staff development opportunities caused a long-term delay in development of this program.</p>	<p>Implement the Chronic Care Management program in Hesston and be successfully seeing enrolled patients by the end of FY2023.</p> <p><u>Summary</u></p> <p>Eight patients are enrolled in the Chronic Care Management (CCM) program at the NMC Family Medicine-Hesston Clinic. The Chronic disease focus for these patients is Hypertension. Data is being submitted to KHC for an ongoing project on a quarterly basis.</p>	<p>MO=Program for Chronic Health Nurse will be implemented in Family Medicine clinics</p> <p>The CCM program did not fully launch until FY 2023. There are eight patients registered in this program to date. Hesitancy to enroll is usually due to the cost/month for this program which averages \$30/month for Medicare patients.</p>

1.2.7 COMMUNITY PANDEMIC RESPONSE

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent and Manage Chronic Disease	Manage Risk	Chief Clinical Officer	Participate in community pandemic response	<p>Coordinate supplies and testing access with public health.</p> <p>Host four community educational offerings for long term care facility, public health, clinics and hospital.</p> <p><u>Summaries</u></p> <p>A Case Management representative met each Monday for collaborative education with LTCs, Harvey County Health Department and Harvey County Emergency Management. These meetings continue on an every-other-week basis presently.</p> <p>NMC Health collaborated with Health Ministries Clinic for COVID vaccination of our employees.</p> <p>NMC Health led the community education campaign, Choose Wisely, with ~31 community partners on safety protocols and mask wearing.</p> <p>Leader in Materials Management resources and contacts for EMS, LTCs and other organizations in regards to PPE acquisition.</p> <p>NMC Health CCO and CMO participated in a live panel discussion regarding vaccines hosted by Harvey County NOW.</p>	<p>Coordinate supplies and testing access with public health.</p> <p><u>Summaries</u></p> <p>A Community Emergency Response meeting was attended by Safety Officer. The goal is to initiate a community plan for PPE supplies and storage.</p> <p>Infection Control Officer planned a joint initiative with Harvey County Health Department in August 2021. Goal was vaccine awareness and mitigating vaccine hesitancy.</p> <p>Contributions to pandemic response include: Assistance with vaccine clinics Offering vaccines (flu and COVID) to employees along with family and friends, served as a resource for nursing homes, schools and other healthcare providers.</p>	<p>Proactively source suppliers, manage supply chain and manage storeroom assets for effective distribution. Serve as an expert resource on procurement strategies for community partners.</p> <p><u>Summaries</u></p> <p>Calls were discontinued in April of 2022 and will resume if and when needed.</p>	<p>MO= Ensure supplies and testing access is available for projected need</p> <p>MO= Number of hosting opportunities for community</p> <p>NMC Health organized and hosted the community meetings between Long Term Care facilities, Harvey County Health Department and Harvey County Emergency Management during the pandemic (beginning Fall 2020 through April 2022, when the calls were discontinued)- approximately 15 calls where completed.</p>

<u>New for 2023</u>							
Prevent and Manage Chronic Disease	Manage Risk	NMC Health Occupational Medicine	Industrial Athletic Training Role	New service offering which began in 2022. One of the Midwest Occupational Medicine Athletic Trainers, contracted with local manufacturers, for managing on site injuries and worksite injury prevention. Program piloted at AGCO in Hesston with a second AT added in April 2022 due to success of the services.		Year 3 Build the Industrial AT role and initiate with additional businesses. <ul style="list-style-type: none"> Two AT's remain employed at AGCO, focus of care on prevention of repetitive injuries, ergonomics and treatment of acute injuries. 	The goals of the industrial athletic trainers are to accomplish the following: <p>Reduction of repetitive work injuries.</p> <p>Early interventions for acquired work injuries.</p> <p>The current focus of the AT role has been more direct urgent care with preventive care remaining a goal</p>

1.3.1 TELEMEDICINE

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent & Manage Chronic Disease	Enhance Access	NMC Health Clinics NMC Health Home Care	Telemedicine	<p>NMC Health will offer telemedicine services to appropriate patients in Home Care and the Family Medicine clinics.</p> <p><u>Summaries</u></p> <p>Telehealth visits were enabled in LTC's, allowing providers to interact with their patients.</p> <p>Home Care utilizes virtual visits for Plan of Care Review and Telehealth equipment integration with Meditech (EMR) for monitoring patient conditions. NMC Health has expanded use of telehealth in Wound Care, Cardiac Rehab and Diabetes Education.</p>	<p>Year 1 goals continue.</p> <p>Virtual Skilled Nursing and telehealth equip. available for high-risk Home Care patients.</p> <p><u>Summaries</u></p> <p>Clinic virtual appts remain low but are available. Using for LTC visits.</p> <p>Home Care continues to offer virtual visits and telehealth, home monitoring, for high risk patients.</p>	<p>Year 2 goals continue.</p> <p><u>Summaries</u></p> <p>Telemedicine available in clinics, utilization minimal. Continues to be used in Home Care.</p> <p>New telemedicine equipment installed in Home Health to streamline processes, improve remote monitoring, and enhance patient education related to their disease process.</p>	<p>MO= number of patients served by telemedicine per service line for FY 2021</p> <p>Reports show that 464 patients have been served via telemedicine in the clinics, outpatient departments, Diabetes Education and Wound Care over the course of this plan. NMC Home Care has conducted 113 visits using telemed during this time frame.</p>

1.3.2 INCREASE ACCESS TO OUTPATIENT SERVICES

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent and Manage Chronic Disease	Enhance Access	Imaging Director/ Associate Chief Clinical Officer	Expand hours of outpatient service lines to increase access	<p>Design expanded hours for one modality in imaging and one service line in outpatient services.</p> <p><u>Summary</u></p> <p>Imaging has reduced pricing for studies in health focus months (e.g. Ca++ CT's for \$50 in February). The Imaging Department now offers PET scans an additional two days per month. The addition of a second mammogram machine in May 2021 will allow the number of women served to increase from 18/day to 30/day.</p>	<p>MRI and CT to offer extended hours through 9PM on Mon-Thurs, by July 2021.</p> <p><u>Summary</u></p> <p>Extended hours for MRI and CT began 07052021. All appointments filled quickly and have remained consistently full.</p> <p>Onboarded an additional Ultrasound tech and machine. Available appointments went from 32-62/day.</p>	<p>Open daily Sonography schedule to accommodate an increase of 30 exams per day.</p> <p><u>Summary</u></p> <p>A third sonography room fully functional, staffed and the schedule is full.</p>	<p>MO = Number of patients served by extended hours</p> <p>Approximately 498 additional MRI and Sonogram patients have been served in the past two years of this implementation plan.</p>

1.4.1 INFANT SAFETY & SUPPORT

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent and Manage Chronic Disease	Provide Education	Family Birthing Center	Provide education regarding appropriate infant transport	<p>Complete car seat checks and education to discharging maternal child population.</p> <p><u>Summary</u></p> <p>Car seat checks were reduced to appointment only during the height of the pandemic. The intent is to resume "Check Lanes" by the end of CY2021.</p>	<p>Host two "Car Seat Check Lanes" in FY2022.</p> <p><u>Summary</u></p> <p>Four cars seat Lanes were hosted during this year. NMC Health has a total of 3 staff certified to do car seat checks.</p>	<p>Will host two "Car Seat Check Lanes" in FY2023.</p> <p><u>Summary</u></p> <p>Four car seat check lanes have been hosted during this FY.</p>	<p>MO = Number of car seat checks completed for FY 2021</p> <p>NMC Health has hosted seven car seat "Check Lanes"</p>
			<p>Provide community educational event for maternal infant population</p> <p><u>Additional activities:</u></p> <p>Infant Transition Task Force</p> <p>Hearing screenings:</p>	<p>Participate in annual community baby shower by offering educational materials.</p> <p><u>Summary</u></p> <p>NMC Health will participate in the Community Baby Shower when scheduled.</p> <p>The Infant Transition Task Force includes staff from the Family Birthing Center, Case Management and Home Care. They collaborate on safe care referrals for infants following dismissal from the hospital.</p> <p>If an infant fails their first hearing screening in the hospital, the repeat screening is offered free of charge by NMC Health to eliminate compliance concerns with the second screening.</p>	<p>Year 1 goal/s to continue in Year 2.</p> <p><u>Summary</u></p> <p>From July 2021 to April 2022 Community Baby showers were suspended due to the pandemic.</p> <p>Approximately 50 moms were served at the Community Baby Shower and NMC Health donated Pack n Plays as well as \$250.</p>	<p>Continued participation in annual community baby shower.</p> <p><u>Summary</u></p> <p>Planning in place for a September event. Tera Stucky, RN FBC and Madison Pankratz, Social Worker are NMC reps to this committee.</p>	<p>MO= Number of participants in community baby shower</p> <p>Due to the pandemic, the Community baby shower was not held in Spring of 2021 or 2022. 50 participants attended in Spring of 2022 and the 2023 event is scheduled for September.</p>

1.4.2 HEALTH AWARENESS & OUTREACH

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent & Manage Chronic Disease	Provide Education	Marketing/NMC Wellness Team	Social Media Education based on The Society for Healthcare Strategy and Market Development (SHSMD) by the American Hospital Association Calendar and NMC Wellness Team	Monthly health awareness topics posted on social media. <u>Summary</u> See summary under Appendix A for awareness efforts posted on social media during year 1. Quarterly NMC Health Employee Wellness Challenges emphasized core strength, stress management, walking, and gratitude. The public was encouraged to participate. (e.g.) WALKtober –the 50, 000 mile walking challenge to employees was met at 52,258.82 miles	Year 1 goal/s to continue in Year 2. <u>Summary</u> See summary under Appendix A for awareness efforts posted on social media during year 2. Quarterly NMC Health Employee Wellness Challenges included kindness, eating the rainbow, stress management, and spot the salt. The public was encouraged to participate.	Year 1&2 goals continue into Year 3. <u>Summary</u> See Appendix A for social media efforts during year 3. Quarterly NMC Health Employee Wellness Challenges included preventive screenings, walking, healthy eating swaps, and healthy sleep habits. The public was encouraged to participate.	MO= 12 health awareness topics will be posted on Newton Medical Center’s social media sites An average of 24.6 educational social media posts were executed each month. Four employee wellness engagement activities were completed each year.
			Walkie Talkie topics include a walk along the NMC Fit Path	Quarterly Walkie Talkie’s to be offered in person or virtually. <u>Summary</u> Walkie Talkie’s included Dr. Koontz on Walktober (1071 reach), Dr. Kadam discussion core strength to improve spine issues (801 reach), and Dr. Stanley offered a presentation on stress and burnout (1143 reach).	Year 1 goal/s to continue in Year 2. <u>Summary</u> Walkie Talkie subjects included: Nutritionist Mary Steinbrock on low salt recipes (720 reach); Monica Turner on Managing Stress (890 reach); Scott Metzler on Kindness (1789 reach); FANS director Randy Davis with an Eat the Rainbow cooking demonstration (1008 reach).	Year 1&2 goals continue into Year 3. <u>Summary</u> Walkie Talkies included: Dr. Stanley on Preventive Care (613 reach), Healthy Steps with Lorrie Kessler (678 reach), Healthy Swaps with Mary Steinbrock (632 reach), Healthy Sleep with Vince Perry (476 reach).	MO= Number of events and corresponding topics Eleven Walkie-Talkies have taken place over the course of this plan. Topics included are listed with each year’s summary.

		NMC Marketing Team	Lead a collaborative effort for unified health care messages to be communicated by critical community cohorts for a stronger community impact.	<p>Initiate a community collaboration for unified COVID-19 communication efforts.</p> <p><u>Summary</u></p> <p>A “Choose Wisely” collaboration featuring 20+ Harvey County partners from healthcare, government, education, first responder organizations, and private business was kicked off in November 2020.</p> <p>A series of “Your Choices Matter. Choose Wisely.” posters were provided to partners to educate the community on masking, hand washing, social distancing, large crowds, staying home when sick, and cleaning high-touch surfaces.</p> <p>A series of videos featuring community members about why they choose to mask was produced and shared on social media.</p>	<p>Continue collaboration with renewed COVID-19 messages.</p> <p><u>Summary</u></p> <p>The “Choose Wisely” collaboration increased to 23 Harvey County partners.</p> <p>A series of “Your Choices Matter. Choose Wisely.” posters were provided to partners to educate the community vaccines and COVID-19 basic prevention.</p> <p>A series of videos featuring community members about why they choose to vaccinate was produced and shared on social media.</p>	<p>Expand collaboration focus beyond COVID-19 to broader health needs.</p> <p><u>Summary</u></p> <p>The “Choose Wisely” collaboration increased to 26 named Harvey County partners and 5 additional supporting partners.</p> <p>A series of “Choose Wisely” posters were provided to partners to educate on flu season, immunizations, wellness screenings, and mental health. Messages were also shared on social media.</p>	<p>MO= Number of collaboration partners.</p> <p>The Choose Wisely community health campaign collaboration featured 31 partners sharing unified messages on health priorities in Harvey County.</p> <p>A public dialogue was sparked on, “What does it mean for our community to be healthy?” Ideas ranged from sustainable infrastructure, healthy economy, quality housing, living wage, and healthcare access to food insecurity.</p>
		Facilities Department	Conduct two pathway/fitness counts for utilization and fishing for FY 2021	<p>Promote pathway and fitness of whole body.</p> <p><u>Summary</u></p> <p>There is an average of 20 Life path users/day 5-10 pond users/week (counts based on anecdotal observation over 6-month period).</p>	<p>Year 1 goal/s to continue in Year 2.</p> <p><u>Summary</u></p> <p>Informal count reported as 10-12 persons at mid-day consistently throughout the FY.</p>	<p>Year 1&2 goals continue into Year 3.</p> <p><u>Summary</u></p> <p>Informal counts are at 6-12 walkers at mid-day.</p>	<p>MO= Establish baseline count of persons utilizing the fitness pathway and fishing opportunities</p> <p>Mid-day counts over the three years have averaged between 6-12 depending on weather and season.</p>

1.4.3 CHRONIC DISEASE MANAGEMENT

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Prevent and Manage Chronic Disease	Provide Education	Executive Director of Clinical Outcomes	Collaborate with community partners on consistent Stoplight Zone patient education for Chronic Disease management	<p>Implement utilization of Stoplight for Congestive Heart Failure, Diabetes and Chronic Obstructive Pulmonary Disease deployed for use by end of FY 2021.</p> <p><u>Summary</u></p> <p>The new Stoplight Zone patient education document was completed and sent to all providers. Case Management is working with IT to have the Stop Light Zone resource auto print for Diabetes, COPD, and CHF patients along with the discharge education.</p>	<p>Year 1 goal/s to continue in Year 2.</p> <p><u>Summary</u></p> <p>Stoplight zones are be updated and verified with each partner. Mew Case Managers will be oriented to the Stoplight Zone document and the resources are being implemented in the CM discharge follow-up call.</p>	<p>Year 1 & 2 goal/s to continue in Year 3.</p> <p><u>Summary</u></p> <p>The Stop Light Zones were verified with NMC Health partners. CM utilizes Zone education in d/c planning.</p> <p>The Zone resource is also a tool for CM in post discharge follow-up patient calls.</p>	<p>MO = Stoplight Zone patient information sheet.</p> <p>The Stoplight Zone information sheet was approved and implemented for use June 2021. Revisions and reorientation have occurred over the past 6 months.</p>

PRIORITY 2 Increase Mental & Behavioral Health Services and Education

2.1.1 SUBSTANCE ABUSE SCREENINGS

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Mental Health and Behavioral Health Services and Education -Depression -Substance Abuse	Manage Risk	Executive Director of Clinical Outcomes	Formulate community collaboration with local entity for on-campus/emergency department Substance Abuse Center of Kansas (SACK) assessments	<p>Implement <24-hour substance abuse placement assessment.</p> <p><u>Summary</u></p> <p>MIRROR staff are available to do same day assessments at NMC Health. Process for completion of these assessments are ongoing as of the end of March; 18 assessments had been completed.</p>	<p>Year 1 goals to continue in Year 2.</p> <p><u>Summary</u></p> <p>MIRROR continues to be available for assessments. MIRROR reports this quarter they are most often able to cover or find coverage of cost. Patients have been referred to MIRROR, but utilization of the assessments has been minimal.</p>	<p>NMC Health Social Worker will routinely meet and connect with MIRROR staff to assess the completion of assessments.</p> <p><u>Summary</u></p> <p>MIRROR continues to be available but most often reports they are “booked full.”</p>	<p>MO= Number of onsite SACK assessments completed</p> <p># sacks <u>0</u></p> <p>Executive Director of Clinical Outcomes continues to evaluate expanding SACK assessments for NMC Health.</p>

2.1.2 OPIOID TASK FORCE

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Mental Health and Behavioral Health Services and Education -Depression -Substance Abuse	Manage Risk	Emergency Department Social Worker	NMC Health will have representation in the Harvey County Opioid Task Force	<p>NMC Health will participate in the Harvey County Opioid Task Force.</p> <p><u>Summary</u></p> <p>The ED Social Worker serves on the task force. The task force has not met since the beginning of the pandemic.</p> <p>Mary Karst (RT) attends the STAND meetings which have resumed and address drug and smoking prevention.</p>	<p>Year 1 goal/s to continue in Year 2.</p> <p><u>Summary</u></p> <p>Opioid Task Force has not met. Its goals have been assumed under the Drug Free Youth Coalition. New SW to lead collaboration efforts with NMC Health D-FY. Mary Karst remains active with STAND</p>	<p>NMC Health Social Worker will attend and contribute to the Opioid Task Force.</p> <p><u>Summary</u></p> <p>Case Manager serves on the Harvey County Resource Council; closely communicates with Prairie View; Law Enforcement.</p>	<p>NMC Health will delegate one representative to the Harvey County Opioid Task Force</p> <p>NMC Health has had a representative to this task force, while active, for the course of this plan.</p>

2.1.3 WORKPLACE VIOLENCE MITIGATION

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Mental Health and Behavioral Health Services and Education -Depression -Substance Abuse	Manage Risk	Social Work/ Associate Chief Nursing Officer	Design annual workplace violence safety seminar for community partners	Offer one educational offering (with Continuing Education Unit's) for community members regarding work place violence mitigation. <u>Summary</u> NMC Health participated in the community safety fair in the Spring of 2021 with education in areas of safety in the workplace.	Offer one educational offering (with Continuing Education Unit's) for community members regarding work place safety. <u>Summary</u> This Activity will be reevaluated by the ACNO.	This activity is terminated.	MO= Number of educational CEU offerings on work place violence mitigation This activity was terminated due NMC Health not having a presenter who has expertise in this field available.

2.2.1 TRANSPORTATION

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Mental Health and Behavioral Health Services and Education -Depression -Substance Abuse	Enhance Access	Executive Director of Clinical Outcomes and designated Case Management Social Worker	Establish reliable/timely transportation for behavioral health patients from the Emergency Department	Maintain contracts with transportation services for behavioral health patients. <u>Summary</u> A contract initiated with 1 st Choice Security on 10/14/20 with plans to add a second secure transport. Case Management is working on additional contracts so NMC Health will have access to three services instead of one.	Maintain contracts with transportation services for behavioral health patients. <u>Summary</u> Contracts remain current and transportation services are available. EDCO evaluates cost and reports accordingly.	Year 1 & 2 goal/s will continue in year 3. <u>Summary</u> Three contracts remain current and transportation services are available. NMC Health is experiencing higher costs which are due to increased numbers of behavioral health transfers.	MO = Number of vouchers issued from NMC Health for the Find a Way transportation program Approximately 90 cab vouchers provided 2020-2023. Total value of cab vouchers is reflected in Total Community Benefit, included in 3.5.1 reporting.

2.2.2 PARA-MEDICINE SERVICES

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Mental Health and Behavioral Health Services and Education -Depression -Substance Abuse	Enhance Access	Designated Case Management Social Worker	Coordinate services for referred para-medicine population	Provide follow-up referral care for 70% of para-medicine referrals for FY 2021. <u>Summary</u> A new updated system from Newton Fire and EMS sends an email with referrals each Monday. Follow up completed on 100% of referrals received.	Provide follow-up referral care for 70% of para-medicine referrals for FY 2022. <u>Summary</u> Hesston EMS will reach out to Newton EMS to review program. Hesston EMS Director Russ Buller will contact NMC Health for meeting with Case Management at appropriate time.	Provide follow-up referral care for 85% of para-medicine referrals for FY 2023. <u>Summary</u> Case Management reviews the Paramedicine list for those present in ED or an acute admission, for follow up. With completion of staff onboarding in CM, the CM workflow will be assessed for the Social Worker's capacity to review and address all of Paramedicine list.	MO= Number of follow up referrals/ total number of para-medicine referrals Over a three-year period, <u>121</u> Paramedicine referrals have been received for follow up by Case Management staff.

2.2.3 EXPANDING CONTINUUM OF CARE SUPPORT

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Mental Health and Behavioral Health Services and Education -Depression -Substance Abuse	Enhance Access	Chief Clinical Officer	Evaluation of expanding continuum of care support for behavioral health population	<p>Complete assessment of continuum of care gaps and service offerings evaluation for FY 2021.</p> <p><u>Summary</u></p> <p>Participated in and applied to be a State Institutional Alternative (SIA) site with Kansas Department for Aging and Disability Services (KDADS).</p> <p>Case Management continues to meet with Mirror, Prairie View, Ember Hope, Res Care, for communication and education.</p>	<p>Active collaboration as a State Institutional Alternative facility.</p> <p><u>Summary</u></p> <p>In April 2022 NMC Health became a designated State Institutional Alternative Site.</p> <p>Ember Hope is opening a new 12-bed psych care for 12-18 y.o. females who are from w/in 60 miles of Newton.</p>	<p>NMC Health will continue to provide active collaboration as a State Alternative Facility.</p> <p>NMC Health will continue ad hoc meetings with local mental/behavioral health services to enable collaboration, communication and education opportunities. (HP, 4/2022)</p> <p><u>Summary</u></p> <p>NMC Health Status as a State Institutional Alternative Site continues. Utilization is low due to potential candidates not meeting admission criteria.</p>	<p>MO= Assessment completed</p> <p>The status of State Institutional Alternative facility was received in April of 2022.</p>

2.2.4 CONTEMPLATION PATHWAY

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Health and Behavioral Health Services and Education -Depression -Substance Abuse	Enhance Access	Case Management Year 3-moved to Director of Volunteer Services	Construct contemplation path on NMC campus for FY 2021	Complete contemplation path for community meditation and spiritual health intervention. <u>Summary</u> The Walking Path/Contemplation Path was completed with help from a local Eagle Scout. The path received the new name of “Life Path.” With assistance from the Chaplain, a free prayer guide was developed for those using the path.	Planned use of the Life Path for meditation and spiritual health. <u>Summary</u> The Life Path continued in use and a new prayer guide was developed. Coordination of the Life Path was moved to the new Director of Volunteers in collaboration with the future chaplain.	Re-engage Chaplaincy Services in spiritual and emotional support for patients, families and staff. <u>Summary</u> Life Path continued. Sunshine Cart begins making rounds. A Comfort Care Companion program is in development. Recruiting volunteers with training to begin in the next Quarter.	Contemplation pathway implemented The Chaplaincy program was revitalized in FY 2023 with the onboarding of a part-time chaplain and an expanded group of volunteer chaplains. Spiritual support to patients is provided through face-to-face visits and to employees via spiritual experiences offered in the chapel.

2.3.1 MENTAL HEALTH SOCIAL POSTS

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Mental Health and Behavioral Health Services and Education -Depression -Substance Abuse	Provide Education	Chief Operating Officer/Marketing Director	Provide educational postings on social media regarding mental health	Provide five postings per FY regarding Mental Health. <u>Summary</u> 4-5 mental health topics are posted on the average per quarter. Topics include: signs & symptoms, depression, suicide, PTSD, addiction, self-care, sleep, parenting, trauma, mental health screening, education courses, and caregiver support. Three blogs on managing mental health during COVID-19.	Goals will continue as outlined in Year 1. <u>Summary</u> Continued posting 4-5 mental health topics on the average per quarter.	Year 1&2 goals continue into Year 3. <u>Summary</u> Continued posting 4-5 mental health topics on the average per quarter.	MO= Number of completed posts and number of people who may have read posts. 55 posts, 3 blogs NMC Health’s social media posts averaged organic (unpaid) impressions of 1000-1500 people per post, according to SEMrush reporting.

PRIORITY 3 Increase Economic Stability

3.1.1 SOCIAL DETERMINATES OF HEALTH ASSESSMENT

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Economic Stability -Food security -Housing stability -Poverty	Manage Risk	Executive Director of Clinical Outcomes	Social Determinants of Health (SDoH) assessment	Initiate SDoH assessment and documentation for inpatients. <u>Summary</u> Disseminated annual assessment data with impacted community partners. Summary SDOH are being collected on all patients in a bed. IT is working with Hospitalists to place SDOH in the discharge summary for review and for coding purposes. See Appendix B	Year 1 goal/s to continue in Year 2. <u>Summary</u> See Appendix B Key areas continue to be: <ul style="list-style-type: none"> • Low Income • Alcohol/Drug addiction in the family • Unemployed • Dependent relative living in the home 	Year 3 NMC Health will work towards further use of the SDoH data collected towards readmissions assessments, along with Health Equity data. <u>Summary</u> See Appendix B Key areas continue to be: <ul style="list-style-type: none"> • Low Income • Alcohol/Drug addiction in the family • Unemployed • Dependent relative living in the home 	MO= Number of SDoH assessment completed/ total number of inpatient admissions SDOH's are completed with each Case Management in/outpatient visit. The top four identified areas of SDOH's are reported quarterly. MO= Number of health histories coded with SDoH *1,462 SDoH assessments have taken place since July 1, 2022. EDCO is currently assessing opportunity of data stratification and patient impact from SDoH data collected.

*based on Business Clinical Analytics reporting

3.2.1 FOOD INSECURITY

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Economic Stability -food security -Housing stability -Poverty	Enhance Access	Chief Operating Officer or designee	No-till Giving Garden at NMC Collaborate with YMCA in family/youth cooking programing and garden usage	Share produce from Giving Garden with community members. <u>Summary</u> A sidewalk to increase access was added in late Fall of 2020. Till garden to be planted May 2021.	Year 1 goal/s to continue in Year 2. <u>Summary</u> Garden has failed in the first 2 years of this concept. NMC will not pursue for a 3 rd year. Given current hospital condition here and across the US. it's not for us to plant gardens and orchards – it's not where we have expertise nor bandwidth. The hospital will direct those in need to local food banks and public farmers markets.	NMC will not pursue for a 3rd year.	MO= The Newton Community is aware of and has access to the NMC Giving Garden This project was terminated in early 2022 due to NMC Health not having the expertise to plant and maintain gardens and orchards.

3.2.2 MEALS ON WHEELS

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Economic Stability -food security -Housing stability -Poverty	Enhance Access	Chief Operating Officer and Director of Food & Nutrition Services	Meals on Wheels (MOW) -this program brings healthy nutrition to older adults (nutrition as an element that may help to prevent or mitigate some chronic diseases	NMC Health will meet the increased need identified by # MOW meals. <u>Summary</u> The peak number of meals per day reached 95 during the pandemic. Share the Love Fundraiser was held to honor former Food and Nutrition Services director Robert Kidd who lost his life to COVID in January. This fundraiser raised 1,635 virtual box lunches surpassing the previous year's total of 660. This year the lunch boxes were shared with area seniors in need rather than being consumed by the supporter themselves.	Year 1 goal/s to continue in Year 2. <u>Summary</u> Average of 79 meals/day Share the Love Fundraiser continues with the proceeds going to the Meals on Wheels program.	Year 1&2 goals continue into Year 3. <u>Summary</u> Average of 86 meals/day Share the Love Fundraiser continues with the proceeds going to the Meals on Wheels program.	MO= Number of meals provided through MOW program NMC prepared and served Meals on Wheel's meals at an average of 2,473 meals per month. For the term of this plan that per month average would total 89,028 meals served.

3.2.3 PATIENT ACCESS TO MEDICAL EQUIPMENT

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Economic Stability -food security -Housing stability -Poverty	Enhance Access	Executive Director of Clinical Outcomes	<p>Caring Closet established and funded to meet patient medication, clothing and medical equipment needs at discharge</p> <p>Free Closet</p>	<p>Expand distribution of food and clothing to patients and families with an identified need for FY 2021.</p> <p><u>Summary</u></p> <p>From July 2020-March 2021 \$2,400.69 was dispersed for food, clothing, medication, and transportation with an increased in demand for clothing and food during the pandemic.</p> <p>The annual employee Christmas donations raised \$3600 for the Caring Closet along with donation of a medication organizer and glucometers.</p> <p>A quilt raffle fundraiser in the Spring of 2021 raised an additional \$1000 for the closet.</p> <p>Home Care and Private Duty services host a Free Closet for those clients cannot afford medical items.</p>	<p>Year 1 goal/s to continue in Year 2.</p> <p><u>Summary</u></p> <p>Caring Closet average contributions per quarter were\$798.87</p>	<p>Year 1 & 2 goal/s to continue in Year 3.</p> <p><u>Summary</u></p> <p>\$386.35 average per quarter given through the Caring Closet</p> <p>Annual Fund Raiser of gift baskets raised \$591</p>	<p>MO= Dollar amount of assistance provided</p> <p>Total dollar amount, \$7203.94, contributed to patient needs from the Caring Closet in 2020-2023 are reflected in Total Community Benefit, included within report.</p>

3.3.1 PROJECT SEARCH

Priority	Strategy	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Economic Stability -food security -Housing stability -Poverty	Provide Education	Chief Operating Officer or designee	Project Search Participants <ul style="list-style-type: none"> Continued partnership with this program that helps participants develop skills for employment 	Engage participants in Newton Medical Center culture and care to gain skills for employment. <u>Summary</u> Participants returned to the hospital for skills development in early 2021 following an absence due to the pandemic. On May 14, 2021 four Project Search Interns received their certificates of completion for this program.	Continue goal from Year 1. <u>Summary</u> Project search participants continue to contribute to NMC Health with their presence in house. We see five to seven participants each academic year. Five Project Search Intern graduates were celebrated at NMC Health on May 13, 2022. NMC Health is beginning to see some of these participants move into employment here.	Year 1&2 goals continue into Year 3. <u>Summary</u> Four to seven Project Search participants were present at NMC Health this academic year.	MO= Number of project search participants who gain employment after graduation A total of 21 Project Search participants have been served during this plan.

3.4.1 HEALTH SCIENCE ACADEMY

Priority	Strategy	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Economic Stability -food security -Housing stability -Poverty	Stabilize Workforce	Human Resource	Offer Health Science Academy	Organize engaged learning sessions for attendees of Health Science Academy. <u>Summary</u> Discussions were held at the community level for incorporating the CDC Health Literacy curriculum to this age group. Funds requests for this program were incorporated into the Harvey County BCBS Pathways grant. In person classes resumed during second semester. NMC Health staff resumed presentations virtually or in person.	Year 1 goal/s to continue in Year 2. <u>Summary</u> Health Science sessions have resumed. The Quality Department presentation in December contained CDC and AHRQ health literacy content.	Year 3 NMC Health to continue participation in this program. <u>Summary</u> Quality Management will utilize the CDC curriculum regarding Health Literacy for the second year.	MO= Presenters will report one learning activity per presentation A total of three presentations have included Health Literacy since December of 2021

3.4.2 STUDENT EXPERIENCES

Priority	Strategy	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
<p>Plan rotation schedules for high school and college students interested in health care workforce opportunities</p> <p>July 27, 2021 Medical, Nursing and Clinical education students (286 students) logged 2231 clinical hours for FY 2021. NHS students will resume in the Fall.</p> <p>Oct. 26, 2021 Collegiate clinical education has resumed at full capacity. NHS observations are limited.</p>	<p>NMC Health will plan rotation schedules for high school and college students interested in health care workforce opportunities.</p> <p>NMC Health will assess opportunity to host on-site CNA, phlebotomy and surgical scrub tech courses by December 31, 2022 (HP, 4/22)</p>	Chief Clinical Officer	Offer shadow, practicum and clinical experiences to high school and college students	<p>Plan rotation schedules for high school and college students interested in health care workforce opportunities.</p> <p><u>Summary</u></p> <p>College and University programs/clinicals were held as scheduled pre-pandemic.</p>	<p>Plan rotation schedules for high school and college students interested in health care workforce opportunities.</p> <p><u>Summary</u></p> <p>Medical, Nursing and Clinical education students (286 students) logged 2231 clinical hours for FY 2021.</p>	<p>NMC Health will plan rotation schedules for high school/college students interested in health care workforce opportunities.</p> <p>NMC Health will assess opportunity to host on-site CNA, phlebotomy and surgical scrub tech courses by December 31, 2022 (HP, 4/22).</p> <p><u>Summary</u></p> <p>One staff member has elected to do the Scrub Tech Development program. This individual is an “on the job” ST trainee and plans to enter HCC ST program in the Fall. There is one other ST who participated in the “on the job” training and is currently still employed at NMC Health.</p>	<p>MO=Total number of student rotations Academic years 2020-2023.</p> <p>Total Rotations-227</p> <p>Total number of students served in the following areas.</p> <p>High School-45 job shadowing experiences</p> <p>College clinical education-435 students</p> <p>Medical School -185 Med students</p>

3.4.2 HEALTHCARE CAREER FAIRS

Priority	Strategy	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Economic Stability -food security -Housing stability -Poverty	Stabilize Workforce	Chief Operating Officer or designee	Engage in Healthcare Career Fairs Continue encouraging NMC Health employees to serve in educational advisory boards as requested	<p>Year 1 NMC Health will have presence at a minimum of one healthcare related career fair in FY 2021.</p> <p><u>Summary</u></p> <p>Planning for attendance at a summer health fair is in process.</p>	<p>Year 1 goal/s to continue in Year 2.</p> <p><u>Summary</u></p> <p>Numerous job fairs were attended in person and virtually: Career Fair at NHS and a rural Kansas career fair in Hesston HS WSU LPN class Kansas State Job Fair sponsored by KDOL</p>	<p>Year 3- NMC Health will continue participation in career fairs.</p> <p><u>Summary</u></p> <p>Park City Clinic Job Fair K-State Health Networking Night John Bardo Center WSU Job Fair Butler CC Career Fair October 24th – Newman Career Fair WSU main campus Ahlberg Hall Tabling event Southwestern College – Career Fair In House Job Fair</p>	<p>MO=NMC Health will have presence at one career fair to recruit persons for the labor pool</p> <p>NMC Health has participated in 15-17 job fairs per year since July 2021. The fairs have been a combination of virtual and in person with more in person as we have emerged from the pandemic.</p>

3.5.1 FINANCIAL ASSISTANCE

Priority	Strategies	Inputs	Activities	Outputs			Impact
		Resources & People		Short-term (Year 1)	Intermediate (Year 2)	Long Term (Year 3)	By June 30, 2023
Increase Economic Stability	Charitable Contribution	Chief Financial Officer and Director of Revenue Services	Contribute charitable funds to patients and community entities as deemed appropriate	<p>Year 1 Charitable contributions toward relief of patient account balances as appropriate.</p> <p><u>Summary</u></p> <p>NMC Health's Community Benefit total FYTD is \$2,427,863.00.</p> <p>Traditional Charity Care FYTD is at \$1,769,134.00.</p> <p>Charitable contributions to community entities per Administrative discernment</p>	<p>Year 1 goal/s to continue in Year 2.</p> <p><u>Summary</u></p> <p>NMC Health Community Benefit FY2022 \$3,094,148.00</p> <p>Charity Care total for FY 2022 \$1,968,153.00</p>	<p>Year 1 & 2 goals continue to Year 3 with a Charitable contribution amount of \$2,791,464.</p> <p><u>Summary-Year End</u></p> <p><u>Community Benefit</u> FYTD-\$2,780,144.00</p> <p><u>Traditional Charity Care</u> \$1,466,254.00</p>	<p>MO= Total dollars contributed toward community need through the NMC Health's Community Benefit Funds</p> <p>\$8,302,155.00</p>

Appendix A

Community Health Needs Assessment – *Prevent and Manage Chronic Disease* Annual Health Screening Campaign (Y1-Y3)

Calendar Overview

July	-Y1-Y3: Safe Care Commitment campaign encouraged continued screenings and wellness visits overall in the midst of the pandemic -Y3: COVID-19 Awareness (as needed throughout the year)	January	-Y1-Y3: Flu Shot Awareness -Y1-Y2: COVID-19 Prevention -Y1-Y3: Ice/Fall Prevention (Shake It, Don't Break It)
August	-Y1-Y3: Immunization Awareness Month -Y1-Y3: Opioid Misuse Prevention Day	February	-Y1-Y3: American Heart Month -Y1-Y3: Cardiac Calcium Score Screening
September	-Y1-Y3: National Cholesterol Education Month -Y1-Y3: Thyroid Cancer Awareness Month -Y1-Y3: Sepsis Awareness Month	March	-Y1-Y3: Colorectal Cancer Awareness Month -Y1-Y3: World Teen Mental Wellness Day -Y1-Y3: American Nutrition Month (connect Diabetes Education)
October	-Y1-Y3: Breast Cancer Awareness Month -Y2-Y3: Lung Health Awareness Month	April	-Y1-Y3: Parkinson's Awareness Month -Y2-Y3: Alcohol Awareness Month
November	-Y1-Y3: Alzheimer's Disease Awareness Month -Y1-Y3: COPD Awareness Month -Y1-Y2: Prematurity Awareness Month -Y1-Y3: Diabetes Awareness Month	May	-Y1-Y3: American Stroke Month -Y1-Y3: Asthma Awareness Week -Y1-Y3: National Osteoporosis Month -Y1-Y3: Own The Bone -Y1-Y2: Women's Lung Health Week -Y2-Y3: Mental Health Awareness Month
December	-Y1-Y3: National Handwashing Awareness Week -Y2-Y3: Flu Awareness	June	-Y1-Y3: Men's Health Month

Appendix A

NMC Health | Health Education & Awareness Campaign Summary of Social Media Posting FY2021-2023

Completed social post overview

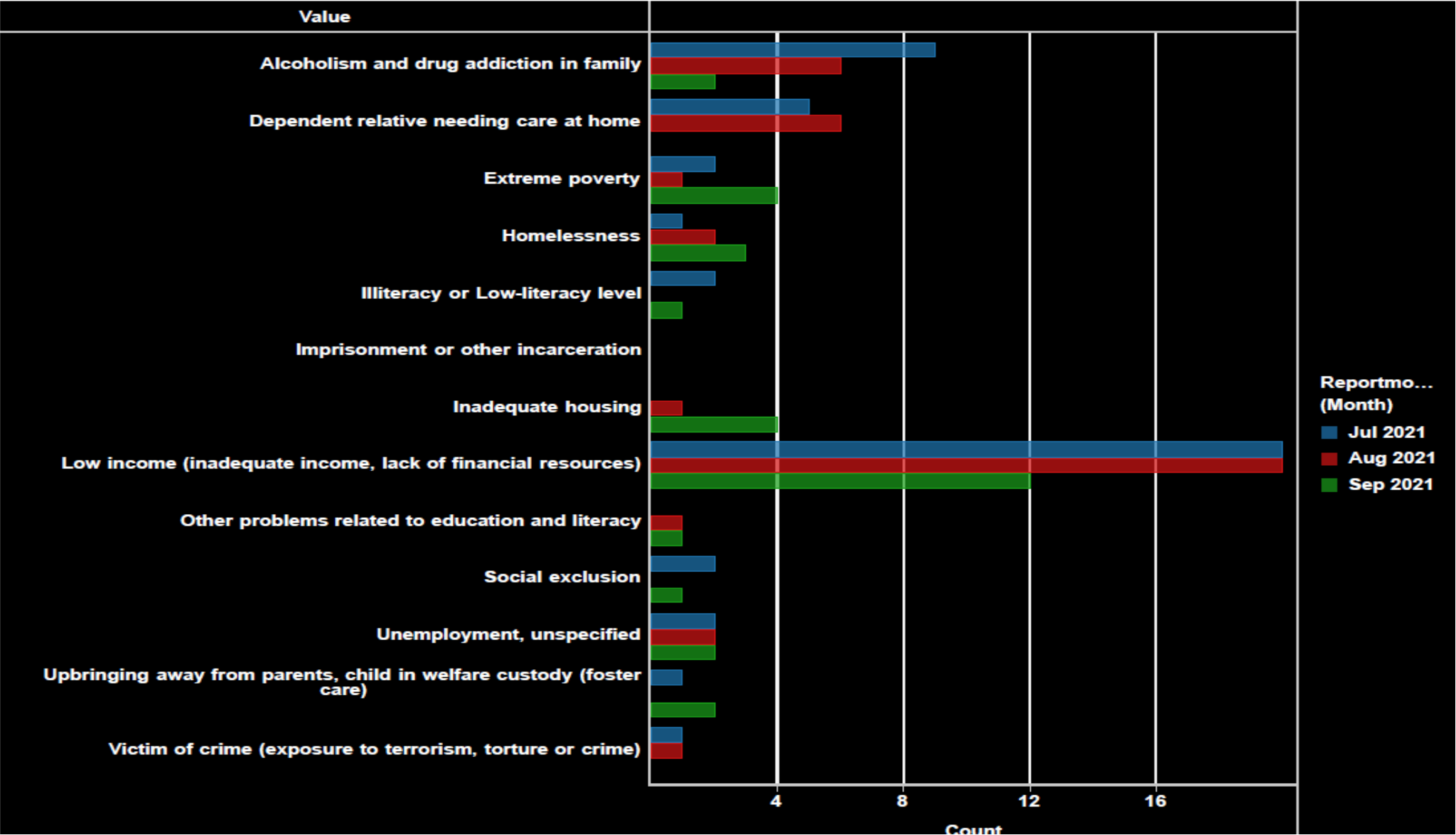
Topic Area & Frequency of Annual Social Media Posts	2020-2021	2021-2022	2022-2023
Addiction (drugs, alcohol)	9	14	8
Asthma & Lung Health	3	8	13
Blood Shortage & Donating	0	5	5
Cancer (a variety of conditions)	14	5	15
Community Health Planning	2	1	10
COVID-19	104	36	4
Decisions Day	0	2	1
Dementia/Alzheimer's	12	4	13
Diabetes	15	13	21
Earth Day	1	1	1
Emergency Preparedness/ First Aid	6	4	10
Fitness & Healthy Lifestyle Campus	18	6	2
General Health (gender, race, condition)	9	9	38
Hand Hygiene/Infection Control	2	2	5
Harvey County Safety/Health Fairs	0	2	2
Headache/Migraine/Concussion		3	3
Health Literacy/Financial Education	7	4	11
Heart Health	8	5	7
Holiday/Seasonal Safety	19	10	14
SUBTOTAL	229	134	183

Topic Area & Frequency of Annual Social Media Posts	2020-2021	2021-2022	2022-2023
Immunizations/Flu Prevention	12	1	8
Liver Health	0	1	3
Meals on Wheels/Share the Love	2	1	3
Mental Health (depression, suicide, self-care, abuse prevention)	24	12	19
Mother/Infant Health & Safety	19	9	15
Nutrition/Healthy Eating	17	5	11
Osteoporosis/Own The Bone	3	3	2
Parenting Support	1	0	6
Parkinson's Disease	3	1	2
Sepsis	2	1	2
Sleep Health	1	3	6
Slip/Fall Prevention	3	4	2
Stroke	4	1	2
Walkie Talkie	6	12	12
Weather Safety	14	31	9
Wellness Screenings	10	6	20
Workplace Safety	1	2	3
SUBTOTAL	122	93	125
ANNUAL TOTAL	351	227	308
MONTHLY AVERAGE	29.3	18.9	25.7

Social media post content focused on awareness, education, signs & symptoms, prevention, screenings, recovery, statistics, and/or support options. Posts include unique NMC Health content and shared content from local, state, and national healthcare experts. Posts may feature text, images, infographics, video, links to experts and/or links to additional resources on mynmchealth.org. Posts appeared on a minimum of one and maximum of all these social media channels: Facebook, Instagram, LinkedIn, Twitter.

APPENDIX B

FY 2022 Q1 SDOH Stats

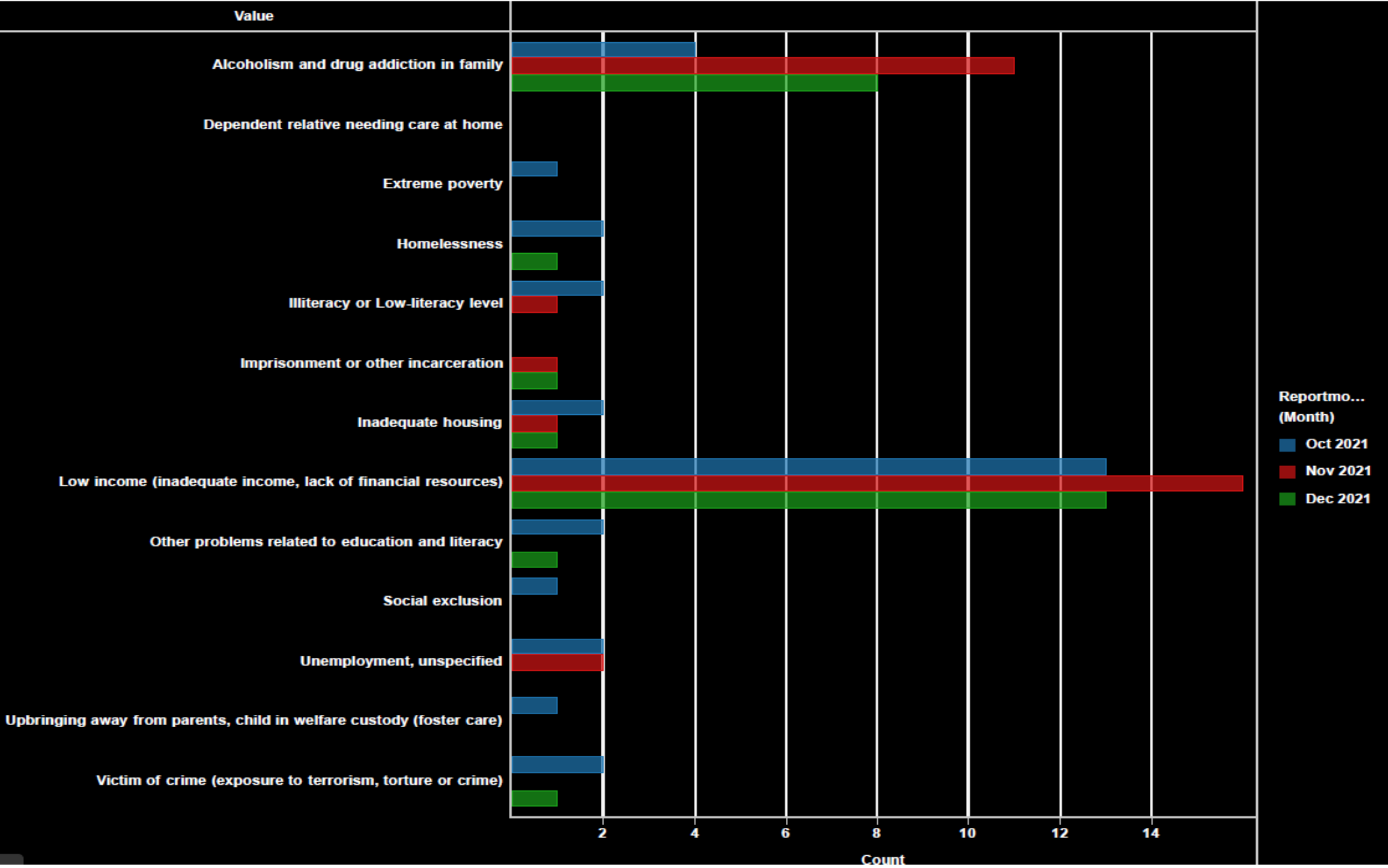


Low income/lack of resources-52

ETOH/Drug addiction in the family-17

Dependent relative needing care at home- 11

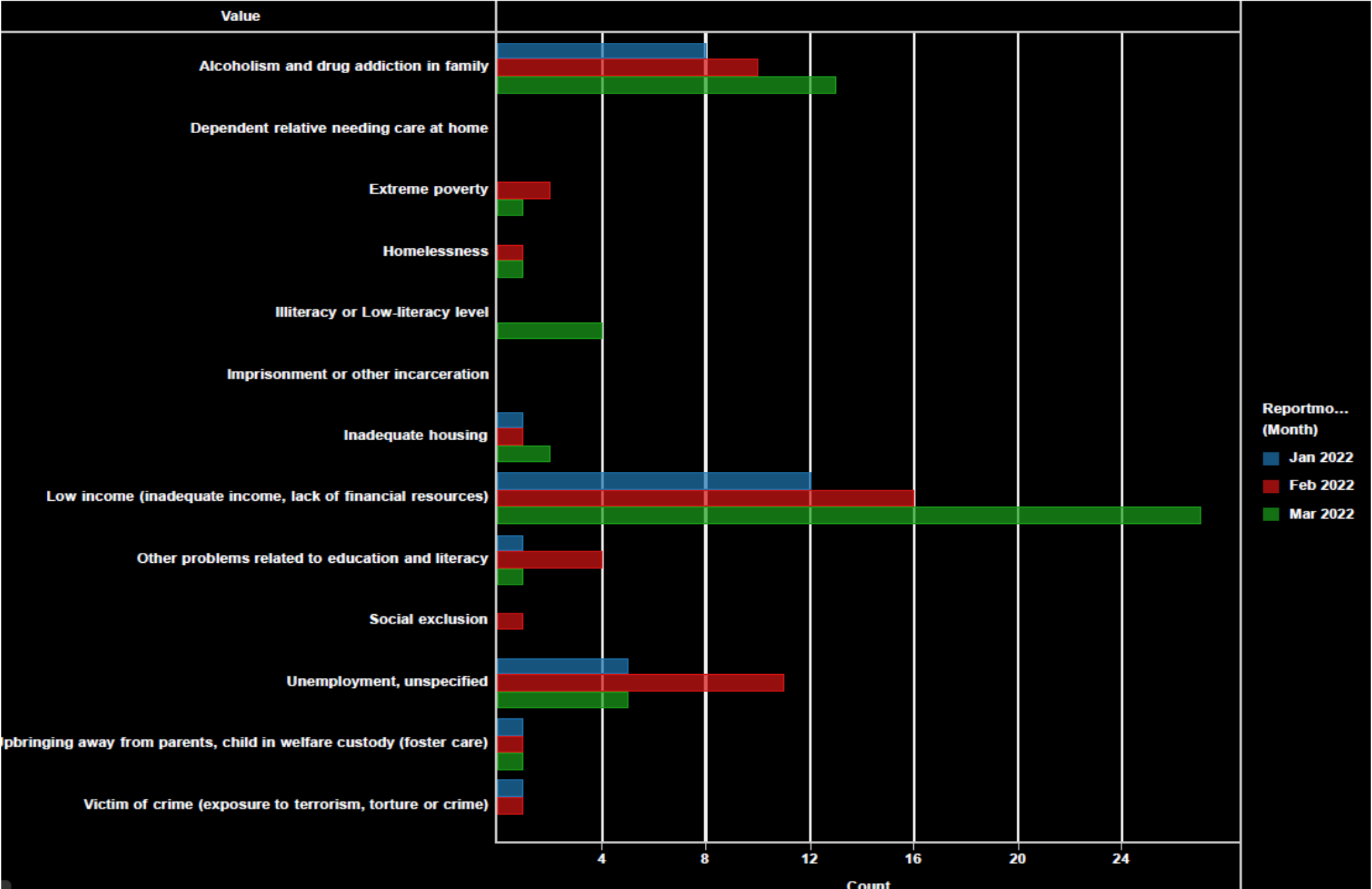
FY 2022 Q2 SDOH Stats



Low income/lack of resources-42

ETOH/Drug addiction in the family-24

FY 2022 Q3 SDOH Stats



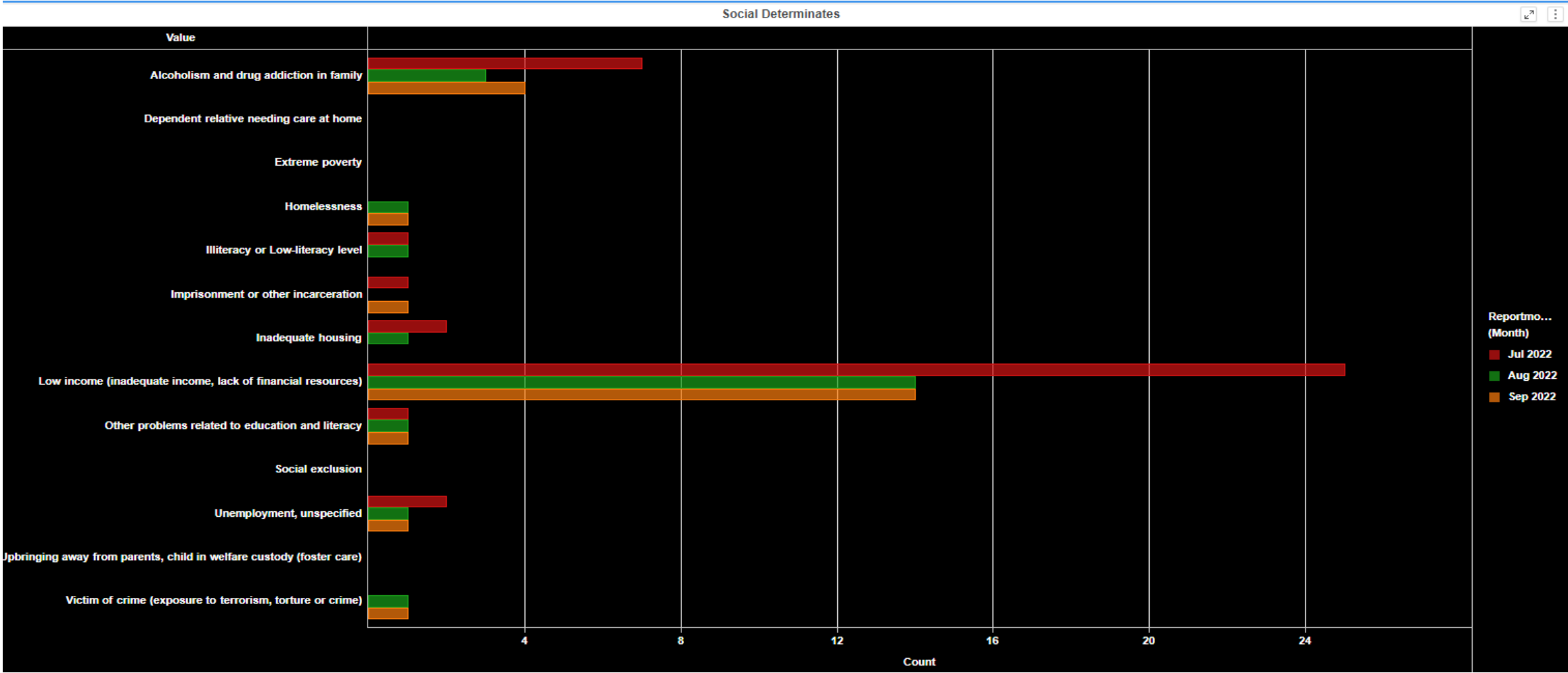
Low income/lack of resources-55

ETOH/Drug addiction in the family-31

Unemployed-21

FY 2023 Q1 SDOH-184 assessments completed

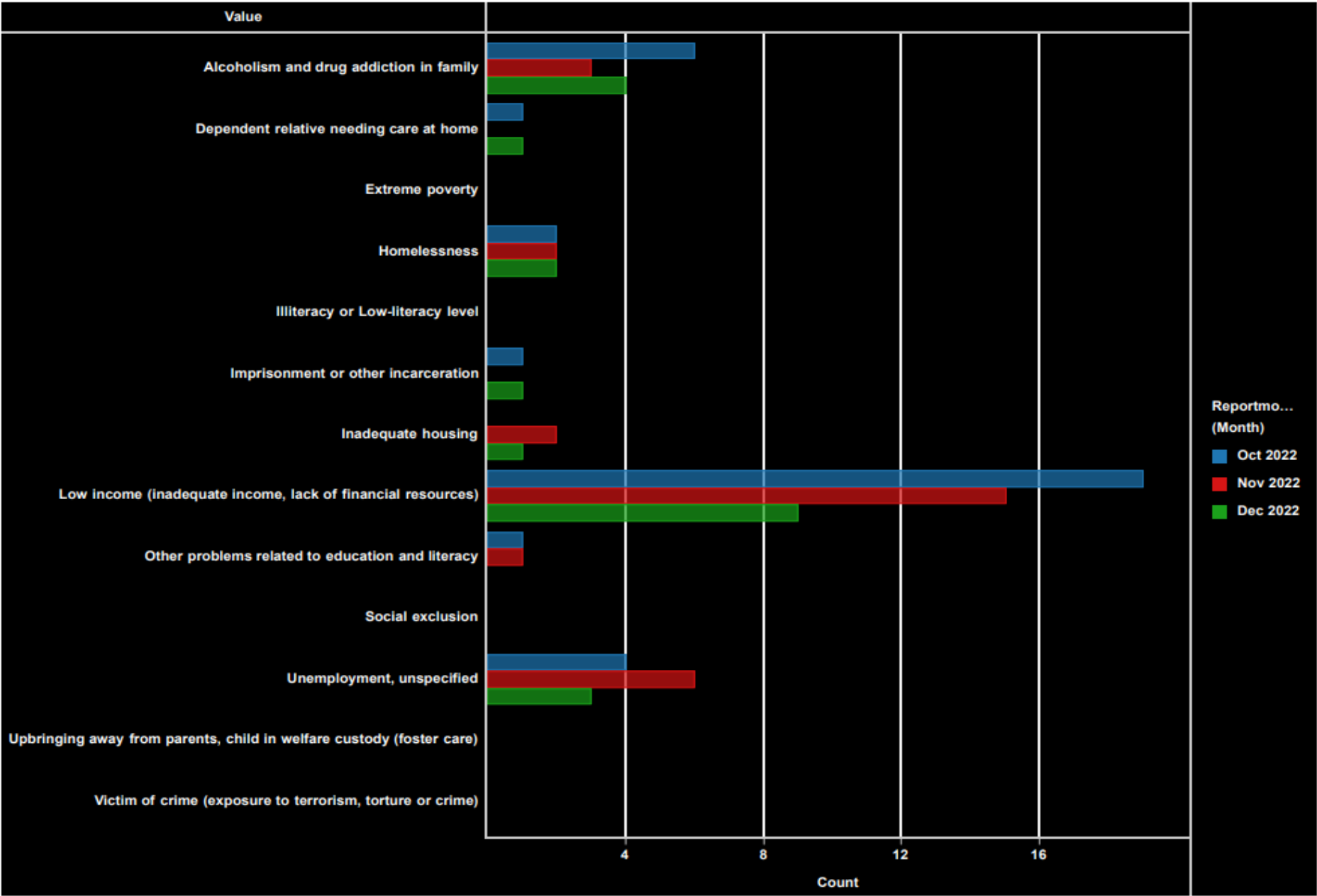
☐ (All) ☐ Oct 2021 ☐ Nov 2021 ☐ Dec 2021 ☐ Jan 2022 ☐ Feb 2022 ☐ Mar 2022 ☐ Apr 2022 ☐ May 2022 ☐ Jun 2022 ☒ Jul 2022 ☒ Aug 2022 ☒ Sep 2022 ☐ Oct 2022



FY 2023 Q2 SDOH-184 assessments completed

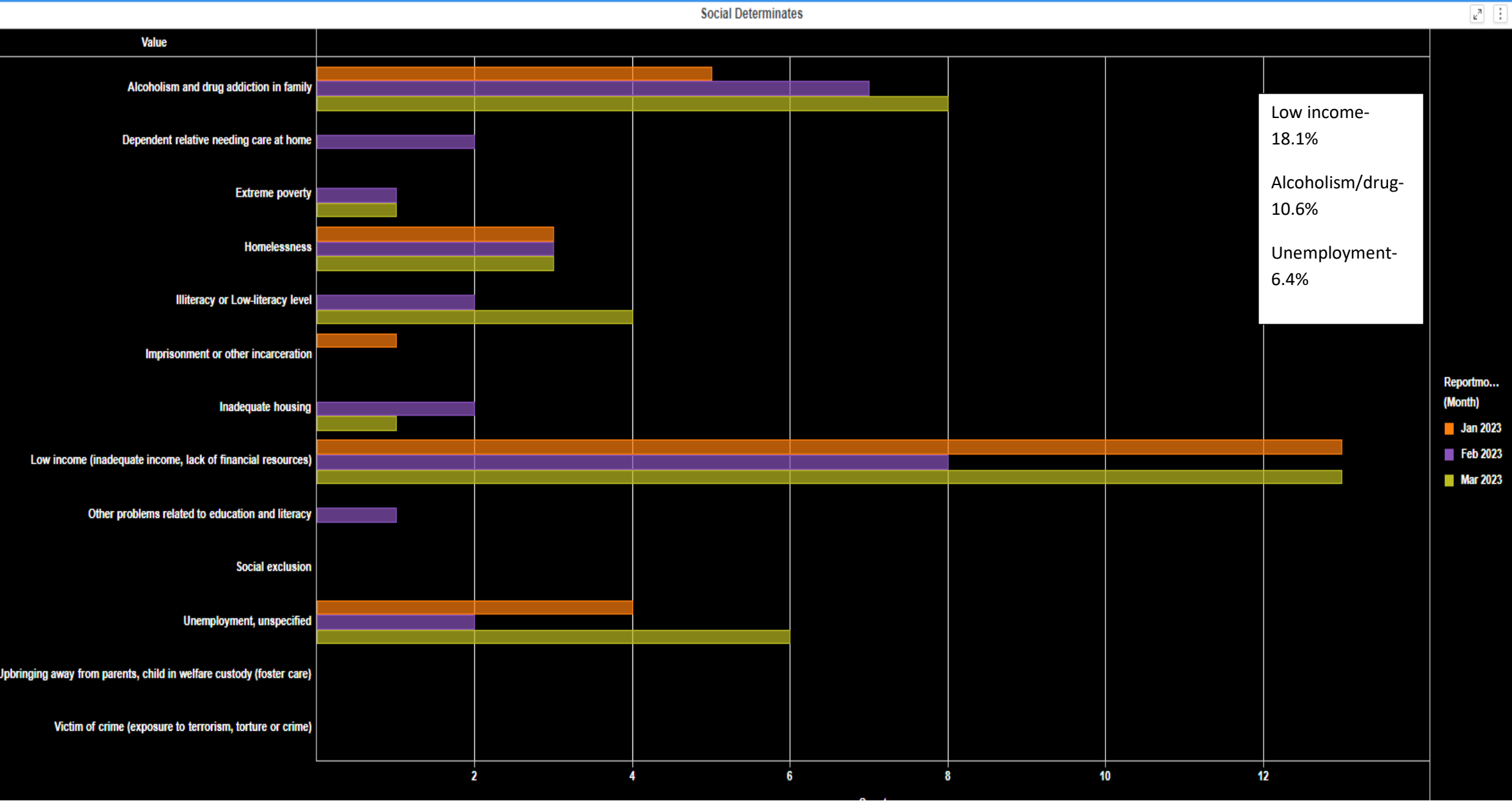
NMC_DBA_Social_Determinates_of_Health

SocialDeterminin - Panel 1 - Social Determinates



FY 2023 Q3 SDOH-188 assessments completed

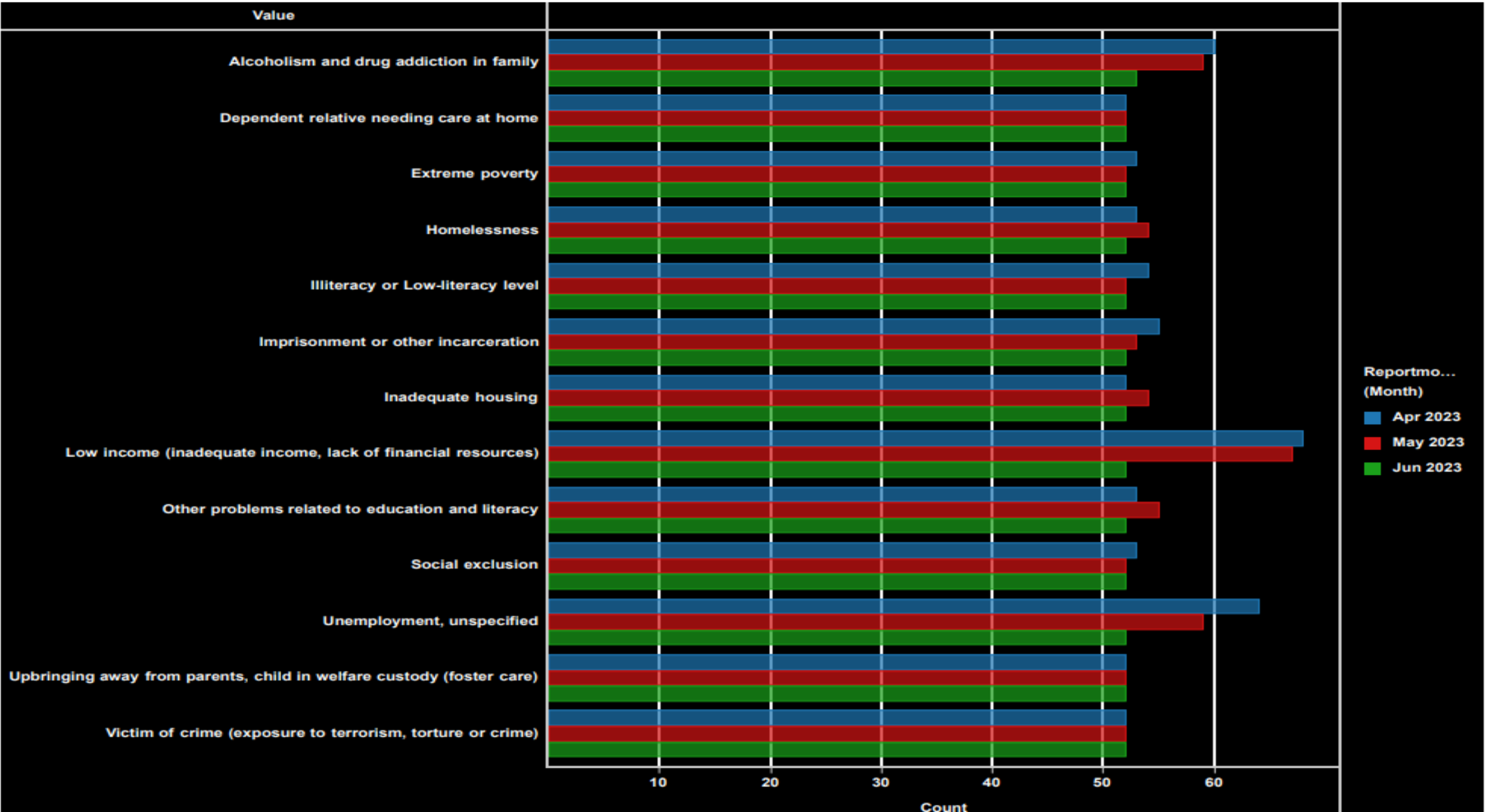
☐ (All) ☐ May 2022 ☐ Jun 2022 ☐ Jul 2022 ☐ Aug 2022 ☐ Sep 2022 ☐ Oct 2022 ☐ Nov 2022 ☐ Dec 2022 ☒ Jan 2023 ☒ Feb 2023 ☒ Mar 2023 ☐ Apr 2023



SDOH Q3 FY 2023

NMC_DBA_Social_Determinates_of_Health

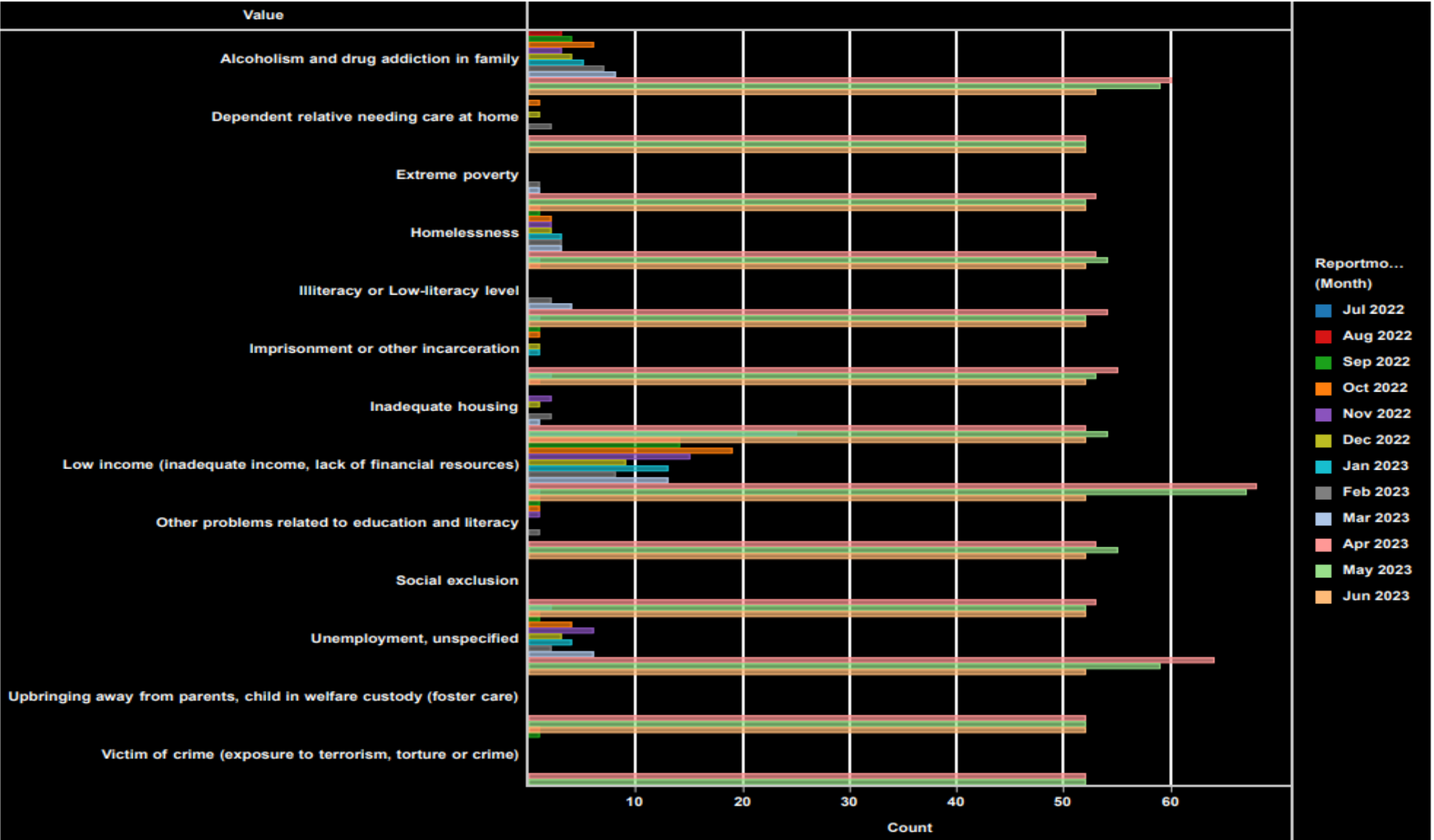
SocialDetermin - Panel 1 - Social Determinates



FY 2023 SDOH

NMC_DBA_Social_Determinates_of_Health

SocialDetermin - Panel 1 - Social Determinates



GLOSSARY OF ABBREVIATIONS

A1C – Hemoglobin A1C or HbA1c test measuring blood sugar levels in a patient over the past three months
ACCO – Associate Chief Clinical Officer
ACNO – Associate Chief Nursing Officer
ADA – American Diabetes Association
AHRQ – Agency for Healthcare Research and Quality
APRN – Advanced Practice Registered Nurse
AT – Athletic Trainer
BCBS – Blue Cross Blue Shield
Ca++ CT – Cardiac Calcium Score CT scan
CC – Community College
CCO – Chief Clinical Officer
CDC – Centers for Disease Control
CCM – Chronic Care Manager
CEU – Continuing Education Unit
CHF – Congestive Heart Failure
CM – Case Management department
CMO – Chief Medical Officer
CNA – Certified Nursing Assistant
COO – Chief Operating Officer
COPD – Chronic Obstructive Pulmonary Disease
CT – Computerized Tomography scan which takes x-rays from different angles around a patient’s body
CY – Current Year
DEXA – Dual X-ray Absorptiometry scan that measures bone density
D-FY – Drug-Free Youth
ED – Emergency Department
EDCO – Executive Director of Clinical Outcomes
EMR – Electronic Medical Record system
EMS – Emergency Medical Services
FBC – Family Birthing Center

FY – Fiscal Year (July – June)
FYTD – Fiscal Year To Date
HCC – Hutchinson Community College
HP – Healthy People
IRU – Inpatient Rehabilitation Unit
IT – Information Technology department
KDOL – Kansas Department of Labor
KIDS – Kansas Infant Death and SIDS
LPN – Licensed Practical Nurse
LTC – Long Term Care facility
MO – Measurable Outcome
MOW – Meals on Wheels
MRI – Magnetic Resonance Imaging which uses a large magnet and radio waves to look at organs and structures inside a patient’s body
NMC – NMC Health, formerly Newton Medical Center
NHS – Newton High School
P&P – Policies & Procedures
PA-C – Physician Assistant-Certified
PET – Positron Emission Tomography which is an imaging test that can help reveal metabolic or biochemical function of tissues and organs
PPE – Personal Protective Equipment
PTSD – Post Traumatic Stress Disorder
Q1-Q4 – Represents three-month Quarters 1-4 within a fiscal year
RN – Registered Nurse
RT – Respiratory Therapist
SACK – Substance Abuse Center of Kansas
SDoH or SDOH – Social Determinants of Health
SHSMD – Society of Healthcare Strategy and Market Development
ST – Scrub Tech
SW – Social Worker
WSU – Wichita State University

This document was reviewed and approved by the
NMC Health Board of Directors on September 7, 2023.

Questions and concerns about NMC Health's Community Health Implementation
Strategy may be directed to the Department of Quality Management via email to
Sondra.Leatherman@mynmchealth.org

